

**Department of Legislative Services**  
Maryland General Assembly  
2026 Session

**FISCAL AND POLICY NOTE**  
**First Reader**

Senate Bill 113

(Chair, Finance Committee)(By Request - Departmental -  
Aging)

Finance

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**Human Services - Department of Aging and Commission on Aging (The  
Longevity Ready Maryland Act)**

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This departmental bill codifies the “Longevity Ready Maryland (LRM) Plan,” and requires the Secretary of Aging to lead implementation of the LRM Plan with the goals of: (1) building a longevity ecosystem; (2) promoting economic opportunity; (3) preparing State residents to afford longevity; and (4) optimizing health, wellness, and mobility. By July 1, 2029, and every four years thereafter, the Secretary must provide the Governor and the General Assembly with an updated comprehensive LRM Plan. By January 1 each year, the Secretary must report to the Governor and the General Assembly on specified activities. The bill alters the membership and duties of the Commission on Aging. The bill also makes conforming changes.

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**Fiscal Summary**

**State Effect:** None. The bill generally codifies existing policies and procedures.

**Local Effect:** None. The bill generally codifies existing policies and procedures.

**Small Business Effect:** The Maryland Department of Aging (MDOA) has determined that this bill has a meaningful impact on small businesses (attached). The Department of Legislative Services (DLS) disagrees with this assessment as discussed below.

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**Analysis**

**Bill Summary:**

*Longevity Ready Maryland Plan*

“Longevity Ready Maryland Plan” means a multisector plan on aging that (1) transforms

programs, services, policies, institutions, and systems to address the growing population of older adults; and (2) incorporates streamlined, innovative approaches to aging services.

To implement the LRM Plan, the Secretary of Aging must: (1) evaluate the service needs of older adults in the State; (2) determine the extent to which existing public and private programs, policies, institutions, and systems support older adults; (3) establish priorities for meeting the needs of older adults; and (4) coordinate, assess and evaluate, and educate the public and professionals about all State and local programs and services, both public and private, that relate and are important to the well-being of older adults in the State.

The Secretary must:

- represent the interests of older adults by serving as an advocate for policy, systems, and institutional change at all levels of government and within the private sector in support of the LRM Plan;
- emphasize cross-sector collaboration, including consulting and advising units of State government and State boards and commissions about any action the unit, board, or commission may take to assist in implementing the LRM Plan;
- consult with the Commission on Aging on implementation of the LRM Plan;
- provide consultation and technical assistance to organizations and other entities or persons developing local services for older adults in partnership with area agencies on aging (AAAs) and other organizations and entities funded by the department;
- maintain a system that provides information, referrals, and counseling for older adults and their caregivers related to the interests of older adults and the implementation of the LRM Plan; and
- review and recommend legislation and other policy action to the Governor on publicly funded plans, programs, institutions, and systems that affect older adults and the implementation of the LRM Plan.

By July 1, 2029, and every four years thereafter, the Secretary must provide an updated comprehensive LRM Plan that, among other things, includes progress made on existing goals, objectives, and strategies identified in the immediately preceding LRM Plan; maintains existing goals and includes any additional goals; and updates objectives and strategies (if appropriate) based on evolving circumstances and population projections.

### *Reporting Requirement*

By January 1 each year, the Secretary must submit a report that includes a summary of: (1) the progress made during the immediately preceding year to implement the most recently published comprehensive LRM Plan; (2) recommendations for legislation, policy change, or other related planning or advocacy efforts made by the Commission on Aging

to the department; (3) any study, survey, or other form of research conducted by the department or commission; and (4) any available research and best practices reviewed by the commission.

### *Commission on Aging*

The bill alters the membership of the commission by (1) repealing the nonvoting status of the two legislative members and specifying that such members are appointed by the President of the Senate and the Speaker of the House (rather than by the Governor); (2) adding the Secretary of Aging (or their designee); and (3) adding the following members, appointed by the Governor: one director of an AAA, serving as the President of the Maryland Association of Area Agencies on Aging; three representatives of organizations located in the State that advocate for older adults and caregivers; five experts on aging representing the disciplines of health care, technology, academia, innovation, and the private sector and philanthropy; and five individuals with a demonstrated interest in the implementation of the LRM Plan.

The bill repeals the requirement that 11 members be selected to reflect the geographic diversity of the State and because of their interest in the needs of seniors and the requirement that at least 7 members be at least 55 years old. Instead, the bill specifies that, to the extent practicable, commission membership must reflect the age, race, ethnicity, disability, gender identity, sexual orientation, immigrant heritage, lived and professional experience, and regional geographic representation diversity of the State. A member of the commission who fails to attend at least 50% of the meetings during any consecutive 12-month period must be considered to have resigned.

The Secretary must designate the chair of the commission and may designate a vice chair. The chair may establish subcommittees. The commission may consult and collaborate with local commissions on aging. The commission must determine the frequency, dates, times, and places of its meetings. A majority of the members serving on the commission is a quorum. MDOA must provide staff for the commission.

The commission must:

- review and advise the department on the LRM Plan and overall progress of the department and multisector partners in implementing the recommendations of the most recently published LRM Plan;
- advise the Secretary on the legislative, policy, and other systems changes that could assist with implementation of the LRM Plan; and
- advise the Secretary on any update to the LRM Plan, including any update to the goals, objectives, and strategies to be included in subsequent LRM Plans.

## **Current Law:**

### *Maryland Department of Aging*

MDOA coordinates, evaluates, and plans the delivery of services for, and advocates on behalf of, older adults at all levels of government. The department also administers programs and activities under the provisions of the federal Older Americans Act.

The Secretary of Aging must:

- evaluate the service needs of seniors in the State;
- determine the extent to which existing public and private programs meet the needs of seniors;
- establish priorities for meeting the needs of seniors;
- coordinate, assess and evaluate, and educate the public and professionals about all State and local programs and services, both public and private, that relate and are important to the well-being of seniors in the State, including in the areas of income maintenance, public health, mental health, housing and urban development, employment, education, recreation, and rehabilitation of seniors with physical or mental disabilities;
- develop a statewide plan incorporating local plans for a comprehensive and coordinated system of health, social, and community services for seniors, including housing, and institutional and noninstitutional care;
- represent the interests of seniors by serving as an advocate at all levels of government;
- consult with and advise the secretaries of the principal departments of State government about the programs and services for seniors that are the primary responsibility of those departments;
- consult with the Commission on Aging on all matters pertaining to programs for seniors;
- provide consultation and technical assistance to communities and civic groups developing local services for seniors;
- maintain a clearinghouse of information related to the interests of seniors; and
- review and recommend policies to the Governor on publicly funded plans and programs that affect seniors.

By January 1 each year, the Secretary must submit a report to the Governor and the General Assembly that must include information regarding the operation and performance of accessible housing services counseling provided by the Aging and Disability Resource Center Program and, with the advice and recommendation of the Commission of Aging,

(1) a description of the senior citizen activities centers in each county; (2) the allocation and use of funds made available for senior citizen activities centers; (3) the results of any studies; and (4) any recommendations for legislation.

### *Longevity-Ready Maryland Initiative*

On January 3, 2024, Governor Wes Moore issued [Executive Order 01.01.2024.01](#) to direct MDOA to develop and implement the Longevity-Ready Maryland Initiative, a multisector plan to evaluate existing services, support, and care options for older adults and recommend a plan of action to address demographic trends, such as the falling birth rate and longer life spans of residents in Maryland. The Secretary of Aging must (1) convene workgroups to develop and implement the initiative and (2) engage and coordinate with independent State agencies, federal, State, local partners, and private entities to gather information that may assist in the development of the initiative.

The initiative must:

- evaluate the utility of existing services, support, and care options for older adults, including those with different abilities;
- review current data and establish a comprehensive framework of policies and programs that seek to improve and support the health, well-being, and quality of life for older adults;
- set forth a plan to transform the infrastructure and coordination of services among State agencies for older adults;
- identify goals with measurable outcomes, necessary to implement the initiative; and
- include specified recommendations.

On June 26, 2025, MDOA released the required interim report ([The Longevity Ready Maryland Plan](#)) summarizing the findings and recommendations of the initiative, and a proposed development timeline to implement the initiative.

### *Commission on Aging*

The commission consists of 13 members appointed by the Governor: (1) 1 member of the Senate of Maryland, who may not vote; (2) 1 member of the House of Delegates, who may not vote; and (3) 11 members selected to reflect the geographic diversity of the State and because of their interest in the needs of seniors. At least 7 members must be at least 55 years old. From among the members of the commission, the Governor must designate a chair.

The commission must (1) exercise the powers and perform the duties specified in Title 10 of the Human Services Article; (2) review ongoing statewide programs and activities for seniors and new statewide programs for seniors before the programs are implemented; and (3) make recommendations to the Secretary about statewide programs and activities for seniors.

**Background:** MDOA advises that the bill largely codifies Executive Order 01.01.2024.01 by defining the LRM Plan, identifying the plan's overarching goals, and updating the duties of the Secretary of Aging to manage implementation of the LRM Plan. Required annual reporting on the progress of the LRM Plan, in addition to a four-year comprehensive update to the LRM Plan, aligns with the department's existing required federal reporting. Accordingly, MDOA advises that the bill replaces outdated language regarding MDOA's role, from focusing solely on the service needs of older adults, to instead reflect a new, broader function of advocating for relevant legislation, policies, systems, and institutional change within the State.

MDOA further advises that the department is currently the agency responsible for staffing the Commission on Aging. The bill updates the commission's membership and scope of work to allow the commission to function as an advisory group for LRM Plan implementation.

**Small Business Effect:** DLS advises that, since the bill largely codifies Executive Order 01.01.2024.01, any economic impact on small business is not a direct result of the bill.

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### Additional Information

**Recent Prior Introductions:** Similar legislation has not been introduced within the last three years.

**Designated Cross File:** HB 278 (Chair, Health Committee)(By Request - Departmental - Aging) - Health.

**Information Source(s):** Maryland Department of Aging; Department of Legislative Services

**Fiscal Note History:** First Reader - January 26, 2026  
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## **ANALYSIS OF ECONOMIC IMPACT ON SMALL BUSINESSES**

TITLE OF BILL: Human Services - Department of Aging and Commission on Aging (The Longevity Ready Maryland Act)

BILL NUMBER: SB113

PREPARED BY: Andrea Nunez, MDOA (Aging)

### **PART A. ECONOMIC IMPACT RATING**

This agency estimates that the proposed bill:

☐ WILL HAVE MINIMAL OR NO ECONOMIC IMPACT ON MARYLAND SMALL BUSINESS

**OR**

☒ WILL HAVE MEANINGFUL ECONOMIC IMPACT ON MARYLAND SMALL BUSINESSES

### **PART B. ECONOMIC IMPACT ANALYSIS**

The bill's embrace of the state's all-of-government and multisector approach to preparing for longer lives and our growing older adult population will grow our economy and have positive small business impact. As the preamble of the bill text notes in stunning statistics, older adults are a growing, powerful workforce and powerful contributor to the state's GDP and economic success. Longevity Ready Maryland Plan implementation over the coming decades will emphasize a multigenerational workforce, upskilling older adults, and greater support for formal and informal caregivers of all ages, among many other topics as described in the initial Plan. All of these types of state systems improvements will benefit Maryland small businesses. They'll benefit from more older Marylanders staying in the workforce or returning to work, providing care for family members, and their significant spending power as consumers. As more older Marylanders remain in Maryland with a more Longevity Ready state, not only does our state tax picture benefit, but small businesses benefit from their availability as capable, available part-time or full-time workers, and their spending.