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**Senate Budget and Taxation Committee  
Health and Human Services Subcommittee**

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**Additional Pages**

**March 10, 2026**



**D11A0401**  
**Office of the Deaf and Hard of Hearing**

**Budget Amendments**

**D11A04.01 Executive Direction**

Add the following language to the general fund appropriation:

, provided that \$50,000 of this appropriation made for the purpose of executive direction may not be expended until the Office of the Deaf and Hard of Hearing submits a letter confirming that it has published notification of the final action on the regulations for the State sign language licensing requirements in the Maryland Register. The letter shall be submitted to the budget committees within 30 days of the publishing of regulations, 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:** Chapters 269 and 270 of 2023 (Maryland Sign Language Interpreters Act) required the State Board of Sign Language Interpreters to establish and publish licensing requirements for sign language interpreters by July 1, 2024. While proposed regulations were submitted for public comment in June 2025, the Office of the Deaf and Hard of Hearing (ODHH) announced in November 2025 that the development of regulations was being paused due to concerns raised during the public comment period. This language restricts funding until ODHH submits a report to the budget committees indicating that it has published the notice of the final action on the regulations in the Maryland Register.

<b>Information Request</b>	<b>Author</b>	<b>Due Date</b>
Letter confirming publication of the final action on regulations	ODHH	Within 30 days of the publication of regulations

**D11A0401**  
**Office of the Deaf and Hard of Hearing**

**Budget Amendments**

**D11A04.01 Executive Direction**

Add the following language to the general fund appropriation:

, provided that \$50,000 of this appropriation made for the purpose of executive direction may not be expended until the Office of the Deaf and Hard of Hearing submits a report on the status of all positions authorized for fiscal 2027 that were vacant as of December 31, 2025, including the date filled for any positions that have been filled, and any active recruitment efforts to fill vacant positions. The report shall be submitted to the budget committees by August 15, 2026, 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:** As of December 31, 2025, 4 positions within the Office of the Deaf and Hard of Hearing (ODHH) were vacant, leading to a vacancy rate of 57.1%. All 4 vacant positions had been vacant for more than one year. This language restricts funding until ODHH submits a report to the budget committees on the status of all positions authorized in the fiscal 2027 budget that were vacant as of December 31, 2025, and any active recruitment efforts to fill vacant positions.

<b>Information Request</b>	<b>Author</b>	<b>Due Date</b>
Report on vacant positions	ODHH	August 15, 2026

# D50H01 Military Department

## Budget Bill Language

### D50H01.05 State Operations

Add the following language to the general fund appropriation:

, provided that \$500,000 of this appropriation made for the purpose of administrative expenses may not be expended until the Military Department, in collaboration with the Department of General Services, submits a report to the budget committees on the Freestate Challenge Academy (FCA), including the expected timeline for reopening FCA, detailed facility assessment report, and estimated total costs, funding sources, and actual spending for facility renovations. The report should also discuss the Military Department's plan and timeline to increase personnel at FCA in preparation for reopening the program.

The Military Department shall submit the report to the budget committees by September 1, 2026, 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:** In September 2025, the FCA program was shut down due to plumbing issues at the facility. The FCA program remains closed with no timeline for reopening. The fiscal 2027 budget abolishes 47 of 50 regular positions dedicated to this program and reduces the operating budget by \$8.7 million, or 96.6%, as compared to the fiscal 2026 working appropriation. This language restricts funds pending submission of a report from the Military Department and the Department of General Services (DGS) on the timeline for reopening FCA and details on facility renovations.

<b>Information Request</b>	<b>Author</b>	<b>Due Date</b>
Report on FCA reopening and facility renovations	Military Department DGS	September 1, 2026

**E80E**  
**Property Tax Assessment Appeals Board**

**Budget Amendment**

**E80E00.01 Property Tax Assessment Appeals Board**

Add the following language to the general fund appropriation:

, provided that \$50,000 of this appropriation made for the purpose of administration in the Property Tax Assessment Appeals Board (PTAAB) may not be expended until PTAAB submits a report to the budget committees on how the agency is transitioning from paper-based processes to electronic processes to enhance efficiency. The report shall include:

- (1) a description of all current paper-based processes used for agency operations; and
- (2) what actions are being taken and the timeframe to move each of these processes into an electronic format.

The report shall be submitted by September 1, 2026, 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:** PTAAB reported that it relies entirely on paper-based processes for its operations. This language restricts funds budgeted for administrative purposes until PTAAB submits a report on actions being taken to move away from paper-based processes.

<b>Information Request</b>	<b>Author</b>	<b>Due Date</b>
Report on transition from paper-based processes	PTAAB	September 1, 2026

**M00A01**  
**Administration**  
**Maryland Department of Health**

**Budget Amendment**

**M00A01.01 Executive Direction**

Add the following language to the general fund appropriation:

Further provided that \$100,000 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 staffing of the pediatric hospital overstay unit at the John L. Gildner Regional Institute for Children and Adolescents (JLG RICA). The report shall include:

- (1) the number of staff working at the overstay unit at JLG RICA;
- (2) the number of filled and vacant positions at the unit as of June 1, 2026;
- (3) the cost of staffing the additional beds in fiscal 2026 to date as of June 1, 2026;
- (4) the intended use or amount reverted for any unspent funding that was restricted for this purpose in fiscal 2026;
- (5) the number of existing beds and the number of staffed beds in the unit as of June 1, 2026;  
and
- (6) the department's plan, including a timeline, to fill any vacancies in the unit.

The report shall be submitted by July 15, 2026, 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 fiscal 2026 Budget Bill restricts \$3 million in general funds to be used only to address pediatric hospital overstays. The Maryland Department of Health (MDH) indicated that it would use the funding to increase staff for additional beds at JLG RICA. In fiscal 2026, MDH transferred 31.0 vacant positions from the Thomas B. Finan Hospital Center to staff the overstay unit at JLG RICA. However, as of March 1, 2026, all of these positions remain vacant. This language restricts funds pending submission of a report on the timeline for filling vacancies, how the beds will be staffed and made available, as well as how the restricted funding has been used to expand the facility's capacity.

**Information Request**

**Author**

**Due Date**

Report on staffing at JLG  
RICA

MDH

July 15, 2026

**M00B0103**  
**Office of Health Care Quality**  
**Maryland Department of Health**

**Budget Amendment**

**M00B01.03 Office of Health Care Quality**

Add the following language to the general fund appropriation:

, provided that \$100,000 of this appropriation made for the purpose of administration may not be expended until the Office of Health Care Quality within the Maryland Department of Health submits a report to the budget committees on the current status of the contract awarded in fiscal 2025 and continuing in fiscal 2027 for subcontractor nurse surveyors to address a complaint investigation backlog in the Long Term Care program. The report shall include the current status of the backlog and timeline for fully resolving the backlog. The report shall also include the fiscal 2026 closing fund balance and the estimated fiscal 2027 closing fund balance of the State Civil Money Penalty Fees Fund and use of the fund for the contract, including any modifications of the contract due to lower revenue attainment than anticipated. The report shall be submitted by November 1, 2026, 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.

**Explanation:** This action restricts funds within the Office of Health Care Quality (OHCQ) pending the submission of a report on the status of resolving the complaint investigation backlog in the Long Term Care program with the use of a contract for nurse surveyors, including an update on the use of the State Civil Money Penalty Fees fund for the contract.

<b>Information Request</b>	<b>Author</b>	<b>Due Date</b>
Report on Long Term Care Program complaint investigation backlog	OHCQ	November 1, 2026

**M00B0103**  
**Office of Health Care Quality**  
**Maryland Department of Health**

**Budget Amendment**

**M00B01.03 Office of Health Care Quality**

Add the following language to the general fund appropriation:

Further provided that \$100,000 of this appropriation made for the purpose of administration may not be expended until the Office of Health Care Quality (OHCQ) within the Maryland Department of Health submits a report to the budget committees with additional details on the memorandum of understanding with Montgomery County that delegates authority to conduct nursing home surveys and complaint investigations. The report shall include the responsibilities delegated to Montgomery County, the start date and length of delegated authority, and costs associated with conducting surveys and complaint investigations, including the amounts that are State-funded and county-funded, and any federal funds that are passed through OHCQ. The report shall also include information on whether other counties have requested authority for survey activities. The report shall be submitted by December 1, 2026, 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.

**Explanation:** A provision in the Budget Reconciliation and Financing Act of 2025 authorized Montgomery County to request, and requires the Maryland Department of Health (MDH) to delegate, authority for the county to conduct nursing home surveys and complaint investigations if MDH failed to comply with requirements for conducting annual surveys and completing complaint investigations in a timely manner in fiscal 2023 and 2024. This action restricts funds pending the submission of a report with details on the memorandum of understanding (MOU) with Montgomery County that delegates nursing home survey activities, including a description of whether other counties have requested authority for survey activities.

<b>Information Request</b>	<b>Author</b>	<b>Due Date</b>
Report on Montgomery County MOU for survey activities	OHCQ	December 1, 2026

**M00B0104**  
**Health Professional Boards and Commissions**  
**Maryland Department of Health**

**Budget Amendment**

**M00B01.04 Health Professional Boards and Commissions**

Add the following language to the special fund appropriation:

, provided that \$100,000 of this appropriation made for the purpose of administration in the State Board of Professional Counselors and Therapists (BOPCT) may not be expended until BOPCT, in collaboration with the Maryland Department of Health (MDH), submits a report to the budget committees with an update on the implementation of recommendations from the Office of Program Evaluation and Government Accountability's evaluation of BOPCT. The report shall include the status of implementing each of the following recommendations that require action from MDH and BOPCT:

- (1) MDH should consider developing and implementing a formal orientation and training program for new executive directors. Additionally, MDH should consider implementing an executive director mentorship program;
- (2) the smaller Health Professional Boards and Commissions (HPBC) should consider hiring a dedicated human resources liaison, shared amongst BOPCT and the other smaller HPBCs;
- (3) consider increasing the number of merit positions within BOPCT by converting contractual positions to merit positions or by transferring vacant merit positions from other HPBCs to BOPCT;
- (4) BOPCT board members should regularly review Intranet Quorum service records with the BOPCT executive director to monitor customer satisfaction and proactively address issues;
- (5) BOPCT should attempt to reduce the number of initial applications with missing components; and
- (6) BOPCT should implement one comprehensive, standardized internal tracking system for all initial applications and reengineer its process for reviewing initial applications.

The report shall be submitted by September 1, 2026, 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:** The Department of Legislative Services Office of Program Evaluation and Government Accountability (OPEGA) published an evaluation of BOPCT in September 2025. OPEGA’s evaluation included various findings for the board relating to licensing, compliance, management, and staffing. Of the seven recommendations from the evaluation, six are directed toward MDH to consider and BOPCT to implement. BOPCT agreed with all recommendations. This language restricts funds pending the submission of a report on BOPCT’s progress in implementing the recommendations.

<b>Information Request</b>	<b>Author</b>	<b>Due Date</b>
BOPCT evaluation recommendation updates	BOPCT MDH	September 1, 2026

**M00B0104**  
**Health Professional Boards and Commissions**  
**Maryland Department of Health**

**Budget Amendment**

**M00B01.04 Health Professional Boards and Commissions**

Add the following language to the special fund appropriation:

Further provided that \$100,000 of this appropriation made for the purpose of administration in the Health Professional Boards and Commissions (HPBC) may not be expended until HPBC, in collaboration with the Maryland Department of Health, submits a report to the budget committees on recent HPBC special fund balance transfers authorized in the Budget Reconciliation and Financing Acts of 2021, 2024, and 2025, specifically how the transfers have impacted HPBC operations, the ability to improve staffing, and investments in technology. The report shall be submitted by December 1, 2026, 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:** In the past five years from fiscal 2022 to 2026, provisions in the Budget Reconciliation and Financing Act of 2021, 2024, and 2025 have transferred a total of \$13.0 million from HPBC special fund balances to other offices within the Maryland Department of Health (MDH). This language restricts funds pending submission of a report on the impact of special fund balance transfers on HPBC.

<b>Information Request</b>	<b>Author</b>	<b>Due Date</b>
Impact of fund balance transfers on HPBC	HPBC MDH	December 1, 2026

**M00B0104**  
**Health Professional Boards and Commissions**  
**Maryland Department of Health**

**Budget Amendment**

**M00B01.04 Health Professional Boards and Commissions**

Add the following language to the special fund appropriation:

Further provided that \$100,000 of this appropriation made for the purpose of administration in the State Board of Pharmacy may not be expended until the State Board of Pharmacy, in collaboration with the Maryland Department of Health, submits:

- (1) regulations to the Joint Committee on Administrative, Executive, and Legislative Review necessary to ensure that an individual who is blind, visually impaired, or otherwise print disabled has appropriate access to prescription labels, bag tabs, and medical guides, as required by Chapters 279 and 280 of 2023; 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:** Chapters 279 and 280 require the State Board of Pharmacy to adopt regulations necessary to ensure that an individual who is blind, visually impaired, or otherwise print disabled has appropriate access to prescription labels, bag tags, and medical guides. This action restricts funds for administration until the State Board of Pharmacy, in collaboration with the Maryland Department of Health (MDH), submits (1) required regulations to make prescription labels accessible for visually impaired individuals and (2) a letter confirming the submission of regulations to the Joint Committee on Administrative, Executive, and Legislative Review and providing information on the timing of when the regulations will be adopted and take effect.

<b>Information Request</b>	<b>Author</b>	<b>Due Date</b>
Letter confirming the submission of regulations related to prescription labels	State Board of Pharmacy MDH	Within 30 days of the submission of regulations

**M00F03**  
**Prevention and Health Promotion Administration**  
**Maryland Department of Health**

**Budget Amendment**

**M00F03.04 Family Health and Chronic Disease Services**

Add the following language to the general fund appropriation:

Further provided that \$100,000 of this appropriation made for the purpose of administration may not be expended until the Maryland Department of Health (MDH) submits a report to the budget committees on State activities related to the detection and treatment of genetic disorders and other serious health conditions, including metachromatic leukodystrophy. The report shall include:

- (1) the list of routine newborn health screenings conducted by MDH;
- (2) a description of MDH's process to review and adjust the list of routine newborn health screenings conducted by the department;
- (3) the estimated date of completion for updating Maryland's newborn screening panel to include metachromatic leukodystrophy, in alignment with the U.S. Department of Health and Human Services Recommended Uniform Screening Panel; and
- (4) State programs that connect families of young children with terminal illnesses to resources for treatment or clinical trials for which they are eligible.

The report shall be submitted by October 1, 2026, 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 committees are interested in MDH's role in detecting serious health conditions among young children. In December 2025, the U.S. Department of Health and Human Services added metachromatic leukodystrophy and Duchenne Muscular Dystrophy to the Recommended Uniform Screening Panel (RUSP). Per statute, MDH is required to include these disorders in its newborn screening panel within 18 months of being added to RUSP (June 2027). In addition, for some conditions, treatment options are unaffordable, and families may have difficulty accessing clinical trials. This language restricts funds pending the submission of a report on State activities related to the detection and treatment of genetic disorders and serious health conditions in children.

**Information Request**

**Author**

**Due Date**

Report on the detection and treatment of serious health conditions in children

MDH

October 1, 2026

**M00L**  
**Behavioral Health Administration**  
**Maryland Department of Health**

**Committee Narrative**

Adopt the following narrative:

**Report on Financing for Long-acting Injectable Medication:** Long-acting injectable (LAI) medications are used to treat psychosis or as mood stabilizers in individuals living with serious and persistent mental illness (SPMI). LAIs may help individuals with SPMI maintain treatment consistency and reduce hospitalization. In Maryland, LAI services are reimbursed under the hospital rate, set by the Maryland Health Services Cost Review Commission (HSCRC). The committees are interested in the feasibility of financing these treatments as outpatient Medicaid services through a State Plan Amendment (SPA) or Medicaid waiver. The committees request that the Maryland Department of Health (MDH) Medical Care Programs Administration, in conjunction with the Behavioral Health Administration and HSCRC, submit a report that includes:

- whether MDH and HSCRC have evaluated the potential for carving LAIs out of the hospital daily rate, including any impacts on operations, the rate setting processes, and federal considerations;
- the process by which MDH could establish a SPA for LAI services for Medicaid enrollees in Maryland and how it would interact with the hospital daily rate set by HSCRC;
- the projected impact of carving out LAI services on behavioral health spending through the Medicaid program and hospital finances;
- research on the impacts of early initiation of LAIs in inpatient settings on reducing readmissions or lengths of stay in emergency departments in Maryland; and
- utilization of LAIs under current practice in Maryland.

<b>Information Request</b>	<b>Author</b>	<b>Due Date</b>
Report on financing for long-acting injectables	MDH HSCRC	September 1, 2026

**M00L**  
**Behavioral Health Administration**  
**Maryland Department of Health**

**Budget Amendment**

**M00L01.02 Community Services**

Add the following language to the general fund appropriation:

Further provided that \$1,000,000 of this appropriation made for the purpose of behavioral health investments in the Behavioral Health Administration may not be expended for that purpose and may be used only to provide funding for fees related to certification of peer recovery specialists and salary support for peer recovery specialists' supervised practice hours required to complete certification. Funds not expended for this restricted purpose may not be transferred by budget amendment or otherwise to any other purpose and shall revert to the General Fund.

**Explanation:** This action restricts funds within the Community Services program to be used only to provide funds for the first year of programs that support the certification of and internships for peer recovery specialists in the State.

**M00L**  
**Behavioral Health Administration**  
**Maryland Department of Health**

**Budget Amendment**

**M00L01.02 Community Services**

Add the following language to the general fund appropriation:

Further provided that \$100,000 of this appropriation made for the purpose of administration may not be expended until the Behavioral Health Administration (BHA) submits a report to the budget committees on a plan to address the State’s behavioral health workforce shortage. The report shall include:

- (1) a description of workforce-related findings from BHA’s white space analysis;
- (2) a description of the feasibility of implementing each of the eight recommendations from the Maryland Health Care Commission’s October 2024 report, Investing in Maryland’s Behavioral Health Talent, that are related to the Behavioral Health Workforce Investment Fund, including challenges to implementation;
- (3) a description of statutory or regulatory changes needed to expand the allowable uses of the Maryland Loan Repayment Programs to include loan forgiveness for behavioral health workers;
- (4) a description of BHA’s planned activities and their cost over each of the next five fiscal years to improve recruitment and retention of behavioral health workers in the State and BHA’s prioritization of these activities;
- (5) proposed fund sources for the Behavioral Health Workforce Investment Fund; and
- (6) a description of challenges and barriers to funding or administering the fund.

The report shall be submitted by November 1, 2026, 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:** Chapters 286 and 287 of 2023 established the Behavioral Health Workforce Investment Fund to support the education, training, recruiting, and retaining of behavioral professionals and paraprofessionals in Maryland. The legislation also required the Maryland Health Care Commission (MHCC) to publish a behavioral health workforce study, which found that the State has 18,200 fewer behavioral health workers than needed to meet the State’s need as of calendar 2024. To date, BHA has not added money to this fund, nor implemented any

recommendations from MHCC’s study. This language restricts funds pending the submission of a report on the BHA’s plan to address the State’s behavioral health workforce shortage.

<b>Information Request</b>	<b>Author</b>	<b>Due Date</b>
Report on planned efforts to address the behavioral health workforce shortage	BHA	November 1, 2026

**M00Q01**  
**Medical Care Programs Administration**  
**Maryland Department of Health**

**Budget Amendment**

**M00Q01.01 Deputy Secretary for Health Care Financing**

Add the following language to the general fund appropriation:

Further provided that it is the intent of the General Assembly that the Maryland Department of Health (MDH) establish a workgroup on nursing home performance and develop a public scorecard for each nursing home in Maryland. The workgroup shall make recommendations regarding the following topics:

- (1) performance measurement parameters and a grading system for nursing home quality and system cooperation with hospitals to be used in scorecards;
- (2) quantitative and qualitative performance data to be published in scorecards, including hospital admissions by reason, survey performance for family satisfaction and health outcomes, end of life planning performance, and how nursing homes work with hospitals to serve patients with high health acuity;
- (3) use of data from the Chesapeake Regional Information System for our Patients (CRISP) and Nursing Home Data Initiative to prepare public scorecards and improve health outcomes for patients;
- (4) expansion of the State's quality improvement program for nursing homes, including performance measures and outcomes currently used and ways to phase in additional payments to high achieving nursing homes based on results reported on public scorecards;
- (5) targets for care transitions from nursing homes to lower levels of care, such as assisted living facilities and home and community-based services, for patients that have resided in a nursing facility for at least six months and are dually eligible for Medicaid and Medicare;
- (6) how cost savings resulting from care transitions would be tracked and shared among State and federal programs and long-term care providers;
- (7) in collaboration with the Health Services Cost Review Commission (HSCRC), requirements for hospitals to develop preferred nursing home networks and methods to encourage placement of patients with high performing nursing homes based on results reported on public scorecards;

- (8) requirements for nursing homes to participate in value-based care programs administered by the Centers for Medicare and Medicaid Services, including programs using accountable care and integrated care models; and
- (9) efforts to use CRISP health records and the Nursing Home Data Initiative to track infectious diseases among patients in nursing facilities and establish partnerships between MDH and CRISP to alert nursing facilities of infectious disease outbreaks.

Further provided that \$250,000 of this appropriation made for the purpose of administration may not be expended until MDH, in collaboration with HSCRC and CRISP, submits a report to the budget committees on activities and preliminary discussions and recommendations of the workgroup on nursing home performance. The report shall include:

- (1) the roster of members for the workgroup as of the date of the report;
- (2) a description of the workgroup’s activities in fiscal 2026 and 2027 year to date, including the actual and planned dates of workgroup meetings; and
- (3) summaries of the workgroup’s discussions and preliminary recommendations for the enumerated topics, including nursing home performance measures, the plan and timeline for publishing scorecards for each nursing home in Maryland, quality improvement, value-based care, use of CRISP data and health record data sharing to improve outcomes, hospital partnerships, transitions from nursing home care to lower levels of care, and all other topics examined by the workgroup.

The report shall be submitted by December 15, 2026, 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:** This language expresses the intent of the General Assembly that MDH develop performance scorecards for each nursing home in Maryland and establish a workgroup on nursing home performance to make determinations and recommendations regarding nursing home performance measures, quality improvement, value-based care, use of CRISP data and health record data sharing to improve outcomes, hospital partnerships, and transitions from nursing home care to lower levels of care. This language also restricts funds pending the submission of a report from MDH, in collaboration with HSCRC and CRISP, on the workgroup’s activities and preliminary discussions regarding the enumerated topics.

<b>Information Request</b>	<b>Author</b>	<b>Due Date</b>
Report on activities of the workgroup on nursing home performance	MDH HSCRC CRISP	December 15, 2026

**M00Q01**  
**Medical Care Programs Administration**  
**Maryland Department of Health**

**Budget Language**

**M00Q01.01 Deputy Secretary for Health Care Financing**

Add the following language to the general fund appropriation:

. provided that **\$250,000** 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 Community First Choice (CFC) program and Community-based Options (Community Options) waiver spending **and activities of the Eligibility Determination Division (EDD)**. The report shall include monthly enrollment, utilization, and cost data that aligns with actual fiscal 2026 budget expenditures under the CFC program. Additionally, the report shall provide:

- (1) the number of budgeted Community Options waiver slots in fiscal 2026 and 2027;
- (2) the number of Community Options waiver slots filled in fiscal 2026;
- (3) 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);
- (4) an update on changes to **EDD and** registry operations to improve efficiency in **determining home and community-based services (HCBS) waiver eligibility and** taking individuals off of the registry and efforts to determine financial and medical eligibility for individuals while they remain on the registry;
- (5) an update on MDH staffing that supports the Community Options waiver and eligibility determination services for all HCBS waivers, including the number of vacant regular and contractual positions and the status of procuring additional staffing assistance;
- (6) **a plan and timeline for addressing information technology system limitations, data and reporting limitations, and staffing constraints that prevent EDD from processing HCBS waiver eligibility in a timely and efficient manner;**
- (7) **data on HCBS waiver application and renewal denials, including the number and percentage of applications and renewals denied by reason for denial and by HCBS waiver;**
- (8) the number of individuals on the Community Options waiver registry as of June 30, 2026; and

(9) an update on activities or efforts to implement the plan to reduce the Community Options waiver registry by 50% submitted to the General Assembly in February 2023.

The report shall be submitted by August 1, 2026, 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.

**Explanation:** Recent efforts to expand HCBS have led to significant increases in CFC program expenditures, including spending under the Community Options waiver. This language restricts funds in the Office of the Deputy Secretary for Health Care Financing pending the submission of a report on CFC program and Community Options waiver spending, registry information, **and EDD activities.**

<b>Information Request</b>	<b>Author</b>	<b>Due Date</b>
Report on CFC program and Community Options waiver spending and registry data	MDH	August 1, 2026

**M00R01**  
**Health Regulatory Commissions**  
**Maryland Department of Health**

**Budget Amendment**

**M00R01.02 Health Services Cost Review Commission**

Add the following language to the special fund appropriation:

provided that \$100,000 of this appropriation made for the purpose of administration may not be expended until the Health Services Cost Review Commission (HSCRC), in consultation with the Maryland Department of Health (MDH), submits a report to the budget committees on efforts to stabilize the Medicare Advantage (MA) market in Maryland under the Achieving Healthcare Efficiency through Accountable Design (AHEAD) model. The report shall include:

- (1) confirmation that financial incentives for MA plans in Maryland have taken effect as of January 1, 2027;
- (2) details on how differential hospital rates and any other financial incentives for MA plans have been implemented;
- (3) date and status of federal approval from the Centers for Medicare and Medicaid Services for ongoing financial incentives for MA plans in Maryland;
- (4) a list of MA plans eligible for differential hospital rates and financial incentives and the estimated amounts of incentives provided to each plan;
- (5) a discussion of how financial incentives target MA plans operating in underserved communities, particularly in areas in which coverage and availability of MA plans has decreased in recent years;
- (6) the distribution of financial incentives by local jurisdictions; and
- (7) additional efforts and recommendations for HSCRC, MDH, and Maryland hospitals to incentivize and collaborate with MA plans under the AHEAD model and to encourage MA plans to continue operating in Maryland.

The report shall be submitted by January 15, 2027, 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. Funds will not be released if the report does not provide confirmation that financial incentives for MA plans have been implemented as of January 1, 2027.

**Explanation:** HSCRC, MDH, and the multi-agency regulatory working group for AHEAD model implementation have proposed financial incentives through differential hospital rates beginning in calendar 2027 for certain MA plans in Maryland to stabilize the market under the AHEAD model. This language restricts funds pending a report on financial incentives for MA plans, including details on implementation, the status of federal approval, information on how the financial incentives target MA plans operating in underserved communities, distribution of incentives across MA plans and by local jurisdiction, and additional efforts or recommendations to incentivize MA plans to continue operating in Maryland.

<b>Information Request</b>	<b>Author</b>	<b>Due Date</b>
Report on incentives for MA plans under the AHEAD model	HSCRC MDH	January 15, 2027

**N00B**  
**Social Services Administration**  
**Department of Human Services**

Add the following section:

**Section XX Pediatric Hospital Overstay**

SECTION XX. AND BE IT FURTHER ENACTED, That \$100,000 of the general fund appropriation of the Department of Human Services (DHS) Social Services Administration and \$100,000 of the general fund appropriation for the Maryland Department of Health (MDH) Behavioral Health Administration may not be expended until DHS and MDH submit a joint report confirming that the departments have established a pediatric hospital overstay coordinator within each department, as required by § 19-390 of the Health Article. The report shall confirm that the coordinators performed duties required by the article, including maintenance of data associated with pediatric hospital overstay. The report shall include the data collected for each month of the period July 2025 through October 2026. The report shall be submitted by December 1, 2026, 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.

**Explanation:** The General Assembly is interested in monitoring the status of pediatric overstays in hospitals. This language withholds funds in DHS and MDH pending the submission of a joint report confirming that the departments have performed activities as required by § 19-390 of the Health Article. Among other requirements, the Article requires the pediatric hospital overstay coordinators to review policies and procedures and make recommendations for necessary changes to better serve pediatric hospital overstay patients and maintain data on pediatric hospital overstay, including length of stay, information on the responsible State agency, placement options sought by the patient, and information regarding previous hospital admissions for behavioral health diagnosis.

<b>Information Request</b>	<b>Author</b>	<b>Due Date</b>
Report on pediatric hospital overstay	DHS MDH	December 1, 2026

**N001**  
**Family Investment Administration**  
**Department of Human Services**

**Budget Amendment**

**N00100.04 Director's Office**

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 Department of Human Services (DHS) submits a report providing information including details on prior and current penalties related to the Supplemental Nutrition Assistance Program (SNAP) payment error rates and strategies undertaken by DHS to reduce the SNAP payment error rates. The report shall include:

- (1) the outcome of the appeal for the federal fiscal 2023 and 2024 penalties or, if still in process, the status of the appeal;
- (2) if a penalty was issued to Maryland based on the federal fiscal 2025 rate and amount if applicable; and
- (3) a detailed plan outlining strategies that the department is undertaking or plans to undertake to reduce the payment error rate below 10%, including a timeline for beginning and each key milestone for these strategies.

The report shall be submitted by September 1, 2026, 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:** Maryland's SNAP payment error rate has exceeded 10% in each federal fiscal 2022 through 2024. Beginning with federal fiscal 2028, States with payment error rates exceeding 6% will be required to pay a share of SNAP costs. At Maryland's most recent error rate, the State could qualify for a delay in this cost share, but if required to pay, it will likely be at the maximum level of 15%. In addition, Maryland was assessed penalties for the payment error rate by the U.S. Department of Agriculture for federal fiscal 2023 and 2024. These penalties were under appeal in fiscal 2026. This action restricts funds pending submission of a report on strategies to reduce the payment error rate for SNAP, including the timeline for each action, and the status of current appeals or penalties related to the error rate.

<b>Information Request</b>	<b>Author</b>	<b>Due Date</b>
SNAP payment error rate reduction strategies	DHS	September 1, 2026