



*Keeping You Connected...Expanding Your Potential...  
In Senior Care and Services*

TO: The Honorable Shane E. Pendergrass, Chair  
Members, House Health and Government Operations Committee  
The Honorable Ariana Kelly

FROM: Danna L. Kauffman  
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DATE: February 3, 2021

RE: **SUPPORT** – House Bill 599 – *Public Health – Long Term Care Planning*

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On behalf of the LifeSpan Network, the largest and most diverse senior care provider association in Maryland representing nursing facilities, assisted living providers, continuing care retirement communities, medical adult day care centers, senior housing communities and other home and community-based services, we support House Bill 599. House Bill 599 requires the Maryland Department of Health to develop and publish materials to assist Maryland residents with long-term care family planning based on recommendation 4 in the report of the Maryland Governor’s Task Force on Long–Term Care Planning.

As the Governor’s report indicated, long-term care services are expensive. Medicaid and Medicare only pay for limited services under strict eligibility rules. For Medicaid, individuals must often “spend down” assets to qualify, requiring them to pay out-of-pocket until that time. While there is a myriad of information available on the internet, it is often incomplete and confusing at best, highlighting individual sectors of care and finance options rather than an overview planning perspective. Given the increasing senior demographic in Maryland, we support House Bill 599 to streamline and consolidate information.

While outside the scope of this bill but one that is important to note is the lack of long-term care services covered under traditional Medicare, Medicare supplemental plans or Medicare Advantage plans. For the most part, traditional Medicare only covers nursing home care (for a limited period), home health and hospice services. It does not cover other home-and-community based services which provide a less-costly alternative to nursing home care. This is ironic given the emphasis by the federal government (Olmstead) for alternatives to institutional settings. At some point, this should be examined and reconciled with the goals of “aging-in-place.”