

## TESTIMONY BEFORE THE HOUSE JUDICIARY COMMITTEE

March 5, 2020

House Bill 1527: Adult Protective Services - Vulnerable Adults Registry - Investigations and Records of Abuse and Neglect and Workgroup Study Written Testimony Only

**POSITION: OPPOSE** 

On behalf of the members of the Health Facilities Association of Maryland (HFAM), we appreciate the opportunity to express our opposition for House Bill 1527. HFAM represents over 170 skilled nursing centers and assisted living communities in Maryland, as well as nearly 80 associate businesses that offer products and services to healthcare providers. Our members provide the majority of post-acute and long-term care to Marylanders in need, including more than four million Medicaid days of care and one million Medicare days of care annually.

We appreciate the intent of House Bill 1527, but its proposed care, consumer protection and reporting aims are highly duplicative of existing state and federal law. HB 1527 requires the Maryland Social Services Administration (SSA) to establish and maintain a centralized confidential database related to reports, investigations, and assessments of suspected abuse or neglect of vulnerable adults. The bill also establishes a Workgroup to study best practices for a Vulnerable Adult Registry in Maryland.

While we agree that it is a top priority to protect vulnerable adults from neglect and abuse, this legislation would establish entirely duplicate abuse and neglect reporting, due process and related structure in addition to what is already imposed under both state and federal laws by the Maryland Department of Health (MDH) and the Centers for Medicare and Medicaid Services (CMS).

HB 1527 raises concerns relative to how this regulatory process overlaps with the extensive abuse and neglect identification, reporting and enforcement applicable to nursing homes and assisted living communities under existing federal and state law. Nursing homes must adhere to those requirements.

This legislation refers to a "licensed adult care facility" but this term is not defined. In the long-term and post-acute care setting, current regulations require that documented abuse of any kind be cited appropriately as a violation; rightfully so.

Because the proposed care, consumer protection and reporting aim of House Bill 1527 are highly duplicative of existing state and federal law, should the bill be favorably reported, we ask skilled nursing and rehabilitation centers be exempt from this legislation.

Regarding the Workgroup that this legislation proposes, it is problematic that no industry representatives are appointed as members. We also question why this Workgroup, which is meant to focus on a new oversight program by DHR, would be tasked to review how MDH's Office of Health Care Quality (OHCQ) is handling its account using CMP proceeds.

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Lastly, this legislation's effective date is problematic as it would cause the bill to go into effect based on when a report is or is not issued. If there is to be a Workgroup, then the legislation is premature given the substantial duplication, cost and relative problems it could cause.

For these reasons, we oppose House Bill 1527 and request an unfavorable report from the Committee.

Submitted by:

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