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Health and Government
Operations Committee

Subcommittees

Government Operations
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Response to Fiscal Note: HB1020

The Honorable Shane Pendergrass, Chair
Health and Government Operations Committee
Maryland House of Delegates
6 Bladen Street, Room 241
Annapolis, MD 21401

Chair Pendergrass, Vice-Chair Pena-Melnyk, and Esteemed Members of the Health and Government Operations Committee:

The MDH OLS fiscal note contains assumptions and does not reflect the amendments already made to The Self-Direction Act of 2022. These are:

Personnel Costs

DDA must complete the renewal and have CMS approval for the Community Pathways waiver by July 1, 2023. This bill only moves that deadline up by six months. If DDA does indeed need to contract with additional staff to make the few changes required by this bill, that same staff would also work on other aspects of the waiver renewal. The actual cost of implementing these changes into a new waiver is far less than the MDH OLS estimate.

Required Training

DDA already conducts regular, required training for both Coordinators of Community Services and Support Brokers. SDAN already meets regularly with DDA and supplies it with detailed recommendations for all aspects of self-direction at no cost. Specific recommendations regarding training for Coordinators of Community Service and Support Brokers could be seamlessly implemented into existing training at little to no additional cost to the State.

Individual and Family Directed Goods and Services

This entry by MDH OLS contains two errors. First, to our knowledge, the current cap on Individual and Family Directed Goods and Services (IFDGS) is \$5,000, not \$7,500. Second, the term “therapies” does not appear in the current bill. It was eliminated during the amendment process. Therefore, DDA would not be required to fund any therapies for all Community Pathways participants in provider-managed services. Furthermore, removing the cap from the IFDGS category would not require the state to allocate any additional funding for people who self-direct and who want IFDGS to fund “activities.” As is now the case, participants can only access the IFDGS category by using their “savings,” redirecting funds already allocated for them in the approved Person-Centered Plans and budgets. The \$81 million price tag for this change is imaginary.

Support Broker (SB) Services

The MDH DLS estimate of \$31.2 million is based on the false assumption that 50% of participants will use the maximum allowance of 40 hours per month. Note that participants must justify their need for every service they request in the Person-Centered Plans. To gain approval for 40 hours of SB services, participants would have to demonstrate a special need for 40 hours of Support Broker services, which DDA reviewers must then approve. Examples of individuals who might require maximum SB support are those who don't have a strong family network or those from disadvantaged communities. A closer estimate of those who would use the maximum allowance is 5% of 2,000 people--an additional cost of \$3.2 million. SDAN recommends that participants who require additional SB supports draw them from their existing funding so that there is NO extra cost to the State.

Vehicle Use Reimbursement

The MDH DLS estimate of \$5.8 million is based on a false assumption. The actual additional cost to the State for this aspect of the bill is **ZERO**. MDH assumes that everyone in self-direction uses a specialized van adapted for wheelchair use. Over 90% of individuals do not require a special van and travel in their employees' personal vehicles. And those employees are already reimbursed for mileage from the participant's currently allotted budget. This stipulation merely allows participants to use existing funding to reimburse family members who are NOT employees for mileage costs associated with the specialized vans they provide for their loved ones-- so that their employees can drive them to and from community activities.

Thank you,



Delegate Karen Lewis Young