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Operations Committee

*Subcommittees*

Chair, Insurance and Pharmaceuticals

Health Occupations and Long Term Care

THE MARYLAND HOUSE OF DELEGATES

ANNAPOLIS, MARYLAND 21401

Rules and Executive  
Nominations Committee

## Testimony in Support of House Bill 429 Health Facilities – Delegation of Inspection Authority – Nursing Homes

Thank you for the opportunity to present **HB 429: Health Facilities – Delegation of Inspection Authority – Nursing Homes**. This bill addresses the lack of inspections of nursing home facilities needed to keep the residents safe and comfortable by allowing local governments to conduct those inspections. It was introduced last year and withdrawn in favor of meeting with representatives of the Maryland Department of Health (MDH) to resolve the issues.

Senator Kramer and I met several times with MDH, and the result was an agreement to engage in a Memorandum of Understanding (MOU) delegating authority to Montgomery County to do the annual surveys at full cost. They did not agree to a cost-sharing arrangement that was the case in the original MOU, which was in place between 2005 and 2020. The reason for this bill today is that we believe that the State should at least share equally in the cost. Not only has MDH not agreed to that cost-sharing, but they have stated that additional staff will be needed at the State level. The County has requested renewal of the original MOU since 2021 and has been denied.

Annual inspection of nursing home facilities is essential to the well-being and safety of their residents. Historically there have been issues of staffing ratios, the skills of workers, and the adequacy of facilities. The regular inspections help to identify those issues in each facility and help to create a plan to resolve them.

In Maryland, the Office of Health Care Quality (OHCQ), under the Maryland Department of Health (MDH), is charged with monitoring the quality of care in nursing homes, as well as other health care facilities and community-based programs on behalf of the Centers for Medicare and Medicaid Services (CMS). In addition to the surveys and inspections, OHCQ is responsible for nursing home licensing, inspections, and certification of compliance.

However, OHCQ is rarely staffed at the levels needed to fulfil its mission to oversee over 21,000 facilities in forty-seven different industries. New positions were added in 2024 to address the significant backlog of nursing home surveys, but it is my understanding that it will take two years to train and certify those surveyors. To support these efforts, 20 years ago, Montgomery County signed an MOU with the state to allow the County to hire inspectors and surveyors to oversee the care in its thirty-four nursing homes. The county had a team of surveyors to conduct certifications, surveys and to follow up on complaints. The team included nurses and nurse administrators that were employed by the County Department of Health and Human Services. The state supported the cost of these positions. As a result, each facility was inspected annually, and their findings were reported to the state. Violations were addressed by state and federal regulators.

During the period of the MOU, all thirty-four of the County's nursing homes were surveyed annually and there was 100% compliance for focused inspection surveys. In 2020, there were six immediate complaints and there was 83% compliance with respect to timelines. Compliance rates were down in during the public health emergency, but that was due to the restriction of in-person visits.

In comparison, in 2022, one nursing home in Montgomery County was surveyed by the State; in 2023, there were zero. According to data from CMS, 90% of the County's nursing homes have not received an annual inspection in the last 15 months. In fact, according to that data, in most counties in our state, less than 50% have had the required annual surveys completed and in Caroline and Talbot counties, there is zero compliance for those surveys.

The fiscal note clearly lays out the State requirements for CMS compliance, including annual inspections and timelines for investigations. Currently, Maryland is second from last for compliance, up one level this year because Alabama failed worse.

In the **State Fiscal Effect** section, the note says that the cost to the state would be indeterminate because of the need to hire additional staff to oversee the counties that chose to share the cost of inspections. This seems unlikely since it was done before, successfully, without additional staff and it would significantly decrease the demand on current staff. In that section there is also a statement that there would be a cost to OHCQ to share the cost of the surveys. We have received information that OHCQ receives a little over \$3 million to complete annual surveys. This program is budgeted according to the number of staff. Therefore, the state could include the Montgomery County staff members, who are meeting the requirements of the State, in its budget requests, while only paying 50% of the cost.

Regarding **Local Fiscal Effect**, which would be completely determined by the county that chooses to request this authority and the cost-sharing outlined in the bill. The Montgomery County government, who asked for this bill, has agreed to the cost-sharing policy.

This agreement would be a win-win-win for residents, local governments who request this authority and the State, who should be able to spend the funds saved in the cost-sharing agreement on surveys in counties that do not have the resources do participate in this agreement. The backlog of surveys could be addressed more quickly.

Thank you for your consideration, and I humbly request a favorable report.