Report of the
Health and Human
Services Subcommittee
To the Senate Budget and Taxation Committee
2023 SESSION

Recommendations, Reductions, and Summary of Action Pertaining to:
House Bill 200
General Assembly of Maryland

Senate Budget and Taxation Committee
Health and Human Services Subcommittee

2023 Session Membership Roster

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Senator J.B. Jennings
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### Recommended Reductions

**Health and Human Services Subcommittee**

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<th>Agency</th>
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**Committee Narrative**

**D11A04.01 Executive Direction**

**Cost Estimates for Regulation of Interpreters:** Fraudulent American Sign Language (ASL) interpretation inhibits deaf and hard of hearing individuals’ ability to access complete and accurate information critical to enable them to live safely and independently. Maryland lacks a statewide certification or registration requirement for ASL interpreters working in the State. Policy options put forth by the Office of Deaf and Hard of Hearing (ODHH) in response to committee narrative in the 2020 Joint Chairmen’s Report were to enact legislation that establishes a State licensing board managed by ODHH to ensure that interpreters working in Maryland hold proper certifications, amend existing statute to require ODHH to regulate ASL interpreters, develop a Maryland State quality assurance program or participate in the existing State of Texas Board for Evaluation of Interpreters certification program to assess interpreters’ skills and knowledge (a quality assurance effort rather than a licensing or regulatory program), or authorize through statute a right to action as a mechanism to hold fraudulent interpreters accountable.

The committees request that ODHH submit a report with the following information for each of the policy recommendations listed previously:

- the State agency that would lead or participate in implementation and management of any related functions;
- estimated costs to the State for each policy option; and
- potential challenges or drawbacks to implementing the recommended policies.

<table>
<thead>
<tr>
<th>Information Request</th>
<th>Author</th>
<th>Due Date</th>
</tr>
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<tbody>
<tr>
<td>Cost estimates for options to regulate interpreters</td>
<td>ODHH</td>
<td>August 31, 2023</td>
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Committee Narrative

D15A05.03 Governor’s Office of Small, Minority & Women Business Affairs

Agency Minority Business Enterprise (MBE) Participation Attainment and Liaison Surveys: The committees are concerned by the continued low MBE attainment in State procurement and that Small Business Reserve and MBE program liaison positions remain vacant in some State agencies. The committees request that the Governor’s Office of Small, Minority, and Women Business Affairs (GOSBA), in consultation with the Department of General Services (DGS), continue to administer the agency MBE participation and liaison surveys and report the results, by agency, to the committees on December 1, 2023.

Information Request

<table>
<thead>
<tr>
<th>Author</th>
<th>Due Date</th>
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<td>GOSBA</td>
<td>December 1, 2023</td>
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<td>DGS</td>
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Budget Amendments

D15A05.26 The Maryland Corps Program

Amend appropriation for the purposes indicated: Funds

Delete general funds for the Maryland Corps program, as this is duplicative of the funding and mission established within the new Department of Service and Civic Innovation.

-5,000,000 GF

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<th>Allowance</th>
<th>Appropriation</th>
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Amendment No. __________
Committee Narrative

D26A07.01 General Administration

Program Participation and Waitlists: Preliminary fiscal 2023 data suggests that during the first half of the fiscal year, waitlists in Senior Care, the Senior Assisted Living Subsidy (SALS), and the Congregate Housing Services Program (CHSP) increased, and participation in each program decreased despite increased funding for each program. The committees are interested in continuing to monitor the waitlists in these programs. The Maryland Department of Aging (MDOA) should submit a report with data as of June 30, 2023, with the following information:

- the number of individuals on waitlists for Senior Care, SALS, and CHSP in each of the local Area Agencies on Aging (AAA) that provide these services;
- the number of individuals participating in Senior Care, SALS, and CHSP in each of the local AAAs that provide these services;
- amount of funding allocated to each local AAA for each program with waitlists (Senior Care, SALS, CHSP) in fiscal 2023;
- actual local AAA expenditures on each program in fiscal 2023, including funding that may have been realigned between programs;
- MDOA-approved fiscal 2024 spending plans by jurisdiction for these programs; and
- strategies MDOA will adopt to support AAAs to reduce waitlists and how fiscal 2024 funding will support these efforts.

Information Request

Author    Due Date
Report on waitlists and program participation MDOA    September 29, 2023

Update on Federal Stimulus Spending: As of December 2023, the Maryland Department of Aging (MDOA) reports that the local Area Agencies on Aging (AAA) had spent 60% of its Coronavirus Response and Relief Supplemental Appropriation (CRRSA) award, which expires September 2023. As of December 2022, MDOA has not shared its spending plan or actual expenditures of American Rescue Plan Act (ARPA) funding, which expires September 2024. The committees are interested in monitoring MDOA’s ongoing efforts to ensure that these funds are spent prior to expiration. As a result, the committees request that MDOA submit two reports with an update on MDOA’s spending plan for the remaining stimulus funding. MDOA should...
submit a report with data as of August 1, 2023, and February 1, 2024, with the following information:

- expenditures to date by source of federal stimulus funding for the CRRSA and the ARPA by AAA; and
- fiscal 2024 spending timelines by local AAA and MDOA administrative costs of CRRSA and ARPA funds.

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<thead>
<tr>
<th>Information Request</th>
<th>Author</th>
<th>Due Date</th>
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<td>Update on federal stimulus spending</td>
<td>MDOA</td>
<td>September 1, 2023</td>
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<td>March 1, 2024</td>
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**Update on Human Services Administrator II (HSA II) Recruitment:** The HSA II role with the Maryland Department of Aging (MDOA) has remained vacant since October 2020. The HSA II position is a skilled service position overseeing the Senior Assisted Living Subsidy program and the Congregate Housing Services Program. The committees request that MDOA submit an update on the recruitment of the HSA II position, including:

- indication of the position’s filled or vacant status as of the submission of the report;
- if applicable, candidate’s anticipated date of response to an offer;
- stage and status of recruitment, if vacant at time of report submission; and
- recruitment strategy employed.

<table>
<thead>
<tr>
<th>Information Request</th>
<th>Author</th>
<th>Due Date</th>
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<tbody>
<tr>
<td>Update on HSA II recruitment</td>
<td>MDOA</td>
<td>August 1, 2023</td>
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</tbody>
</table>
Employee Recruitment and Retention Update: The Maryland Commission on Civil Rights (MCCR) indicates that high workloads and inability to offer competitive salaries to investigative staff impede recruitment and retention efforts. The committees request that MCCR submit a report providing the following information:

- number of individuals by classification that have left the agency fiscal 2020 through the close of fiscal 2023;
- length of tenure in dates;
- analysis of the reasons given by employee for leaving, if available;
- number of these individuals by fiscal year leaving the agency that took a comparable position, if available; and
- description of recruitment and retention efforts undertaken in fiscal 2022.

Information Request

<table>
<thead>
<tr>
<th>Information Request</th>
<th>Author</th>
<th>Due Date</th>
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<tbody>
<tr>
<td>Employee recruitment and retention update</td>
<td>MCCR</td>
<td>September 15, 2023</td>
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</table>

Update on Backlogged and Open Cases: The Maryland Commission on Civil Rights (MCCR) most recently reported a backlog of 273 cases that have yet to be assigned to an investigator. As of October 2022, there were 435 open cases, 431 of which were unresolved for more than one year. The committees request a report providing an update with the following data as of July 1, 2023:

- current number of open and pending cases, by case type;
- number of cases that have been unresolved for more than one year;
- average case processing times by case type for fiscal 2023;
- number of filled investigator staff positions and caseload size by unit; and
• current average staff to caseload ratios by case type and a comparison to the staff to caseload ratios held at similar offices in other jurisdictions.

<table>
<thead>
<tr>
<th>Information Request</th>
<th>Author</th>
<th>Due Date</th>
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<tr>
<td>Update on backlogged and open cases</td>
<td>MCCR</td>
<td>September 15, 2023</td>
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D50H01
Military Department

Budget Amendments

D50H01.05  State Operations

Amend the following language on the general fund appropriation:

```
provided that $5,000,000 of this appropriation is contingent on the enactment of legislation to establish a program that provides health benefits to national guard members.  provided that $250,000 of this appropriation is contingent on the enactment of legislation to establish a program that provides health benefits to National Guard members
```

**Explanation:** This action is a technical amendment to strike/amend language making funding contingent on the enactment of legislation. A separate action deletes/modifies the funding for the program to provide $250,000.

Amendment No. __________

Amend appropriation for the purposes indicated:

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Amendment No. __________
Committee Narrative

Health Insurance for National Guard Members: The committees are interested in health insurance for National Guard members. The committees request that the Military Department submit a report by December 15, 2023, including the number of National Guard members with health insurance separated by health insurance available due to their service in the National Guard; insurance provided due to employment by the federal government, insurance provided due to employment by State government, or other governmental health insurance; and private insurance. For those receiving health insurance due to their service in the National Guard through Tricare Reserve Select, the report should also detail information on the number of participants for each of the regular and dental programs, including whether the individuals are in single or family plans, as well as the average premium for each.

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<th>Information Request</th>
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<tr>
<td>Report on health benefits for National Guard members</td>
<td>Military Department</td>
<td>December 15, 2023</td>
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</table>
Add the following language to the general fund appropriation:

provided that $50,000 of this appropriation made for the purpose of agency administration may not be expended until the State Archives submits a report detailing a plan for filling all positions that became vacant on or before December 31, 2021. The report shall include a position description for each applicable vacancy, the salary for that position, and the estimated timeline for filling each position. The report shall be submitted by October 1, 2023, and the budget committees shall have 45 days from the date of the receipt of the report to review and comment. Funds restricted pending the receipt of a report may not be transferred by budget amendment or otherwise to any other purpose and shall revert to the General Fund if the report is not submitted to the budget committees.

Explanation: The State Archives currently has multiple positions which have been vacant for longer than one calendar year. This language restricts funds from the State Archives until the agency submits a report with a timeline for filling positions that have been vacant for more than one full calendar year, along with the salary and job descriptions for each vacant position.

### Information Request

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<td>Plan for filling long-term vacancies</td>
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<td>October 1, 2023</td>
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Amendment No. __________
Committee Narrative

D78Y01.01 Maryland Health Benefit Exchange

**State Innovation Waiver Applications:** The Maryland Health Benefit Exchange (MHBE) has indicated that it is considering submitting additional State Innovation Waiver applications, including to extend the State Reinsurance Program. Given the implications of these waivers on the activities of the agency and the budget for the agency, the committees are interested in remaining informed of MHBE’s activities in these areas. The committees request that MHBE notify the committees of any applications for State Innovation Waivers that it submits during fiscal 2024 and the financial decision of those applications.

**Information Request**

<table>
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<tr>
<th>Information Request</th>
<th>Author</th>
<th>Due Date</th>
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<tr>
<td>Notification of applications for State Innovation Waivers and decisions on those applications</td>
<td>MHBE</td>
<td>As needed, within 20 days of any application and decision on any application</td>
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**Reinsurance Program Costs and Forecasts:** The committees are interested in monitoring the costs of the State Reinsurance Program and future funding needs. The committees request that the Maryland Health Benefit Exchange (MHBE) submit a report that provides an updated forecast of spending and funding needs.

**Information Request**

<table>
<thead>
<tr>
<th>Information Request</th>
<th>Author</th>
<th>Due Date</th>
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<tbody>
<tr>
<td>Reinsurance program costs and forecast</td>
<td>MHBE</td>
<td>September 30, 2023</td>
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Committee Narrative

D91A01.01 General Administration

Managing for Results (MFR): MFR is imbedded in the State budget process. MFR has agencies develop a mission statement, a vision statement, key goals, objectives, and performance indicators linked to the key goals. MFR measures for agencies are included with the State budget in the Governor’s budget books. As a new agency, the West North Avenue Development Authority (WNADA) has not yet developed MFR measures. WNADA should develop MFR mission, vision, key goals, objectives, and performance indicators and report them with the fiscal 2025 budget.

Information Request | Author | Due Date
--- | --- | ---
MFR mission, vision, key goals, objectives, and performance measures | WNADA | With the fiscal 2025 budget submission

Grants Manual: The West North Avenue Development Authority’s (WNADA) fiscal 2024 budget includes $10 million for grant awards. WNADA has identified development zones that will receive funding, but the authority has not yet determined the process for awarding specific grants. WNADA advises that it expects to have a process like the competitive grant processes used by the Department of Housing and Community Development (DHCD). For its neighborhood revitalization program, DHCD has a 25-page manual to provide guidance about the application process, review process, post-award requirements, contract information, and special considerations. The manual also includes checklists to simplify the process. By December 29, 2023, WNADA should prepare a manual to provide a simpler and transparent review process.

Information Request | Author | Due Date
--- | --- | ---
WNADA grants manual | WNADA | December 29, 2023
Committee Narrative

E50C00.02 Real Property Valuation

Real Property Valuation: The committees continue to be concerned about the number of vacancies within the Real Property Valuation Program. While the State Department of Assessments and Taxation (SDAT) has reported on this issue quarterly, the committees wish to remain briefed on this situation. The committees request that SDAT continue to submit quarterly reports, which should outline SDAT’s efforts to increase hiring, improve training processes, as well as the following for the quarter preceding the due date of the report:

- The number of employees in the program that have left State service (by employee class title and jurisdiction);
- The number of new hires (by employee class title and jurisdiction);
- The number of positions posted;
- The number of qualifying applicants received in response to each posting;
- The length of time from the posting of each position to the acceptance of an offer of employment;
- The amount of time it takes for the average hire to finish the training and probationary period;
- The average and median salaries for listed positions; and
- Average and median salaries for comparable positions in other surrounding states.

Information Request

<table>
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<th>Information Request</th>
<th>Author</th>
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<td>Status updates on staffing in the Real Property Valuation Program</td>
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<td>July 15, 2023</td>
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<td>April 15, 2024</td>
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E50C

E50C00.08 Property Tax Credit Programs

Homeowners’ Tax Credit (HTC) and Renters’ Tax Credit (RTC) Eligibility: The committees are concerned that the significant amount of time since eligibility requirements for the HTC and RTC were last altered is impacting the effectiveness of these programs by limiting eligibility because of the failure to keep up with inflation. The committees request that the State Department of Assessments and Taxation (SDAT) submit a report detailing recommendations for new requirements, including potential estimates of how altering the requirements will impact applications.

Information Request  Author  Due Date
Report on HTC and RTC eligibility requirements  SDAT  September 1, 2023

Tax Credit Programs Processing and Compliance Efforts: The committees are interested in better understanding the enforcement efforts of the State Department of Assessments and Taxation (SDAT) related to the tax credit programs and are concerned that SDAT is unable to estimate revenue loss from fraud. The committees request that SDAT submit a report on enforcement efforts that includes its plan for a proactive monitoring solution to identify lost revenue from the Homestead Tax Credit, Homeowner Tax Credit Program, Renters’ Tax Credit, and the Income Tax Offset Credit Programs. The report should include information on:

- agency plans to implement a continual proactive monitoring solution to identify revenue loss due to fraud;
- steps taken to estimate revenue loss due to fraud and any available estimate of revenue loss due to fraud separately for each tax credit program;
- the system(s) and/or partner(s) SDAT uses to identify and resolve fraudulent uses of the tax credit programs;
- a discussion of any delays regarding submitting or receiving Internal Revenue Service verification of income information and any impacts delays have on potentially qualified participants getting the tax credit;
- the efforts of the agency to increase program participation for the tax credit programs as well as data on participation within the programs; and
- the agency’s recent Homestead Tax Credit anti-fraud pilot program and any plans to expand the program to other counties.
Information Request  |  Authors  |  Due Date
--- | --- | ---
Report on fraud and lost revenue within the Homestead Tax Credit, Homeowner Tax Credit, and Income Tax Offset Credit programs  |  SDAT  |  October 1, 2023

**E50C00.09  Major Information Technology Development Projects**

**Cloud Revenue Integrated System (CRIS) Status:** The committees are concerned about how the impact of retention difficulties for technical staff may impact the completion of the CRIS project. The committees request that the State Department of Assessments and Taxation (SDAT) submit quarterly reports on the project status that include a description of project milestones and the date that each milestone is planned to be achieved, and a description of anticipated contingency planning activities throughout the year. In addition, each report should include the following:

- any vacancies within the project and how long those vacancies have been open;
- any actions taken by SDAT to fill the vacancies specified above; and
- how or if the vacancies within the project have affected project progression.

Information Request  |  Author  |  Due Date
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CRIS quarterly status report  |  SDAT  |  July 15, 2023
|  |  |  October 15, 2023
|  |  |  January 15, 2024
|  |  |  April 15, 2024
Committee Narrative

E80E00.01 Property Tax Assessment Appeals Boards

*Baltimore City Property Tax Assessment Appeals Board (PTAAB) Backlog:* At the end of calendar 2022, the backlog of property tax assessment appeals cases in Baltimore City was 511, while in similar jurisdictions elsewhere in the State, the backlog was only in the range of 200 to 300. The committees are concerned about the backlog of the property tax assessment appeals in Baltimore City. The committees request that PTAAB submit a report regarding a plan and timeline to address the property tax assessment backlog in Baltimore City.

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<thead>
<tr>
<th>Information Request</th>
<th>Author</th>
<th>Due Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Report on the Baltimore City PTAAB case backlog</td>
<td>PTAAB</td>
<td>September 1, 2023</td>
</tr>
</tbody>
</table>
Budget Amendments

M00A01.01 Executive Direction

Amend the following language to the general fund appropriation:

, provided that $218,233,288 109,116,644 of this appropriation is contingent upon enactment of legislation accelerating the implementation of Maryland’s minimum wage law

Explanation: This action is a technical amendment to align the funding that is contingent on legislation with the action taken to reduce the appropriation to provide the provider rate increase on January 1, 2024.

Add the following language to the general fund appropriation:

Further provided that $250,000 of this appropriation made for the purposes of Executive Direction may not be expended until the Maryland Department of Health (MDH) submits a report to the budget committees on staffing vacancies throughout MDH. The report shall address barriers to attracting and maintaining staff, including:

(1) a comparison of compensation at MDH and other comparable administrative positions at the federal and local levels;

(2) a comparison of compensation of direct care staff to other private and nonprofit health care settings;

(3) an evaluation of the impact of recent annual salary review adjustments and any other compensation benefits or incentives offered by MDH;

(4) discussion of recruitment and retention strategies for the MDH workforce; and

(5) the potential long-term impacts of the Facilities Master Plan on MDH staffing alignment.

The report shall be submitted by December 15, 2023, and the budget committees shall have 45 days from the date of the receipt of the report to review and comment. Funds restricted pending the receipt of a report may not be transferred by budget amendment or otherwise to any other purposes and shall revert to the General Fund if the report is not submitted to the budget committees.
**Explanation:** The committees are concerned about the persistently high vacancy rates in MDH. Language in the fiscal 2023 Budget Bill restricted funds pending a report on the reasons for vacancies and efforts to recruit and retain employees, which was to be submitted October 1, 2022. As of February 2, 2023, the report had not been submitted. As of December 31, 2022, the vacancy rate in the MDH Administration was 13.32%, overall higher than the same period the prior year, with high vacancy rates found in both direct care institutions and administration. This language restricts funds pending a report on barriers to recruitment and retention throughout MDH, including salary comparisons to other similar positions elsewhere in government or in different private or nonprofit care settings.

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<tr>
<th>Information Request</th>
<th>Author</th>
<th>Due Date</th>
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<tbody>
<tr>
<td>MDH staffing and salary</td>
<td>MDH</td>
<td>December 15, 2023</td>
</tr>
</tbody>
</table>

Information Request: MDH staffing and salary study

Add the following language to the general fund appropriation:

Further provided that $250,000 of this appropriation made for the purposes of Executive Direction may not be expended until the Maryland Department of Health submits a report to the budget committees on the time to placement for court-involved patients and efforts to improve the timeliness of placement to align with statutorily required timeframes. The report shall be submitted by July 1, 2023, and the budget committees shall have 45 days from the date of the receipt of the report to review and comment. Funds restricted pending the receipt of a report may not be transferred by budget amendment or otherwise to any other purposes and shall revert to the General Fund if the report is not submitted to the budget committees.

**Explanation:** The budget committees were concerned with the increasing delays seen in the placement for court-involved patients. Language in the fiscal 2023 Budget Bill restricted funds pending a report on this topic to be submitted by October 1, 2022, but as of February 13, 2023, had not been submitted. The legislative mandates have been in place since fiscal 2019 requiring individuals who are either incompetent to stand trial (IST) or not criminally responsible (NCR) to be admitted within 10 business days. While this mandate was largely met in the first year, subsequent years have had longer placement times for IST/NCR patients, and according to Managing for Results data, performance declined further in fiscal 2022. This language restricts funding pending a report on the reasons for placement delays and the efforts being made to improve the timeliness of placement for NCR/IST patients within the legislatively mandated 10-day period.

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<thead>
<tr>
<th>Information Request</th>
<th>Author</th>
<th>Due Date</th>
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</thead>
<tbody>
<tr>
<td>Efforts made to improve timeliness of NCR/IST placements</td>
<td>Maryland Department of Health</td>
<td>July 1, 2023</td>
</tr>
</tbody>
</table>
Add the following language to the general fund appropriation:

Further provided that $100,000 of this appropriation made for the purposes of Executive Direction may not be expended until the Maryland Department of Health submits a report on patient and staff safety, including how the Managing for Results data and measures are collected and calculated. The report shall be submitted by September 1, 2023, and the budget committees shall have 45 days from the date of the receipt of the report to review and comment. Funds restricted pending the receipt of a report may not be transferred by budget amendment or otherwise to any other purposes and shall revert to the General Fund if the report is not submitted to the budget committees.

Explanation: Committee narrative in the 2022 Joint Chairmen’s Report requested that the Maryland Department of Health (MDH) submit a report on efforts to improve reporting on measures of patient and staff safety and recommendations for uniform measures of patient and staff safety. Although updated Managing for Results (MFR) data was submitted for fiscal 2024, as of February 13, 2023, MDH had not submitted the associated report, and there is no description of how the data for the measure is collected and processed to produce the reported rate data in the MFR.

Information Request | Author | Due Date
--- | --- | ---
Uniform reporting of patient and staff safety measures | MDH | September 1, 2023

Add the following language to the general fund appropriation:

Further provided that $100,000 of this appropriation made for the purpose of administrative expenses may not be expended until the Maryland Department of Health (MDH) submits a report to the budget committees detailing ongoing operational impacts of the cybersecurity incident on agency operations including specifically the impacts on the licensing and renewal activities of the Health Professional Boards and Commissions. The report should include for the impact on Health Professional Boards and Commissions information on the number of licenses, renewals, and investigations that were delayed as a result of the incident as well as how MDH assisted the boards in addressing challenges in licensing processing and completing investigations that resulted from the impact of the incident on the systems of the Health Professional Boards and Commissions. The report shall be submitted by September 1, 2023, and the budget committees shall have 45 days from the date of the receipt of the report to review and comment. Funds restricted pending the receipt of a report may not be transferred by budget amendment or otherwise to any other purpose and shall be reverted if the report is not submitted to the budget committees.

Explanation: The 2022 Joint Chairmen’s Report included committee narrative requesting a report on the impact of the cybersecurity incident on the Health Professional Boards and Commissions. As of February 15, 2023, this report has not been submitted. This language
restricts funds in the Executive Direction Program of MDH pending a report on any ongoing impacts on agency operations of the incident as well as specific information on the impact on the Health Professional Boards and Commissions.

Information Request  

<table>
<thead>
<tr>
<th>Report on ongoing operational impacts of the cybersecurity incident</th>
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<tbody>
<tr>
<td>Author</td>
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<tr>
<td>Due Date</td>
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</table>

Amend appropriation for the purposes indicated:

1. Reduce Funds for the acceleration of provider rate increases. The funding in the fiscal 2024 allowance was provided for the full fiscal year. This action reduces the funding for acceleration of provider rate increases by 50% to provide a January 1, 2024 date for the acceleration of the provider rate increase.

<table>
<thead>
<tr>
<th>Effect</th>
<th>Allowance</th>
<th>Appropriation</th>
<th>Amount Change</th>
<th>Position Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Position</td>
<td>89.00</td>
<td>89.00</td>
<td>0.00</td>
<td></td>
</tr>
<tr>
<td>General Fund</td>
<td>256,488,599</td>
<td>147,371,955</td>
<td>-109,116,644</td>
<td></td>
</tr>
<tr>
<td>Special Fund</td>
<td>29,554,816</td>
<td>29,554,816</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Federal Fund</td>
<td>195,183,419</td>
<td>97,591,709</td>
<td>-97,591,710</td>
<td></td>
</tr>
<tr>
<td><strong>Total Funds</strong></td>
<td>481,226,834</td>
<td>274,518,480</td>
<td><strong>-206,708,354</strong></td>
<td></td>
</tr>
</tbody>
</table>

Amend the following language on the federal fund appropriation:

, provided that $195,183,419 97,591,709 of this appropriation is contingent upon enactment of legislation accelerating the implementation of Maryland’s minimum wage law

Explanation: This action is a technical amendment to align the funding that is contingent on legislation with the action taken to reduce the appropriation to provide the provider rate increase on January 1, 2024.
Committee Narrative

Opioid Restitution Fund (ORF) Revenues and Expenditures: The Maryland Department of Health (MDH) has reported a schedule of payments into the ORF and to local jurisdictions in fiscal 2023 resulting from the Janssen and Distributors lawsuit settlement. The Office of the Attorney General (OAG) has also published a full schedule and table of distributed funds across jurisdictions for this specific settlement. However, there are several other lawsuits that have been settled, including the McKinsey & Company and Purdue Pharma lawsuits for which there are records of contribution to the ORF, including in information published by OAG. Therefore, the committees request that the MDH submit a report including the following:

- a summary history of settlements that have contributed to the ORF since its institution in 2019 and a schedule of settlement funds received and anticipated separately by settlement and fiscal year;

- a breakdown of settlement fund distribution across local and State governments separately by settlement and fiscal year;

- how ORF funds, if any, were used by State agencies in fiscal 2019 through 2022. This description should include the program and subprogram where the described expenditures occurred; and

- actual and projected closing fund balances for fiscal 2022 through 2024.

Information Request

<table>
<thead>
<tr>
<th>Information Request</th>
<th>Author</th>
<th>Due Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>ORF revenues and expenditures</td>
<td>MDH</td>
<td>October 1, 2023</td>
</tr>
</tbody>
</table>

Security Attendant Training: The committees are interested in learning more about changes in the training provided to security attendants. The committees request that the Maryland Department of Health (MDH) submit a report on changes in training for security attendants, including:

- information on the types of training options provided for security attendants, any differences in the training options by types of curriculum, and reasons for any changes in training options in recent years;

- how many individuals select each training option;
impacts of the differences in training on roles as a security attendant (if any); and

• the number of security attendants by facility MDH plans to hire in fiscal 2024.

Information Request

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<thead>
<tr>
<th>Information Request</th>
<th>Author</th>
<th>Due Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Report on correctional training for security attendants</td>
<td>MDH</td>
<td>July 1, 2023</td>
</tr>
</tbody>
</table>

Budget Amendments

Office of the Secretary

M00A01.07 MDH Hospital System

Add the following language to the general fund appropriation:

, provided that $100,000 of this appropriation made for the purposes of hospital administration may not be expended until the Maryland Department of Health (MDH) submits a report on the number of applications and admissions for chronic care hospitals and the Holly Center, including the following information:

(1) the number of applicants, by program, service line, and facility separately by year since calendar 2017;

(2) the number of these applicants, by program, service line, and facility who were ultimately admitted to these facilities separately by year since calendar 2017;

(3) for applicants not admitted, the top reasons for failure to admit, by program, service line, and facility, separately by year since calendar 2017;

(4) efforts being made by MDH, if any, to increase program participation and number of applicants into programs at these facilities;

(5) overall licensed bed capacity by program, service line, and facility annually and separately by year since calendar 2017; and

(6) average daily staffed bed capacity by program, service line, and facility separately by year since calendar 2017.

The report shall be submitted by August 1, 2023, and the budget committees shall have 45 days from the date of the receipt of the report to review and comment. Funds restricted pending the
receipt of a report may not be transferred by budget amendment or otherwise to any other purposes and shall revert to the General Fund if the report is not submitted to the budget committees.

**Explanation:** The committees are interested in the number of applicants seeking admission into either of the State’s chronic care hospitals at Deer’s Head Hospital Center (DHHC) and Western Maryland Hospital Center (WMHC) as well as the Holly Center. In particular, the committees are interested in the share of applicants to these facilities that ultimately receive services, the extent to which outstanding need exists for these services, and what efforts can be made to increase service utilization. Committee narrative in the 2022 Joint Chairmen’s Report requested a report on this information, which was due on July 1, 2022. As of February 13, 2023, this report had not been submitted. This language restricts funds pending a report on the applications, admissions, and bed capacity for the chronic care hospitals and Holly Center.

<table>
<thead>
<tr>
<th>Information Request</th>
<th>Author</th>
<th>Due Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Report on applicants and capacity at WMHC, DHHC, and Holly Center</td>
<td>MDH</td>
<td>August 1, 2023</td>
</tr>
</tbody>
</table>
Budget Amendments

REGULATORY SERVICES

M00B01.03 Office of Health Care Quality

Amend appropriation for the purposes indicated:  

<table>
<thead>
<tr>
<th>Effect</th>
<th>Allowance</th>
<th>Appropriation</th>
<th>Amount Change</th>
<th>Position Change</th>
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<tr>
<td>Position</td>
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<tr>
<td>General Fund</td>
<td>23,770,861</td>
<td>22,541,456</td>
<td>-1,229,405</td>
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</tr>
<tr>
<td>Special Fund</td>
<td>620,245</td>
<td>620,245</td>
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<td></td>
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<tr>
<td>Federal Fund</td>
<td>9,633,719</td>
<td>9,103,394</td>
<td>-530,325</td>
<td></td>
</tr>
<tr>
<td>Total Funds</td>
<td>34,024,825</td>
<td>32,265,095</td>
<td>-1,759,730</td>
<td></td>
</tr>
</tbody>
</table>

Committee Narrative

Survey Activities and Reporting Following Ransomware Attack: The December 4, 2021 ransomware attack on the Maryland Department of Health significantly impacted the Office of Health Care Quality (OHCQ) due to employees losing access to the database used to manage survey and certification activities until May 3, 2022. The committees are concerned that OHCQ is delayed in reporting fiscal 2022 actual survey activities through its annual Managing for Results (MFR) submission. Therefore, the committees request that OHCQ provide a status update and timeline for restoring office operations and meeting reporting requirements. This status update should include the fiscal 2022 actual survey data that is reported in OHCQ’s annual MFR submission.

Information Request

<table>
<thead>
<tr>
<th>Information Request</th>
<th>Author</th>
<th>Due Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Report on survey activities following ransomware attack</td>
<td>OHCQ</td>
<td>October 1, 2023</td>
</tr>
</tbody>
</table>
Medication and Diagnosis Reporting in Nursing Homes and Assisted Living Facilities: The committees are interested in medication and diagnosis reporting practices in nursing homes and assisted living facilities in Maryland. Therefore, the committees request that the Maryland Department of Health (MDH) submit a report on data collection and reporting requirements related to medication and diagnosis. In the report, MDH should:

- review State and federal reporting requirements on diagnosis and medication usage and prescribing in Maryland nursing homes and assisted living facilities;
- provide data gathered by Maryland nursing homes and assisted living facilities on diagnosis and medication usage and prescribing for the latest three calendar years available;
- review statutory and regulatory changes in other states that allow for more transparency related to medication and diagnosis data and reporting in nursing homes and assisted living facilities, including changes to data reporting systems and any other operational changes; and
- offer recommendations for statutory, regulatory, and operational changes that would improve data collection and reporting on medication and diagnosis in Maryland nursing homes and assisted living facilities.

Information Request | Author | Due Date
--- | --- | ---
Report on medication and diagnosis reporting in nursing homes and assisted living facilities | MDH | November 1, 2023

Regulations for Assisted Living Programs: In accordance with Chapters 479 and 480 of 2021, the Maryland Department of Health (MDH) was required, by December 1, 2022, to convene stakeholders to revise assisted living program regulations and adopt regulations incorporating requirements for Alzheimer’s special care units. The committees request that MDH submit a report providing an update on meetings convened with stakeholders and adoption of revised assisted living program regulations. The report should include the timeline for completing these tasks and details regarding how the assisted living program regulations have been or will be updated.

Information Request | Author | Due Date
--- | --- | ---
Report on regulations for assisted living programs | MDH | September 1, 2023

Health and Human Services Subcommittee – Operating Budget, March 2023
Budget Amendments

M00B01.04 Health Professionals Boards and Commissions

Add the following language to the special fund appropriation:

provided that $150,000 for the Board of Dental Examiners, made for the purposes of the Health Professional Boards and Commissions, may not be expended until the Maryland Department of Health submits a report addressing steps being taken to ensure that the Board of Dental Examiners can meet its initial licensing, renewal, and investigation timeliness goals, including information on the specific actions being taken to improve performance in each of these years and, if applicable, revised data covering the fiscal 2018 through 2022 performance for each measure if the prior submitted data is determined to be inaccurate. The report shall be submitted by July 1, 2023, and the budget committees shall have 45 days from the date of the receipt of the report to review and comment. Funds restricted pending the receipt of the report may not be transferred by budget amendment or otherwise to any other purpose and shall be canceled if the report is not submitted to the budget committees.

Explanation: The Board of Dental Examiners has not been able to meet their established timeliness goals for initial licensing and renewals and investigations over the last five fiscal years. This language restricts funding budgeted for the Board of Dental Examiners until the Maryland Department of Health (MDH) submits a report to the budget committees on the steps being taken to assist the board in reaching their Managing for Results (MFR) goals and corrects any data that may be inaccurate.

Information Request  Author  Due Date
Report on the Board of Dental Examiners MFR goals  MDH  July 1, 2023

Add the following language to the special fund appropriation:

Further provided that $25,000 for the Board of Dental Examiners, $25,000 for the Board of Pharmacy, $25,000 for the Board of Physical Therapy Examiners, $25,000 for the Board of Professional Counselors and Therapists, $25,000 for the Board of Social Work Examiners, and $25,000 for the Board of Audiologists, made for the purposes of administrative expenses may not be expended until two joint reports are submitted by the Maryland Department of Health detailing efforts made to improve the timeliness of investigations for each board. The first report shall also include the final fiscal 2023 performance results for each board and the backlog of cases to be investigated by board. The second report should include any additional efforts taken, fiscal 2024 data through December 2023 performance of investigation timeliness by board, and
the total backlog of cases that need to be investigated through December 2023 by board. The
reports shall be submitted by August 1, 2023, and January 1, 2024, and the budget committees
shall have 45 days from the date of the receipt of the final report to review and comment. Funds
restricted pending the receipt of a report may not be transferred by budget amendment or
otherwise to any other purpose and shall revert to the General Fund of the report is not
submitted to the budget committees.

Explanation: Several of the Health Professional Boards have missed their annual Managing
for Results goals relating to timely investigations for the last five fiscal years. This language
restricts funds from the boards that have missed these goals for five consecutive years until the
Maryland Department of Health (MDH) submits two joint reports outlining efforts taken to
correct the low investigations and clear any case backlogs and recent performance data.

<table>
<thead>
<tr>
<th>Information Request</th>
<th>Author</th>
<th>Due Date</th>
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<tbody>
<tr>
<td>Report on the Health Occupation Boards timely investigation goal</td>
<td>MDH</td>
<td>August 1, 2023</td>
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<td></td>
<td></td>
<td>January 1, 2024</td>
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</table>

Amendment No. __________
Budget Amendments

DEPUTY SECRETARY FOR PUBLIC HEALTH SERVICES

M00F01.01 Executive Direction

Add the following language to the general fund appropriation:

, provided that $250,000 of this appropriation made for the purpose of administration may not be expended until the Maryland Department of Health submits a report to the budget committees on public health personnel recruitment and retention. The report shall include:

(1) an analysis of the causes of public health staffing shortages at the State and local health department (LHD) levels;

(2) LHD vacancy rates as of June 2020, 2021, 2022, and 2023;

(3) an evaluation of how the State’s COVID-19 pandemic response activities impacted recruitment and retention of State and LHD personnel;

(4) a discussion of salary enhancements, programs, and any other strategies that the department is implementing to recruit and retain public health staff;

(5) an evaluation of how the department spent COVID-19-related federal funds to expand, recruit, and train the public health workforce, including any performance measures or data collected on how this funding filled vacant slots and improved retention; and

(6) a discussion of any partnerships or programs with higher education institutions to recruit students and recent graduates to work for the department.

The report shall be submitted by December 15, 2023, and the budget committees shall have 45 days from the date of the receipt of the report to review and comment. Funds restricted pending the receipt of a report may not be transferred by budget amendment or otherwise to any other purpose and shall revert to the General Fund if the report is not submitted to the budget committees.

Explanation: The budget committees are concerned by the vacancy rate in the Maryland Department of Health (MDH), specifically the vacancies among the public health workforce both at the State and local levels. This language restricts funding until MDH submits a report with data on MDH and LHD staffing levels and evaluations of how recent salary adjustments and COVID-19-related federal funds to strengthen the public health workforce have worked in filling vacant positions and improving retention, among other information.
### Committee Narrative

**Report on the Public Health Services Data Modernization Project:** The Maryland Department of Health (MDH) has funding for a new Public Health Services Data Modernization Project. MDH has said that the project will focus on delivering data-related initiatives that result in more relevant, accurate, timely, and efficient data to support the needs of day-to-day public health practice across four domains of health information system assessment; data exchange and interoperability; data governance; and data analytics, visualization, and reporting. As of this writing, additional details have not been submitted regarding the scope, timeline, and schedule for the project. Therefore, the committees request that MDH prepare an update on the project implementation, including:

- project objectives and goals;
- specifications of the project, such as intended product, output, functionality, and anticipated benefits;
- project timeline with major milestones; and
- intended users of the system, identifying MDH agencies and types of roles who will engage with the system.

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<thead>
<tr>
<th>Information Request</th>
<th>Author</th>
<th>Due Date</th>
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</thead>
<tbody>
<tr>
<td>Report on the Public Health Services Data Modernization Project</td>
<td>MDH</td>
<td>August 1, 2023</td>
</tr>
</tbody>
</table>
Committee Narrative

M00F03.01 Infectious Disease and Environmental Health Services

Operating Costs of Mobile COVID-19 Vaccine Clinics and Missions: The committees are interested in receiving information regarding the cost of contracting with third-party vendors – excluding State-affiliated, county, and local partners – for mobile COVID-19 vaccine clinics and missions to improve vaccine uptake. This information was also requested in the 2022 Joint Chairmen’s Report; however, a report had not been submitted as of February 8, 2023. The committees request that the Maryland Department of Health (MDH) submit a report to the committees and the Joint Audit and Evaluation Committee on operating costs for vaccine clinics and missions held in calendar 2021, 2022, and 2023 year to date, including:

- the cost per mobile vaccine clinic/mission operated by third-party nongovernmental vendors in each calendar year, including costs by fund type, available federal fund sources used to support these vaccination efforts, and costs broken out by use of funds (such as personnel, vaccine supplies, transportation, contractual services, and any other costs); and

- the cost per COVID-19 vaccine dose administered at a mobile vaccine clinic/mission operated by third-party nongovernmental vendors by fund type.

Information Request

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<th>Information Request</th>
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<th>Due Date</th>
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<tbody>
<tr>
<td>Report on mobile COVID-19 vaccine clinics and missions</td>
<td>MDH</td>
<td>August 1, 2023</td>
</tr>
</tbody>
</table>

Ready Reserve for Laboratory Testing: The committees requested in the 2022 Joint Chairmen’s Report that the Maryland Department of Health (MDH) submit a report regarding the State’s readiness to scale up laboratory testing in response to new COVID-19 variants and surges as well as potential other pandemics, disease outbreaks, or bioterrorism attacks. As of February 8, 2023, MDH had not provided a report. Therefore, the committees request that MDH submit a report on the feasibility of establishing a ready reserve of Clinical Laboratory Improvement Amendment licensed laboratories in the State, including how laboratories would maintain the following resources:

- laboratory testing equipment and facilities; and
laboratory personnel, including but not limited to, full- or part-time staff and on-call staff who periodically train, practice, and participate in drills and exercises to rapidly respond to emergencies that require a surge in clinical laboratory testing.

Information Request | Author | Due Date
--- | --- | ---
Report on ready reserve for laboratory testing | MDH | August 1, 2023

M00F03.04 Family Health and Chronic Disease Services

Medicaid Claiming in School-based Health Centers (SBHC): The committees are concerned that the Maryland Department of Health (MDH) identified multiple structural barriers preventing SBHCs from successfully billing Medicaid for somatic and behavioral health services provided to students. Therefore, the committees request that MDH submit a report on Medicaid claims for SBHCs and SBHC grant allocations. The report should include:

- an analysis of Medicaid claims for SBHC services in calendar 2021, 2022, and 2023 year to date, including the number of SBHCs that bill through Medicaid;

- efforts by MDH to expand Medicaid claiming for SBHC services and specific program changes or activities that have limited the impact of barriers for SBHCs billing Medicaid;

- fiscal 2023 and 2024 SBHC grant allocations by jurisdiction and by use, specifying how many new SBHCs were established with grant funding in both fiscal years; and

- the number of SBHCs operating as of July 1, 2023, by jurisdiction.

Information Request | Author | Due Date
--- | --- | ---
Report on Medicaid claiming in SBHCs | MDH | October 1, 2023
Committee Narrative

M00F05.01 Post Mortem Examining Services

Report on Status of Accreditation and Autopsy Backlog: The Office of the Chief Medical Examiner (OCME) holds full accreditation from the National Association of Medical Examiners (NAME) through May 2023. As of January 2023, OCME is in violation of NAME’s standard for a maximum medical examiner (ME) to caseload ratio of 325 autopsies per year, which puts maintaining OCME’s full accreditation in jeopardy. While not mandatory to conduct medical examinations, being accredited by NAME improves the public’s trust that the office is performing its work in a proper environment and limits questions about the validity of MEs’ findings at trials. Therefore, the committees request that OCME prepare a report with an update on its caseload to ME ratio and the office’s accreditation status as of July 15, 2023. The report should include:

- the outcome of NAME’s inspection, if it has taken place by the time of report deadline, or anticipated inspection date;
- the steps OCME has taken or plans to take to address the Phase II violation related to the high caseload ratio;
- the current ME to caseload ratio;
- the number of vacant ME positions; and
- an updated recruitment and retention strategy.

Information Request Author Due Date
Report on status of accreditation and autopsy backlog OCME August 30, 2023

Report on Office of the Chief Medical Examiner (OCME) Recruitment: OCME has carried a high number of vacancies for the past several years, impacting the office’s ability to efficiently process autopsies and remain compliant with national caseload standards for medical examiner (ME) staff. As of January 2023, OCME had a vacancy rate of 21.53% and 10.5 vacant regular ME positions. In fiscal 2023, OCME obtained 21 additional authorized positions, resulting in a total of 104.5 total authorized positions. As of January 2023, OCME had filled 7 of the 21 new positions, and the office reported recruiting for additional assistant MEs, administrative
support, autopsy assistants, investigators, and toxicologists. In February 2023, OCME reported working with the Postmortem Examiners Commission to select a candidate for the position of Chief Medical Examiner.

To better understand progress toward filling the vacancies, the committees request that the Maryland Department of Health (MDH) submit a report describing planned and adopted strategies to fill vacancies at OCME. The report should include:

- classifications of 21 new authorized positions in fiscal 2023;
- classifications and hire dates for 7 of these new positions that were filled as of January 2023;
- anticipated timeline to fill the 14 new positions that remained vacant as of January 2023;
- recruitment strategies that OCME has employed and plans to employ in calendar 2023, including costs of incentives offered to fill remaining vacancies; and
- status of recruitment for the Chief Medical Examiner role, including the hire date (if hired by submission of the report).

<table>
<thead>
<tr>
<th>Information Request</th>
<th>Author</th>
<th>Due Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Report on OCME recruitment</td>
<td>MDH</td>
<td>November 1, 2023</td>
</tr>
</tbody>
</table>
Budget Amendments

M00L01.01 Program Direction

Add the following language to the general fund appropriation:

, provided that $500,000 of this appropriation made for the purposes of executive direction may not be expended until the Maryland Department of Health submits a report to the budget committees on the recoupment of overpayments and forgiveness of overpayments to providers. The report shall be submitted by January 14, 2024, and the budget committees shall have 45 days from the date of the receipt of the report to review and comment. Funds restricted pending the receipt of a report may not be transferred by budget amendment or otherwise to any other purpose and shall revert to the General Fund if the report is not submitted to the budget committees.

Explanation: The nearly eight-month estimated payments period required due to the failed launch of the new Administrative Services Organization resulted in overpayments to providers originally estimated to be $360 million. The Maryland Department of Health (MDH) has been managing the ongoing recoupment and forgiveness to providers for these overpayments, and the remaining balance to be recouped stands at $112 million. MDH plans to complete recoupment in December 2023. This language restricts funding pending a report on the closeout status of recoupment and timeline data of total amount recouped per month for the full recoupment period lasting August 2020 through December 2023.

Information Request

<table>
<thead>
<tr>
<th>Author</th>
<th>Due Date</th>
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<tbody>
<tr>
<td>MDH</td>
<td>January 14, 2024</td>
</tr>
</tbody>
</table>

Add the following language to the general fund appropriation:

Further provided that $100,000 of this appropriation made for the purposes of executive direction may not be expended until the Behavioral Health Administration submits statewide data on telebehavioral health utilization in the Public Behavioral Health System. The data shall be submitted with the Managing for Results (MFR) submission for the fiscal 2025 budget, and the budget committees shall have 45 days from the date of the receipt of the MFR submission to review and comment. Funds restricted pending the receipt of a report may not be transferred by budget amendment or otherwise to any other purpose and shall revert to the General Fund if the report is not submitted to the budget committees.
Explanation: Telebehavioral health utilization in rural areas saw notable increases during the pandemic. In order to form a clearer picture of telebehavioral health service needs across the State, the budget committees included committee narrative in the 2022 Joint Chairmen’s Report requesting that the Maryland Department of Health (MDH) Behavioral Health Administration submit expanded MFR data for statewide utilization of telebehavioral health services. This language restricts funding pending the submission of statewide data on telebehavioral health utilization across the State.

<table>
<thead>
<tr>
<th>Information Request</th>
<th>Author</th>
<th>Due Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Statewide telebehavioral health utilization</td>
<td>MDH</td>
<td>With the submission of the fiscal 2025 MFR data</td>
</tr>
</tbody>
</table>

Add the following language to the general fund appropriation:

Further provided that $100,000 of this appropriation made for the purposes of program direction may not be expended until the Behavioral Health Administration submits a report to the budget committees on patient access to Medication Assisted Treatment (MAT) in the Public Behavioral Health System. The report should include detail on the prevalence of MAT providers by jurisdiction and a discussion of barriers to the access or further availability of MAT for individuals with substance use disorders. The report shall be submitted by September 1, 2023, and the budget committees shall have 45 days from the date of the receipt of the report to review and comment. Funds restricted pending the receipt of a report may not be transferred by budget amendment or otherwise to any other purpose and shall revert to the General Fund if the report is not submitted to the budget committees.

Explanation: The General Assembly is interested in information on the availability and prevalence of MAT statewide as well as any barriers to access to MAT. This language restricts funding pending a report on the prevalence of MAT providers by jurisdiction and any barriers to access.

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<thead>
<tr>
<th>Information Request</th>
<th>Author</th>
<th>Due Date</th>
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<tbody>
<tr>
<td>Availability of access to MAT</td>
<td>Behavioral Health Administration</td>
<td>September 1, 2023</td>
</tr>
</tbody>
</table>

Add the following language to the general fund appropriation:

Further provided that $100,000 of this appropriation made for the purpose of program direction may not be expended until the Maryland Department of Health submits the report required under Section 7.5-209 of the Health-General Article on behavioral health services data for children and young adults that was due on December 1, 2022. The report shall be submitted by July 1, 2023, to the Senate Budget and Taxation Committee, the Senate Finance Committee, the
House Appropriations Committee, and the House Health and Government Operations Committee. The budget committees shall have 45 days from the date of the receipt of the report to review and comment. Funds restricted pending the receipt of a report may not be transferred by budget amendment or otherwise to any other purpose and shall revert to the General Fund if the report is not submitted to the budget committees.

**Explanation:** The committees are concerned that required data reports on children’s behavioral health services have not been submitted since 2019. This language restricts funding pending a report and submission of the report that was due on December 1, 2022, as required by Section 7.5-209 Health-General, on behavioral health services data for children and young adults.

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<thead>
<tr>
<th>Information Request</th>
<th>Author</th>
<th>Due Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual report on behavioral health services for children</td>
<td>Behavioral Health Administration</td>
<td>July 1, 2023</td>
</tr>
</tbody>
</table>

**Committee Narrative**

**Provider Reimbursement Data:** The committees are interested in better understanding the spending on provider reimbursements by service type for spending outside of the Medicaid Behavioral Health Provider Reimbursements program. The committees request that the Maryland Department of Health (MDH) provide reports including data on provider reimbursements by service type separately for provider reimbursement spending in M00L01.02 (Community Services) and M00L01.03 (Community Services for Medicaid State Fund Recipients). The reports should include data through September 1 for the first report, December 31 for the second report, and March 31 for the third report. The data should be provided for fiscal 2024 and the same period for the two prior fiscal years. The first report should also include final fiscal 2023 data by service type separately for M00L01.02 and M00L01.03 along with the data for the prior two fiscal years.

<table>
<thead>
<tr>
<th>Information Request</th>
<th>Author</th>
<th>Due Date</th>
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</thead>
<tbody>
<tr>
<td>Non-Medicaid provider reimbursement</td>
<td>MDH</td>
<td>September 30, 2023</td>
</tr>
<tr>
<td></td>
<td></td>
<td>January 20, 2024</td>
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<tr>
<td></td>
<td></td>
<td>April 20, 2024</td>
</tr>
</tbody>
</table>
Budget Amendments

M00L01.02 Community Services

Add the following language to the general fund appropriation:

Provided that these funds are to be used only for the purposes herein appropriated, and there shall be no transfer to any other program or purpose except that funds may be transferred to programs M00L01.03 Community Services for Medicaid State Fund Recipients or M00Q01.10 Medicaid Behavioral Health Provider Reimbursements. Funds not expended or transferred shall be reverted or canceled.

Explanation: This language restricts the entire appropriation for substance use disorder treatment, uninsured treatment, or other community service grants for that purpose or for provider reimbursements in M00L01.03 Community Services for Medicaid State Fund Recipients or M00Q01.10 Medicaid Behavioral Health Provider Reimbursements.

Strike the following language:

provided that $70,000,000 of this appropriation for infrastructure investments may only be expended for one-time investments. Further provided that $1,800,000 of this appropriation made for the purpose of infrastructure improvements may be expended only for renovation and expansion of existing hospital services at Brook Lane Hospital to improve access to care of youth in need of inpatient hospitalization. Funds not expended for one-time infrastructure investments including for renovation and expansion of existing hospital services at Brook Lane Hospital may not be expended for any other purpose and shall revert to the General Fund.

Explanation: This action restricts the use of the behavioral health infrastructure investments to one-time purposes. This action also specifically restricts $1.8 million of these funds to be used for renovation and expansion of existing hospital services at Brook Lane Hospital.

Amendment No. __________

Strike the following language:

Further provided that $50,000,000 of this appropriation made for the purpose of behavioral health investments may not be expended until the Maryland Department of Health submits a report to the budget committees outlining specific one-time programmatic uses and corresponding allocations of the funds. The report should include details on how the one-time funds will be used to achieve the department’s goals for behavioral health improvements. The report shall be submitted by July 1, 2023, and the budget committees shall have 45 days from
the date of the receipt of the report to review and comment. Funds restricted pending the receipt of a report may not be transferred by budget amendment or otherwise to any other purposes and shall revert to the General Fund if the report is not submitted to the budget committees.

Explanation: The fiscal 2024 budget includes funding for unspecified behavioral health investments. The General Assembly is interested in understanding the use of this funding. This language restricts a portion of the funding for behavioral health investments pending submission of a report on the planned uses of the funds.

Information Request

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<tr>
<th>Information Request</th>
<th>Author</th>
<th>Due Date</th>
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<tbody>
<tr>
<td>Planned uses of funding for behavioral health investments</td>
<td>Maryland Department of Health</td>
<td>July 1, 2023</td>
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</table>

Fiscal 2023 Deficiency

M00L01.02 Community Services

Amend appropriation for the purposes indicated:

<table>
<thead>
<tr>
<th>Funds</th>
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<tr>
<td>-14,000,000 GF</td>
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</table>

1. Reduce the fiscal 2023 deficiency appropriation in the Community Services program for provider reimbursements which overstates costs due to a budgeting error.

Total Change

<table>
<thead>
<tr>
<th>Effect</th>
<th>Allowance</th>
<th>Appropriation</th>
<th>Amount Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>General Fund</td>
<td>0</td>
<td>-14,000,000</td>
<td>-14,000,000</td>
</tr>
<tr>
<td>Total Funds</td>
<td>0</td>
<td>-14,000,000</td>
<td>-14,000,000</td>
</tr>
</tbody>
</table>
Add the following language to the general fund appropriation:

, provided that $100,000 of this appropriation made for the purpose of administrative expenses may not be expended until the Maryland Department of Health (MDH) submits a report to the budget committees on the status of the people served by the Developmental Disabilities Administration’s (DDA) Community Services program who were enrolled in a DDA Medicaid waiver program. The report should include:

(1) the number of individuals served in the Community Services program;

(2) the number of those enrolled in the DDA waiver program separately by waiver;

(3) the percent of individuals served through DDA waivers;

(4) the cost per individual per DDA waiver program;

(5) a comparison of the fiscal 2024 Managing for Results data as submitted with the budget and any revised data showing changes to the total number of individuals served and the numbers enrolled in waivers, including explanations for the difference; and

(6) a discussion of how the data is expected to be submitted going forward to ensure an accurate count.

**Explanation:** MDH reported that the *Managing for Results* (MFR) data that was provided to the Department of Legislative Services was incorrect and subsequently provided revised data. The budget committees remain interested in the status of individuals served across DDA’s waiver programs as well as the accuracy of the data provided. This language would restrict $100,000 in general funds until MDH submits a report discussing the program and reconciles the data initially provided with any revised data.
Information Request | Author | Due Date
--- | --- | ---
Report on updated MFR data related to the community services waiver program | MDH | July 1, 2023

Amendment No. __________

Add the following language to the general fund appropriation:

Further provided that since the Developmental Disabilities Administration (DDA) has had four or more repeat audit findings in the most recent fiscal compliance audit issued by the Office of Legislative Audits (OLA), $100,000 of this agency’s administrative appropriation may not be expended unless:

(1) DDA has taken corrective action with respect to all repeat audit findings on or before November 1, 2022; and

(2) a report is submitted to the budget committees by OLA listing each repeat audit finding along with a determination that each repeat finding was corrected. The budget committees shall have 45 days from the receipt of the report to review and comment to allow for funds to be released prior to the end of fiscal 2024.

Explanation: The Joint Audit and Evaluation Committee has requested that budget bill language be added for each unit of State government that has four or more repeat audit findings in its most recent fiscal compliance audit. Each agency is to have a portion of its administrative budget withheld pending the adoption of corrective action by the agency, and a determination by OLA that each finding was corrected. OLA shall submit a report to the budget committees on the status of repeat findings.

Information Request | Author | Due Date
--- | --- | ---
Status of corrective actions related to the most recent fiscal compliance audit | OLA | 45 days before the release of funds

Add the following language to the general fund appropriation:

Further provided that $1,000,000 of this appropriation made for the purpose of administration may not be expended until the Maryland Department of Health (MDH) submits a report each quarter to the budget committees regarding the ongoing transition to a fee-for-service (FFS) reimbursement system and spending forecasts for the Developmental Disabilities Administration.
Disabilities Administration (DDA) Community Services program transitions. The report shall include:

1. a timeline for forecasting general fund spending in the Community Services program based on actual utilization and reimbursement billed through the Long Term Services and Supports (LTSS) system following the transition to an FFS model, including a discussion of how the spending will be forecast during the transition period;

2. utilization by service type, including the number of claims and claims spending in LTSS to support the general fund forecasting;

3. if available, MDH spending forecasts by year;

4. the number of individuals receiving DDA-funded services and providers transitioned to the LTSS system, including the timing of the transition including those transitioned in fiscal 2024 to date;

5. a cost analysis of the rates paid to providers that were transitioned to the LTSS system as part of the LTSS pilot program and how DDA’s reimbursements compare to estimated payments that would have been made under the prospective payment model;

6. a breakdown of providers transitioned to LTSS by size of provider; and

7. an updated timeline for transition of individuals and providers to the LTSS system.

The reports shall be submitted quarterly, $250,000 may be available to be released following the submission of each report, and the budget committees shall have 45 days from the date of the receipt of each report to review and comment. Funds restricted pending receipt of these reports may not be transferred by budget amendment or otherwise to any other purpose and shall revert to the General Fund if the report is not submitted to the budget committees.

Explanation: DDA is overhauling its Community Services system by implementing new service definitions, establishing new rates based on an FFS reimbursement model, and transitioning to Medicaid’s existing LTSS system for billing and service authorization. These changes should improve DDA’s data collection and spending forecast abilities compared to the current prospective payment model. This language restricts funds budgeted for administration until MDH submits quarterly reports to the budget committees on the transition to the system and spending forecasts following the transition to a new rate structure.
M00M

Information Request | Author | Due Date
--- | --- | ---
Report on Community Services utilization data collection and spending forecasts | MDH | July 1, 2023
 | | October 1, 2023
 | | January 1, 2024
 | | April 1, 2024

Amendment No. __________

M00M01.02 Community Services

Add the following language:

All appropriations provided for program M00M01.02 Community Services are to be used only for the purposes herein appropriated, and there shall be no budgetary transfer to any other program or purpose.

Explanation: The Maryland Department of Health has previously reported increasing net general fund transfers out of the Developmental Disabilities Administration Community Services program, mainly to cover shortfalls elsewhere in the department. This annual language restricts funds appropriated to the Community Services program to that use only and prevents budgetary transfers.

Add the following language:

, provided that no funds in the Community Services program may be expended for the purpose of transitioning additional providers into the Long Term Services and Supports (LTSS) system until the Maryland Department of Health (MDH) submits a report to the budget committees detailing the number of providers and participants to be transitioned in fiscal 2024 and the estimated increase in payments to the providers if any forecast as a result of the transition to LTSS. MDH shall certify in the report that adequate funds are included in the fiscal 2024 budget to cover the expected increase in provider payments from the transition planned during the fiscal year. This report should include transition dates and expected costs by service type. The report shall be submitted by July 1, 2023.

Explanation: The budget committees continue to be concerned about the costs associated with the transition to LTSS and the timeline for transition. This language restricts funds in the Community Services program for the purpose of transitioning new providers into the LTSS system until a report has been submitted detailing the providers and participants to be transitioned in fiscal 2024 and the estimated increase in payments to providers.
Report on the transition and cost of providers and participants transitioned to the LTSS system

Author: MDH  
Due Date: July 1, 2023

Committee Narrative

Report on Reservation of Waiver Slots for Emergency Placements: Annually, the Developmental Disabilities Administration reserves waiver slots for emergency placements, including for transitioning youth and military members moving into Maryland. The committees request that the Maryland Department of Health (MDH) submit a report detailing the number of annual waiver slots that have been reserved for each of the last five fiscal years, including the number reserved and used by reserved category.

Report on reservation of waiver slots for emergency placements

Author: MDH  
Due Date: November 1, 2023
Budget Amendments

M00Q01.01 Deputy Secretary for Health Care Financing

Strike the following language:

- provided that $1,000,000 of this appropriation made for the purpose of administration in the Office of the Deputy Secretary for Health Care Financing may not be expended until the Maryland Department of Health submits quarterly reports on the Medicaid and Maryland Children’s Health Program eligibility redetermination process that will resume on April 1, 2023. Each report shall include the following data on a monthly basis and divided by eligibility category:

1. the number of eligibility renewals initiated;

2. the number of new individuals enrolled;

3. the number of individuals enrolled who received medical assistance and were subsequently disenrolled any time in the six months prior to reenrolling;

4. the number of individuals disenrolled along with the number disenrolled by reason for disenrollment, identifying disenrollments due to failure to apply for recertification, missing information/verifications, overscaled income, aging out of a Medicaid eligibility category, and other common reasons for disenrollment;

5. call center volume, average wait times, and any other data related to call center activities that are required to be submitted to the Center for Medicare and Medicaid Services; and

6. measures of application processing times and total numbers of applications processed for Modified Adjusted Gross Income eligibility groups and non-Modified Adjusted Gross Income eligibility groups shown separately.

The first report shall be submitted by July 15, 2023, and the other reports shall be submitted quarterly thereafter. The funds may be released in $250,000 increments following the submission of each quarterly report. The budget committees shall have 45 days from the date of the receipt of each report to review and comment. Funds restricted pending the receipt of a report may not be transferred by budget amendment or otherwise to any other purpose and shall revert to the General Fund if the reports are not submitted to the budget committees.

Explanation: This language restricts funds budgeted for administrative purposes until the Maryland Department of Health (MDH) submits quarterly reports with data and status updates.
related to the Medicaid and Maryland Children’s Health Program eligibility redetermination process.

<table>
<thead>
<tr>
<th>Information Request</th>
<th>Author</th>
<th>Due Date</th>
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<tbody>
<tr>
<td>Quarterly reports on Medicaid</td>
<td>MDH</td>
<td>July 15, 2023</td>
</tr>
<tr>
<td>and Maryland Children’s Health Program eligibility redetermination</td>
<td></td>
<td>October 15, 2023</td>
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<td></td>
<td></td>
<td>January 15, 2024</td>
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<td></td>
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<td>April 15, 2024</td>
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</table>

Add the following language to the general fund appropriation:

Further, provided that $250,000 of this appropriation made for the purpose of administration in the Office of the Deputy Secretary for Health Care Financing may not be expended until the Maryland Department of Health (MDH) Medical Care Programs Administration submits a report, in consultation with the MDH Behavioral Health Administration and MDH Developmental Disabilities Administration, on current Medicaid rates, rate enhancements, and rate-setting studies. The report shall include the following information for each provider type:

1. A timeline for when the current rate structure and rates were determined;
2. The method for determining and establishing the current rate structure and rates, including whether a rate-setting study was conducted (and if not, the reason for a rate-setting study not being conducted), and a discussion of how actual provider expenditures were taken into account in setting rates;
3. A summary of recent rate increases and enhancements;
4. The status of any ongoing rate-setting studies and plans for future rate-setting studies; and
5. A description of any federal requirements affecting the rate structure, such as whether rates must be actuarially sound, must cover certain costs, or cannot differ across certain service types, geographic locations, or provider types.

The report shall be submitted by October 1, 2023, and the budget committees shall have 45 days from the date of the receipt of the report to review and comment. Funds restricted pending the receipt of a report may not be transferred by budget amendment or otherwise to any other purpose and shall revert to the General Fund if the report is not submitted to the budget committees.
M00Q01

Explanation: This language restricts funds budgeted for administrative purposes until MDH submits a report on current Medicaid rate structures and rate-setting studies. The report shall provide information on rates for all provider types funded through the Medical Care Programs Administration (Medicaid), Behavioral Health Administration (BHA), and Developmental Disabilities Administration (DDA) separately, including disaggregating provider types within each administration. Language in the fiscal 2023 Budget Bill also restricted funds pending the submission of a report on Medicaid rates and rate-setting studies, but MDH had not provided the requested report as of February 20, 2023.

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<th>Information Request</th>
<th>Author</th>
<th>Due Date</th>
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<tr>
<td>Report on Medicaid rates and rate-setting studies</td>
<td>Medicaid BHA DDA</td>
<td>October 1, 2023</td>
</tr>
</tbody>
</table>

M00Q01.03 Medical Care Provider Reimbursements

Add the following language:

Provided that all appropriations provided for program M00Q01.03 Medical Care Provider Reimbursements are to be used only for the purposes herein appropriated, and there shall be no budgetary transfer to any other program or purpose except that funds may be transferred to program M00Q01.07 Maryland Children’s Health Program. Funds not expended or transferred shall be reverted or canceled.

Explanation: This budget language restricts funding for Medical Care Provider Reimbursements to that purpose only and prevents budgetary transfers to any program except M00Q01.07 Maryland Children’s Health Program.

Amend appropriation for the purposes indicated:

1. Reduce general funds within the Medicaid program and authorize a budget amendment to be processed to replace these funds with special funds in recognition of available Cigarette Restitution Fund (CRF) support. This reduction in the CRF balance would maintain an estimated fiscal 2024 closing balance of $4.2 million.

   
   Funds
   -15,000,000 GF

2. Reduce funding for Medicaid reimbursements based on reduced enrollment and hospital services spending expectations.

   Funds
   -115,000,000 GF
   -45,000,000 FF

   Total Change
   -175,000,000

Health and Human Services Subcommittee – Operating Budget, March 2023

45
Effect | Allowance | Appropriation | Change |
-- | -- | -- | -- |
General Fund | 4,151,018,544 | 4,021,018,544 | -130,000,000 |
Special Fund | 695,166,487 | 695,166,487 | 0 |
Federal Fund | 6,955,945,003 | 6,910,945,003 | -45,000,000 |
Total Funds | 11,802,130,034 | 11,627,130,034 | -175,000,000 |

Committee Narrative

Community First Choice (CFC) Program and Home- and Community-based Options (Community Options) Waiver Financial and Registry Data: Recent efforts to expand home- and community-based services have led to significant increases in CFC program expenditures, including spending under the Community Options waiver. The committees request that the Maryland Department of Health (MDH) submit two reports on CFC program spending. The reports should include monthly enrollment, utilization, and cost data that aligns with actual budget expenditures under the CFC program, and the initial report should include data that reconciles to actual spending in fiscal 2022 and 2023. Each report should also provide:

- the number of Community Options waiver slots filled in fiscal 2023 and fiscal 2024 year to date;
- the number of Community Options waiver applications sent to individuals on the registry each month and the results of that outreach (including the number of applications returned and processed);
- updates on changes to registry operations to improve efficiency in taking individuals off of the registry and efforts to determine financial and medical eligibility for individuals while they remain on the registry;
- the number of individuals on the Community Options waiver registry; and
- an update on any activities or efforts to implement the plan to reduce the Community Options waiver registry by 50% submitted to the General Assembly in February 2023.

Information Request | Author | Due Date
--- | --- | ---
Report on CFC program and Community Options waiver financial and registry data | MDH | August 1, 2023
| December 1, 2023 |
Rate Adjustments for Dental Services under the Medical Assistance (Medicaid) Program:
The committees are interested in the Maryland Department of Health’s (MDH) implementation of a reimbursement rate increase for dental services covered under Medicaid in fiscal 2023. The committees request that MDH submit a report by December 1, 2023, that includes:

- the percentage increase in Medicaid reimbursement rates for dental services overall and by service type budgeted in fiscal 2023 over fiscal 2022 dental rates and fiscal 2024 over fiscal 2023 dental rates;
- a comparison of fiscal 2024 Medicaid dental rates and commercial insurance rates for dental services in Maryland;
- a comparison of fiscal 2023 and 2024 rate increases for Medicaid dental services and recent rate increases for other Medicaid medical services; and
- additional adjustments to Medicaid dental rates that would need to be considered as part of the implementation of a permanent adult dental services benefit under the Medicaid program.

This report was also requested in the 2022 Joint Chairmen’s Report, but as of February 20, 2023, MDH had not submitted a report.

Employed Individuals with Disabilities (EID) Program Eligibility Requirements: The EID Program, also known as the Medicaid Buy-in, extends medical assistance to working Marylanders with disabilities. Individuals ages 18 to 64 are eligible if they meet certain work and income requirements, with the income of the individual’s spouse included in eligibility determination. The fiscal 2023 budget included $4.6 million to expand EID Program eligibility by removing the current income threshold of 300% of federal poverty guidelines and allowing both the income of an individual and individual’s spouse to be disregarded during the eligibility determination process. Considering the eligibility expansion, the committees request that the Maryland Department of Health (MDH) submit a report on the EID Program including:

- the actual EID Program enrollment in fiscal 2021, 2022, 2023, and 2024 year to date, noting the number of participants enrolling and remaining enrolled in the program due to recent eligibility expansion and the number of participants by age grouping including 18 to 59 and 60 and older;
• the actual number of EID Program participants who were disenrolled and applicants who were denied due to turning 65 years old, not meeting maximum age requirements, surpassing the income eligibility threshold, and surpassing the asset threshold, reported separately by reason and by month in fiscal 2022, 2023, and 2024 year to date;

• the actual number of EID Program participants that reported getting married or otherwise updated their income for eligibility determination to include their spouse’s income, reported separately by month in fiscal 2022, 2023, and 2024 year to date;

• the projected EID Program enrollment in fiscal 2024 for individuals ages 65 and older and ages 16 to 18, if program eligibility were extended to these groups;

• the actual EID Program expenditures in fiscal 2022, 2023, and 2024 year to date, with expenditures for eligibility expansion labeled separately;

• the actual EID Program expenditures in fiscal 2023 and projected EID Program expenditures in fiscal 2024, with expenditures for eligibility expansion labeled separately in both years; and

• a timeline and description of how EID Program eligibility was expanded in fiscal 2022 and 2023.

This report was also requested in the 2022 Joint Chairmen’s Report, but as of February 20, 2023, MDH had not submitted a report.

Information Request          Author          Due Date
Report on EID Program eligibility requirements  MDH          January 15, 2024

Home and Community-based Options (Community Options) Waiver Care Plan Backlog: During the 2023 session, the Maryland Department of Health (MDH) reported a backlog in reviewing and approving care plans for the Community Options Waiver. The committees are concerned about the impacts of this backlog on waiver participants and home- and community-based services (HCBS) providers, such as delays in receiving HCBS and increased risk of hospitalization. Therefore, the committees request that MDH submit monthly reports beginning July 1, 2023, on the progress in addressing the outstanding care plan backlog. The report should discuss current efforts underway and recommendations to address the care plan backlog, including the feasibility of allowing medical adult day care center and other HCBS nurses to temporarily review care plans. Additionally, the report should detail the following information by county:
the average number of days to approve a care plan;

• the total number of pending care plans at the beginning of each month;

• the number of new care plans received in the prior month; and

• the number of care plans approved by the end of the prior month.

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<th>Information Request</th>
<th>Author</th>
<th>Due Date</th>
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<tbody>
<tr>
<td>Report on the Community Options Waiver care plan backlog</td>
<td>MDH</td>
<td>July 1, 2023, and monthly thereafter</td>
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</tbody>
</table>

Remote Services Model for Adult Medical Day Care: The committees are interested in understanding the Maryland Department of Health’s (MDH) efforts, in consultation with the Medical Adult Day Care Advisory Committee, to develop a remote services model for medical adult day care clients and centers. Therefore, the committees request that MDH submit a report on the progress in developing the remote services model for medical adult day care and applying for federal approval.

<table>
<thead>
<tr>
<th>Information Request</th>
<th>Author</th>
<th>Due Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Report on a remote services model for adult medical day care</td>
<td>MDH</td>
<td>October 1, 2023</td>
</tr>
</tbody>
</table>

Quarterly Reports on Medicaid Eligibility Redetermination: As a condition of receiving an enhanced federal match on qualifying Medicaid and Maryland Children’s Health Program (MCHP) spending during the COVID-19 public health emergency, Maryland has been required to freeze Medicaid disenrollment (with limited exceptions). Beginning April 1, 2023, the Maryland Department of Health (MDH) will resume Medicaid eligibility renewals and redetermination that may result in disenrollment. The committees request that MDH submit quarterly reports on the Medicaid and MCHP eligibility redetermination process. Each report should include the following data on a monthly basis and divided by eligibility category:

• the number of eligibility renewals initiated;

• the number of new individuals enrolled;
the number of individuals enrolled who received medical assistance and were subsequently disenrolled any time in the six months prior to reenrolling;

the number of individuals disenrolled along with the number disenrolled by reason for disenrollment, identifying disenrollments due to failure to apply for recertification, missing information/verifications, overscaled income, aging out of a Medicaid eligibility category, and other common reasons for disenrollment;

call center volume, average wait times, and any other data related to call center activities that are required to be submitted to the Center for Medicare and Medicaid Services; and

measures of application processing times and total numbers of applications processed for Modified Adjusted Gross Income (MAGI) eligibility groups and non-MAGI eligibility groups shown separately.

Information Request  Author  Due Date
Quarterly reports on Medicaid and MCHP eligibility redetermination  MDH  July 15, 2023
                          October 15, 2023
                          January 15, 2024
                          April 15, 2024

Fiscal 2023 Deficiency

M00Q01.03 Medical Care Provider Reimbursements

Amend appropriation for the purposes indicated:

<table>
<thead>
<tr>
<th>Effect</th>
<th>Allowance</th>
<th>Appropriation</th>
<th>Amount Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>General Fund</td>
<td>0</td>
<td>-15,000,000</td>
<td>-15,000,000</td>
</tr>
<tr>
<td>Total Funds</td>
<td>0</td>
<td>-15,000,000</td>
<td>-15,000,000</td>
</tr>
</tbody>
</table>

Funds

-15,000,000  GF
M00Q01

Budget Amendments

M00Q01.07 Maryland Children’s Health Program

Add the following language:

Provided that all appropriations provided for program M00Q01.07 Maryland Children’s Health Program are to be used only for the purposes herein appropriated, and there shall be no budgetary transfer to any other program or purpose except that funds may be transferred to program M00Q01.03 Medical Care Provider Reimbursements. Funds not expended or transferred shall be reverted or canceled.

Explanation: This budget language restricts funding for the Maryland Children’s Health Program to that purpose only and prevents budgetary transfers to any program except M00Q01.03 Medical Care Provider Reimbursements.

M00Q01.10 Medicaid Behavioral Health Provider Reimbursements

Add the following language to the general fund appropriation:

Provided that these funds are to be used only for the purposes herein appropriated, and there shall be no transfer to any other program or purpose except that funds may be transferred to programs M00L01.03 Community Services for Medicaid State Fund Recipients or M00L01.02 Community Services. Funds not expended or transferred shall be reverted or canceled.

Explanation: This language restricts the entire appropriation for Medicaid behavioral health provider reimbursements for that purpose or for provider reimbursements in M00L01.03 Community Services for Medicaid State Funded Recipients or M00L01.02 Community Services.

Amend appropriation for the purposes indicated:

<table>
<thead>
<tr>
<th>Funds</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Reduce the general fund appropriation made for provider reimbursements due to enrollment trends.</td>
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<tr>
<td>Total Change</td>
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### M00Q01

<table>
<thead>
<tr>
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<th>Allowance</th>
<th>Appropriation</th>
<th>Amount Change</th>
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<td>Special Fund</td>
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<td>Federal Fund</td>
<td>1,365,921,559</td>
<td>1,365,921,559</td>
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<tr>
<td><strong>Total Funds</strong></td>
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<td><strong>2,116,001,197</strong></td>
<td><strong>-40,000,000</strong></td>
</tr>
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</table>

### Fiscal 2023 Deficiency

**M00Q01.10 Medicaid Behavioral Health Provider Reimbursements**

Amend appropriation for the purposes indicated:

<table>
<thead>
<tr>
<th>Funds</th>
<th>Effect</th>
<th>Allowance</th>
<th>Appropriation</th>
<th>Amount Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>GF</td>
<td>1.</td>
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<td>-86,000,000</td>
<td>-86,000,000</td>
</tr>
</tbody>
</table>

Total Change: -86,000,000
Budget Amendments

M00R01.01 Maryland Health Care Commission

Add the following language to the special fund appropriation:

provided that, contingent upon enactment of SB 786 or HB 812, $100,000 of this appropriation made for the purpose of administration in the Maryland Health Care Commission (MHCC) may not be expended until MHCC submits:

(1) regulations to the Joint Committee on Administrative, Executive, and Legislative Review for implementing restrictions of protected health data related to legally protected health care in health information exchanges and electronic health networks, as required under SB 786 or HB 812; and

(2) a letter to the budget committees confirming the submission of the regulations. The letter shall include the proposed regulations and estimated adoption and effective dates for the regulations.

The letter shall be submitted within 30 days of the submission of regulations, and the budget committees shall have 45 days from the date of the receipt of the letter to review and comment. Funds restricted pending the receipt of the letter may not be transferred by budget amendment or otherwise to any other purpose and shall be canceled if the letter is not submitted to the budget committees.

Explanation: This action, contingent on enactment of SB 786 or HB 812, restricts funds for administration until MHCC submits (1) required regulations for implementing restrictions of protected health data related to legally protected health care in health information exchanges and electronic health network; and (2) a letter confirming the submission of regulations to the Joint Committee on Administrative, Executive, and Legislative Review and providing requested information on the timing of when the regulations will be adopted and take effect.

<table>
<thead>
<tr>
<th>Information Request</th>
<th>Author</th>
<th>Due Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Letter confirming the submission of regulations related to health information exchanges and electronic health records</td>
<td>MHCC</td>
<td>Within 30 days of the submission of regulations</td>
</tr>
</tbody>
</table>
Committee Narrative

M00R01.02 Health Services Cost Review Commission

Evaluation of the Maryland Primary Care Program (MDPCP): Given the role of MDPCP in transforming care in the State under the Total Cost of Care (TCOC) model, the committees request information on the effectiveness of the program. In particular, this evaluation should focus on cost savings from MDPCP reducing unnecessary utilization or hospitalization for patients participating in MDPCP over the increased expenditures from provider incentives. The evaluation should include reporting on the racial and ethnic diversity of the program, any efforts to improve minority representation in the program, and improve data collection on racial and ethnic diversity of providers. The evaluation should also consider existing disparities in primary care access and ways in which the State can address these disparities. Further, given the anticipated benefits that the outcome-based credits have against MDPCP’s care management fees, the committees are interested in aggregate costs of the care management fees against TCOC, the amount that outcome-based credits have discounted these expenses, and MDPCP’s contribution to the achievement and maximization of the current and future outcome-based credits and other population health goals.

<table>
<thead>
<tr>
<th>Information Request</th>
<th>Author</th>
<th>Due Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Evaluation of MDPCP</td>
<td>Health Services Cost Review Commission</td>
<td>October 1, 2023</td>
</tr>
</tbody>
</table>
Budget Amendments

N00A01.01 Office of the Secretary

Add the following language to the general fund appropriation:

provided that $100,000 of this appropriation made for the Office of the Secretary may not be expended until the Department of Human Services (DHS) submits a report to the budget committees detailing the department’s efforts to improve oversight of the local department of social services (LDSS) to ensure compliance with State law and regulations and DHS policy as well as improve oversight of procurement processes as included as a repeat finding in the fiscal compliance audit of Local Department Operations released by the Office of Legislative Audits in March 2022. The report shall also detail steps LDSS are taking to resolve repeat audit findings identified in the March 2022 fiscal compliance audit. The report shall be submitted by November 1, 2023, and the budget committees shall have 45 days from the date of the receipt of the report to review and comment. Funds restricted pending the receipt of a report may not be transferred by budget amendment or otherwise to any other purpose and shall be canceled if the report is not submitted to the budget committees.

Explanation: Due to concern over repeat audit findings, the Joint Audit and Evaluation Committee has requested language restricting funds until repeat audit findings are resolved. Given the unique nature of the Local Department Operations audit, which reviews DHS Office of Inspector General audit reports on each LDSS, this language represents a modification to the standard language. This language restricts funds within the Office of the Secretary pending information on efforts by the department to improve oversight of LDSS as well as information on the steps taken by LDSS to address the repeat audit findings.

Information Request  | Author | Due Date
--- | --- | ---
Report on efforts to improve oversight of LDSS | DHS | November 1, 2023
Committee Narrative

N00B00.04 General Administration – State

Hospital Stays by Youth in Out-of-home Placements: The committees continue to be concerned about children and youth experiencing stays in emergency rooms or inpatient hospital settings longer than is medically necessary. Data has been requested on hospital stays by youth in out-of-home placement for several years. In an effort to continue to monitor this issue, the committees request that the Department of Human Services (DHS) submit a report that provides for each month of the period October 2022 through September 2023:

- the number of youths in out-of-home placements served in emergency rooms for psychiatric evaluation or crisis and the average length of stay (ALOS) by month;
- the number of youths in out-of-home placement served separately by medical hospitals and inpatient psychiatric hospitals and ALOS by month;
- the number of days that youth in out-of-home placements served in hospitals were in the hospital longer than was deemed medically necessary by either the hospital or a judicial finding separately by type of hospital; and
- the placement type after discharge separately by type of hospital, including identifying the number of youths placed out-of-state after discharge for fiscal 2023.

DHS should also include an overview of how hospital stay data is reported through the self-reporting process by local departments of social services, and the process by which DHS ensures the accuracy of this data.

Information Request | Author | Due Date
---|---|---
Report on hospital stays, average length of stay, and placement after discharge | DHS | December 1, 2023

Implementation of Provisions of the Family First Prevention Services Act (FFPSA): The committees are interested in being updated on steps taken to continue efforts to implement evidence-based prevention practices and other services under provisions of the FFPSA and the outcomes of those programs and services for families served through the child welfare system. The committees request that the Department of Human Services (DHS) submit a report including:

Health and Human Services Subcommittee – Operating Budget, March 2023
• a list of all evidence-based practices being implemented through fiscal 2023, including data on jurisdiction and number of families or children served during the fiscal year, and any changes planned for evidence-based practices being implemented during fiscal 2024;

• a discussion of how DHS evaluates these programs, including the outcomes achieved and the effectiveness at preventing occurrences of maltreatment for each program;

• the current number of providers in the State that have received designation as a Qualified Residential Treatment Program to allow for federal reimbursement under the FFPSA, including if any additional providers received this designation during fiscal 2023;

• the status of the approval of the State’s revised Cost Allocation Plan; and

• a description of activities completed and outcomes achieved in fiscal 2023 in relation to the Center for Excellence for Foster Family Development.

Information Request  Author  Due Date
Update on the implementation of provisions of the federal FFPSA  DHS  December 15, 2023

Implementation of the New Foster Care Provider Rate Structure: The committees are interested in receiving an update on steps taken during fiscal 2023 and 2024 as part of the development of the new foster care provider rate structure for providers who have rates set by the Interagency Rates Committee. In response to committee narrative included in the 2022 Joint Chairmen’s Report, the Department of Human Services (DHS) indicated that it had fully executed a contract with a vendor for actuarial services and that work on rate revision would begin in fiscal 2023, in preparation for implementation of the new provider rate structure in calendar 2025. The committees request that DHS submit a report on the status of implementation, including the status of any necessary amendments to the State Medicaid Plan to allow for clinical care costs to be eligible for reimbursement, and an update on the implementation timeline.

Information Request  Author  Due Date
Status of implementation of the new provider rate structure  DHS  December 31, 2023
Committee Narrative

N00E01.01 Division of Budget, Finance, and Personnel

Recruitment and Retention Strategy Update: The Department of Human Services (DHS) is experiencing departmentwide vacancy rates nearly double its vacancy rates from fiscal 2019. Given the agency’s recent adoption of multiple recruitment and retention efforts, the committees request that DHS submit a progress update on the impact of its strategy. The report should include the following information:

- a summary of DHS’ new recruitment marketing strategy, including recommendations from the marketing consultant;

- the status of the update to qualification requirements for the child support specialist job series;

- detail on how the department reallocated savings from higher than budgeted vacancies and how much of these savings were reverted or canceled; and

- a compensation comparison of similar jurisdictions of positions with the highest vacancy rates.

<table>
<thead>
<tr>
<th>Information Request</th>
<th>Author</th>
<th>Due Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Recruitment and retention strategy update</td>
<td>DHS</td>
<td>November 1, 2023</td>
</tr>
</tbody>
</table>
Committee Narrative

N00F00.04 General Administration

Report on External Utilization of the Maryland Total Human Services Integrated Network (MD THINK): The Department of Human Services (DHS) began the MD THINK project in fiscal 2017 and, as of December 2022, has completed the transition phase of the project for its department. Other State agencies, including agencies within the Maryland Department of Health, have also transitioned to using MD THINK as their information technology platform. To understand the extent agencies besides DHS could benefit from the new system, the committees request that DHS submit a summary of external agency participation with MD THINK. The report should include:

- list of non-DHS agencies that have transitioned, or plan to transition to, the MD THINK platform;
- implementation timeline for the identified potential transitions by agencies, including the transition of the Department of Juvenile Services into the Child, Juvenile, and Adult Management System; and
- cost estimates for the transition phase for each agency.

Information Request  Author  Due Date
Report on external utilization of MD THINK  DHS  September 1, 2023
Budget Amendments

N00G00.01 Foster Care Maintenance Payments

Add the following language to the general fund appropriation:

Further provided that these funds are to be used only for the purposes herein appropriated, and there shall be no budgetary transfer to any other program or purpose. Funds not expended shall revert to the General Fund.

Explanation: This annual language restricts general funds appropriated for foster care maintenance payments to that use only. This restriction prevents a transfer of general funds to other programs that might create or increase a deficit in spending in the Foster Care Maintenance Payments program (N00G00.01).

Committee Narrative

N00G00.02 Local Family Investment Program

Contractual Full-time Equivalents (FTE) Transitioned to State Regular Positions: The Department of Human Services (DHS) used a portion of a three-year Supplemental Nutrition Assistance Program (SNAP) administrative grant available through the American Rescue Plan Act (ARPA) to support contractual FTEs to assist in case processing. DHS indicated that those hired as contractual FTEs through this grant would have an opportunity to transition to State regular positions. Through January 6, 2023, DHS reported that 47 contractual FTEs had converted to State regular positions. The SNAP administrative grant funds are expected to be fully utilized by the end of fiscal 2023 and are required under the ARPA to be used by September 30, 2023. The committees are interested in the final number of those that transitioned. The committees request that DHS submit a report detailing the final number of unique contractual FTEs hired under this grant, the number that transitioned to State regular positions as family investment specialists, the number that transitioned to any other regular State regular positions within DHS, the number that left the role without transitioning to a State regular position, and a summary of reasons why those that left this role without transitioning failed to transition.

Information Request | Author | Due Date
--- | --- | ---
Report on contractual FTE transitions to State regular positions | DHS | November 1, 2023
N00G00

Budget Amendments

N00G00.03 Child Welfare Services

Add the following language to the general fund appropriation:

, provided that these funds are to be used only for the purposes herein appropriated, and there shall be no budgetary transfer to any other program or purpose except that funds may be transferred to program N00G00.01 Foster Care Maintenance Payments. Funds not expended or transferred shall revert to the General Fund.

Explanation: This annual language restricts general funds appropriated for the Child Welfare Services program to that use only or for transfer to N00G00.01 Foster Care Maintenance Payments.

Committee Narrative

Child Welfare Caseload Data: The committees believe that maintaining an adequate child welfare workforce is essential to improving outcomes for children entering the State’s care. Therefore, in order to maintain oversight of this important issue, the committees request that the Department of Human Services (DHS) report to the committees on the number of cases and positions required based on the caseload to meet the Child Welfare League of America (CWLA) caseload standards, by jurisdiction, for the following caseload types current within 70 days:

- intake screening;
- child protective investigation;
- consolidated in-home services;
- interagency family preservation services;
- services to families with children – intake;
- foster care;
- kinship care;
- family foster care;
- family foster homes – recruitment and new applications;
N00G00

- family foster homes – ongoing and licensing;
- adoption;
- interstate compact for the placement of children; and
- caseworker supervision.

The committees also request that DHS discuss specific actions taken by the department and local departments of social services to reallocate positions, including the number of positions reallocated by type (caseworker or supervisor) between jurisdictions and identifying the jurisdictions that these positions were transferred from and to, in order to ensure that all jurisdictions can meet the standards for both caseworkers and supervisors. Specifically, DHS should discuss efforts to fill vacant positions in jurisdictions that had shortfalls in caseworker and supervisor positions, including Baltimore and Prince George’s counties, which had the largest shortfalls for caseworker positions among jurisdictions as of September 1, 2022. Additionally, the committees request that DHS provide an update on efforts to fill vacant supervisor and caseworker positions in Baltimore City, which had the greatest number of total vacant supervisor and caseworker positions as of September 1, 2022.

In addition to caseload data, the committees also request that the report contain an update on the status of work done by CWLA to implement new workload standards for child welfare and the efforts by DHS to improve recruitment and retention of caseworkers.

<table>
<thead>
<tr>
<th>Information Request</th>
<th>Author</th>
<th>Due Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Report on caseload data and filled positions assigned by jurisdiction for specified caseload types</td>
<td>DHS</td>
<td>December 1, 2023</td>
</tr>
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</table>

Budget Amendments

N00G00.08 Assistance Payments

Add the following language to the general fund appropriation:

, provided that these funds are to be used only for the purposes herein appropriated, and there shall be no budgetary transfer to any other program or purpose. Funds not expended shall revert to the General Fund.

Explanation: This language restricts the general funds appropriated for Assistance Payments, which support public benefit programs administered by the Department of Human Services, to
that use only. This restriction prevents a transfer of general funds to other programs. This language is consistent with actions on other entitlement programs.

Amend appropriation for the purposes indicated:

1. Reduce funds for the Supplemental Nutrition Assistance Program (SNAP) due to lower anticipated benefit levels. The fiscal 2024 allowance assumes average benefits will increase despite the end of Emergency Allotments, which have increased benefits on average by $170 per month according to the Department of Human Services. This reduction still provides funding beyond what is currently expected to be required for SNAP benefits to support program needs if caseloads rise and to provide appropriation if needed for the new federal Summer Electronic Benefit Transfer program and Pandemic Electronic Benefit Transfer benefits that may be issued in fiscal 2024. Federal funds not needed to issue benefits for SNAP are not received from the U.S. Department of Agriculture.

   Total Change -100,000,000

<table>
<thead>
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<th>Effect</th>
<th>Allowance</th>
<th>Appropriation</th>
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<td>-100,000,000</td>
</tr>
</tbody>
</table>

Committee Narrative

Application Processing Times, Denials, and Case Closures: The committees remain interested in tracking the timeliness of application processing as well as reasons for denials and case closures. The committees request that the Department of Human Services (DHS) submit quarterly reports that contain:
the number of applications processed by benefit type for Temporary Cash Assistance (TCA), Supplemental Nutrition Assistance Program (SNAP), and Temporary Disability Assistance Program (TDAP) separately by month;

the average number of days to process applications by benefit type for TCA, SNAP, and TDAP separately by month;

the percentage of applications processed in 0 to 30 days, 31 to 45 days, and longer than 45 days by benefit type for TCA, SNAP, and TDAP separately by month of application;

the number and percentage of applications denied by benefit type for TCA, SNAP, and TDAP separately by month;

the number and percentage of applications denied by reason for denial and by benefit type for TCA, SNAP, and TDAP separately by month;

the number of case closures by benefit type for TCA, SNAP, and TDAP separately by month; and

the reasons for case closure by benefit type for TCA, TDAP, and SNAP separately by month.

The first report should include data for May through July 2023, and each subsequent report should provide data for the appropriate quarter.

<table>
<thead>
<tr>
<th>Information Request</th>
<th>Author</th>
<th>Due Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>TCA, TDAP, and SNAP applications and case closures</td>
<td>DHS</td>
<td>September 29, 2023</td>
</tr>
<tr>
<td></td>
<td></td>
<td>December 29, 2023</td>
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<tr>
<td></td>
<td></td>
<td>March 29, 2024</td>
</tr>
<tr>
<td></td>
<td></td>
<td>June 30, 2024</td>
</tr>
</tbody>
</table>

**Summer Supplemental Nutrition Assistance Program (SNAP):** Chapters 635 and 636 of 2019 created a supplemental benefit for children receiving the Summer SNAP in jurisdictions that chose to implement the program. The program began in fiscal 2021. The committees are interested in continuing to monitor the operation of the program and understanding how it may align or duplicate the new nationwide Summer Electronic Benefit Transfer (EBT) program expected to begin in 2024. The committees request that the Department of Human Services (DHS) provide two reports with the following information:

- the number of children served by participating jurisdiction;
- the benefit level provided by jurisdiction;
• the number of children in participating jurisdictions that are not able to receive benefits due to insufficient funding by jurisdiction; and

• participation rates by jurisdiction.

In addition, the first report should also provide information on the number of jurisdictions that applied for the program funding; how the determination for funding was made by jurisdiction; the total funding available for benefits, including the local match by jurisdiction and any funding provided by jurisdictions beyond the amount required; and how jurisdictions determined which children would receive the benefit. The first report should also address efforts to implement the new nationwide Summer EBT program, including how or whether the State’s Summer SNAP will align or duplicate the new program.

The first report should cover the summer portion of the program (June, July, and August 2023), while the second report should cover the winter portion of the program (December 2023).

### Information Request

<table>
<thead>
<tr>
<th>Information Request</th>
<th>Author</th>
<th>Due Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children receiving benefits through the Summer SNAP for Children Act</td>
<td>DHS</td>
<td>October 1, 2023</td>
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<td></td>
<td></td>
<td>March 1, 2024</td>
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**Identifying Spending on Separate Benefit Programs:** The committees continue to be interested in understanding the Supplemental Nutrition Assistance Program spending separately from federal supplemental benefits. Although the Pandemic Electronic Benefit Transfer (P-EBT) program is expected to end with the 2022-2023 school year and summer 2023 program, a new nationwide Summer Electronic Benefit Transfer (EBT) program is expected to begin in 2024. The committees request that the Department of Human Services (DHS) and the Department of Budget and Management (DBM) separately identify in subprogram detail spending related to the P-EBT program in the fiscal 2023 actual and, to the extent applicable, the fiscal 2024 working appropriation. The committees also request that DHS and DBM separately identify in subprogram detail spending related to the Summer EBT program beginning in the budget submission for fiscal 2025 (including any funding required for fiscal 2024).

<table>
<thead>
<tr>
<th>Information Request</th>
<th>Author</th>
<th>Due Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>P-EBT and Summer EBT costs</td>
<td>DHS</td>
<td>With the submission of the fiscal 2025 allowance and annually thereafter</td>
</tr>
<tr>
<td></td>
<td>DBM</td>
<td></td>
</tr>
</tbody>
</table>

**Calculation of Income for Temporary Cash Assistance (TCA):** The committees are interested...
in understanding efforts by the Department of Human Services (DHS) to adjust the calculation of income for purposes of eligibility and benefit determination to include a portion of certain federal housing subsidies. The committees request that DHS submit a report on any changes in regulations to exclude federal housing subsidies from income and other related adjustment in the calculation of income and other efforts to implement a change in the calculation. If the department has amended regulations, the committees request the report to also include information on:

- outreach to recipients that would be impacted by the change in calculation;
- the status of modifications to the Eligibility and Enrollment system to effectuate the change; and
- whether benefits have been altered due to the change in calculation from the amended regulations or when benefits are expected to be altered, including the number of recipients impacted and average value of increased benefits due to the change.

### Information Request

<table>
<thead>
<tr>
<th>Information Request</th>
<th>Author</th>
<th>Due Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Report on calculation of income for TCA</td>
<td>DHS</td>
<td>December 15, 2023</td>
</tr>
</tbody>
</table>
Committee Narrative

N00H00.08 Child Support – State

Child Support Performance Reports: The federal government evaluates states’ performance against five measures to determine federal incentive payments: paternity establishment; support order establishment; collections on current support; cases paying toward arrears; and cost effectiveness. Recent data from the Department of Human Services (DHS) Child Support Administration (CSA) shows that the agency is falling behind the federal performance goals in each of the five areas. Considering CSA’s recent transition of its primary data system, the Child Support Management System (CSMS), to make its agency’s processes and tasks more efficient, the committees are interested to understand how this new system is helping CSA achieve its performance goals.

The committees request that DHS submit three reports on performance using data as of June 30, 2023; September 30, 2023; and December 31, 2023. Each report should include the following:

- a discussion of factors affecting performance in the quarter;
- the State’s aggregate performance set against the five performance measures used to determine federal incentive payments;
- each jurisdiction’s performance set against the five performance measures used to determine federal incentive payments;
- the number of cases in each jurisdiction in the quarter;
- specific tasks related to each of the five performance measures that are streamlined, made more efficient, or made more complicated by the new CSMS; and
- the number of staff in each jurisdiction who have been trained and those who have yet to be trained in the new CSMS.

Information Request

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<tr>
<th>Information Request</th>
<th>Author</th>
<th>Due Date</th>
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<tbody>
<tr>
<td>Child support performance reports</td>
<td>DHS</td>
<td>August 15, 2023</td>
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<td>November 15, 2023</td>
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<td>February 15, 2024</td>
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Health and Human Services Subcommittee – Operating Budget, March 2023

N00H00

Report on Child Support Administration (CSA) Efforts to Fill Vacant Positions: The Department of Human Services (DHS) has been experiencing high vacancy rates departmentwide in recent years. As of December 31, 2022, CSA had 85.5 vacant positions, 8 of which had been unfilled for more than one year. Given recent departmentwide efforts to bolster employee recruitment, the committees are interested in monitoring vacancies at CSA. The committees request that DHS submit two reports using data as of May 30, 2023, and October 31, 2023. The reports should include:

• status of 8 positions that have been vacant for more than one year;

• planned or enacted changes to vacant positions, including reclassifications and position terminations;

• active recruitment efforts to fill vacant positions; and

• actions taken to implement the recruitment and retention plan submitted by DHS in December 2022.

Information Request Authors Due Date
Report on CSA efforts to fill vacant positions DHS July 7, 2023

December 1, 2023
Budget Amendments

N00100.04  Director’s Office

Add the following language to the general fund appropriation:

, provided that since the Department of Human Services (DHS) Family Investment Administration has had four or more repeat audit findings in the most recent fiscal compliance audit issued by the Office of Legislative Audits (OLA), $100,000 of this agency’s administrative appropriation may not be expended unless:

(1)  DHS has taken corrective action with respect to all repeat audit findings on or before November 1, 2023; and

(2)  a report is submitted to the budget committees by OLA listing each repeat audit finding along with a determination that each repeat finding was corrected. The budget committees shall have 45 days from the receipt of the report to review and comment to allow for funds to be released prior to the end of fiscal 2024.

Explanation: The Joint Audit and Evaluation Committee has requested that budget bill language be added for each unit of State government that has four or more repeat audit findings in its most recent fiscal compliance audit. Each agency is to have a portion of its administrative budget withheld pending the adoption of corrective action by the agency and a determination by OLA that each finding was corrected. OLA shall submit a report to the budget committees on the status of the repeat findings.

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<tr>
<td>Status of corrective actions related to the most recent fiscal compliance audit</td>
<td>OLA</td>
<td>45 days before the release of funds</td>
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Committee Narrative

N00100.06  Office of Home Energy Programs

Energy Assistance Application Processing Times and Denial Rates: The committees are interested in continuing to monitor energy assistance application processing times by local administering agencies (LAA) and overall program denial rates. The committees request that the Department of Human Services (DHS) provide by LAAs:
• the number of applications received;

• the average number of days to process an application; and

• the number and percentage of applications processed within 30 days, 55 days, and longer than 60 days.

The report should also note any changes in application processing times occurring during fiscal 2024 due to the transition of the administration of programs from LAAs to local departments of social services as part of efforts to implement a unified administrative model for categorical eligibility determinations for energy assistance programs.

In addition, the committees request that DHS provide application denial rates separately by benefit type as well as the share of application denials by reason separately by benefit type. *Data should list denial rates by LAA and, if feasible, based on application intake method (for example, in-person versus online application filing).* Data should also include the number of applications initially denied due to incomplete information that were subsequently cured due to applicants providing missing information within the additional three months, as allowed for under Chapters 638 and 639 of 2021. Fiscal 2023 end-of-year actual data for denial rates should be included in the report as well as fiscal 2024 data current through November 1, 2023.

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<td>DHS</td>
<td>December 31, 2023</td>
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**Implementation of Categorical Eligibility for Energy Assistance Programs:** The committees are interested in continuing to be updated on administrative changes to energy assistance programs and request that the Department of Human Services (DHS) submit a report providing an update on the status of the implementation of categorical eligibility for energy assistance. The DHS Office of Home Energy Programs (OHEP) has begun to take necessary steps to implement categorical eligibility to reduce administrative costs, simplify the application process, and reduce denial rates, and previously indicated that key changes would be implemented prior to July 1, 2023, including:

• integration of the OHEP Data Management System with DHS’s new Enrollment and Eligibility system; and

• establishment of a centralized administrative model through local departments of social services (LDSS) for energy assistance programs.
The report should include an update on the status of these items, in addition to updates on the following:

- the status of an amendment to the Low Income Home Energy Assistance Program State model plan reflecting the option for qualifying applications for the Maryland Energy Assistance Program through this mechanism, and the status of any legislation enacted during the 2023 session amending the State’s Electric Universal Services Program (EUSP) statute to reflect the option for qualifying applications to the EUSP program through this mechanism;

- the role that non-LDSS local administering agencies have provided during the transition period and will continue to provide in the areas of outreach and other assistance following the transition of program administration to the LDSS model; and

- estimated budgetary impacts of the implementation of categorical eligibility, including actual or estimated cost savings for program administration resulting from a centralized administrative model and estimated cost changes due to any changes in program eligibility enacted for the fiscal 2024 program year.

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<tr>
<td>Report on the status of the implementation of categorical eligibility and other administrative changes</td>
<td>DHS</td>
<td>December 1, 2023</td>
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Committee Narrative

OFFICE OF THE SECRETARY

S00A20.01 Office of the Secretary

Broadband Initiatives: The committees remain interested in understanding how funding for broadband programs is allocated. Given the expansion of funding and the deployment of funds through multiple subsidy and grant programs, the committees request that the Department of Housing and Community Development (DHCD) and the Department of Budget and Management (DBM) separately identify funding for the Office of Statewide Broadband in a unique program code and further identify specific initiatives in subprogram detail.

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<td>DHCD</td>
<td>With the submission of the fiscal 2025 allowance, or with earlier budget documentation as appropriate</td>
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Broadband Planning Process: It is the intent of the committees that funding provided by the Office of Statewide Broadband (OSB) to expand broadband infrastructure in the State be used to support high quality jobs with high quality wages and benefits. To this end, the committees request that OSB consult with relevant labor organizations during the development of a statewide broadband plan and the action plan required by the Infrastructure Investment and Jobs Act for the Broadband Equity, Access, and Deployment (BEAD) program. It is also the intent of the committees that OSB consider prioritizing fiber projects as well as projects that meet or exceed 100 megabits per second symmetrical speeds when awarding funding under the BEAD program. The committees request that the Department of Housing and Community Development (DHCD) submit a report on actions OSB is taking during the broadband planning process to ensure that broadband funding supports high quality jobs in the State.

Information Request

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<td>DHCD</td>
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Health and Human Services Subcommittee – Operating Budget, March 2023
Air Conditioning in Residential Rental Units: The committees are interested in understanding the status of air conditioning in residential rental units in Baltimore City that are owned or operated by the Housing Authority of Baltimore City (HABC). The committees request that HABC provide a report identifying the number of units that HABC owns or operates that have air conditioning as well as the number of units HABC owns or operates that do not.

Information Request  | Author  | Due Date
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Report on air conditioning in residential rental units  | HABC  | November 1, 2023

DIVISION OF NEIGHBORHOOD REVITALIZATION

S00A24.01 Neighborhood Revitalization

Statewide Emergency Rental Assistance (ERA) Program: The committees are interested in exploring a statewide ERA program, given the discontinued federal funding for the federal ERA program. Therefore, it is the intent of the committees that the Department of Housing and Community Development (DHCD) establish and lead a task force to study the feasibility of creating and maintaining a statewide ERA program. The membership of the task force should consist of representatives from the House of Delegates, the Senate of Maryland, the Maryland Legal Services Corporation, the Judiciary, the Maryland Association of Counties, local emergency rental assistance providers, nonprofit service providers, renters, advocates, and other interested parties. The committees request that the task force study the feasibility of a statewide ERA program, identify potential sources of sustainable funding, and make recommendations related to the following considerations:

- a framework for distributing the statewide ERA program, considering the jurisdictional need and jurisdictional administrative choice for distribution;
- income guidelines for targeting funds to low-income households in the State;
- how to leverage current data analyses to target outreach and implementation of a statewide ERA program;
- how to integrate the ERA program with court eviction proceedings;
- housing stability and tenant protections that should be incorporated into the program; and
- any other recommendations relevant to implementing a statewide ERA program.
DHCD should report the findings and recommendations of the task force to the committees by December 1, 2023.

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