



Wes Moore, Governor · Aruna Miller, Lt. Governor · Ryan Moran, DrPH, MHSA, Acting Secretary

March 27, 2025

The Honorable Joseline Peña-Melnyk
Chair, Health and Government Operations Committee
240 Taylor House Office Building
Annapolis, MD 21401-1991

RE: Senate Bill 376 – Health Facilities – Delegation of Inspection Authority – Nursing Homes – Letter of Support with Amendments

Dear Chair Peña-Melnyk and Committee Members:

The Maryland Department of Health (Department) respectfully submits this letter of support with amendments for Senate Bill 376 – Health Facilities – Delegation of Inspection Authority – Nursing Homes. The Department has been working closely with Vice Chair Cullison and believes that SB 376 could be amended to address both the concerns of the sponsors and allow the Department to continue to improve our nursing home survey work across the State.

In its current posture, SB 376 requires the delegation of nursing home survey authority from the Maryland Department of Health’s Office of Health Care Quality (OHCQ) to a county upon request. OHCQ is a state-level agency responsible for ensuring equal protection and consistent regulatory oversight for all nursing home residents across Maryland. Within 90 days of receiving a request from a county, the bill requires the Secretary to execute a memorandum of understanding (MOU) with the county. Lastly, the bill mandates equal sharing of costs between OHCQ and the county for site visits and full surveys.

The Department has been working closely with Vice Chair Cullison on additional amendments to address administrative and fiscal concerns with the current language. These amendments would create a trigger for delegation of nursing survey authority to a county using county funds if, by July 2026, OHCQ has fallen six months behind federal requirements to conduct nursing home surveys every 15.9 months. The trigger would allow counties to enter into an MOU to use county funds to conduct surveys to augment state resources without survey tier restriction, if approved by the Centers for Medicare and Medicaid Services. Finally, the amendments include two new reporting requirements: annual reporting on any memorandum of understanding with counties related to nursing home surveys and bi-annual reports to local area agencies on aging on the surveys conducted in their county. These amendments would provide accountability without jeopardizing the progress that OHCQ has accomplished.

OHCQ has substantially reduced the backlog of nursing home surveys and complaints statewide. Since the start of FY25, OHCQ has significantly increased its survey completion rate—from 23% of nursing home surveys up to 57%, with continued improvement. This advancement results from targeted process enhancements, strategic use of contractors to address the backlog, and expedited hiring of nurse

surveyors. Thirteen new surveyor positions were added in FY25 and have been filled. New hires are currently completing federal certification training, which takes 6 to 12 months. Upon completion, these surveyors will be fully qualified to conduct independent surveys, further accelerating OHCQ's efforts to fully comply with nursing home survey requirements.

The cost sharing requirements under the current version of the bill would compromise OHCQ's survey capacity by forcing OHCQ at the request of a county to transfer funds currently used to support nursing home surveyor staff, resulting in terminations. Moreover, as the federally designated State Survey Agency (SSA), OHCQ would still be responsible for statewide federal survey compliance regardless of a county delegation. If a delegated county is unable to perform surveys per requirements, OHCQ is still responsible for completing those surveys but would have fewer staff. State resources would be redirected to support specific counties; however, nurse surveyors assigned to those counties would be restricted from conducting inspections across county lines—even when facilities are geographically proximate but located in neighboring jurisdictions. This limitation would compromise OHCQ's ability to respond to urgent needs based on resident risk and priority, as is current practice. OHCQ's centralized model enables the deployment of surveyors statewide, allowing inspections to be conducted based on the most critical needs of Maryland's nursing home residents. The bill in its current posture would result in higher overall costs to both OHCQ and any counties granted delegated authority. Specifically, the MDH general fund expenditures would increase by at least \$357,989 per county granted delegation authority. Since oversight and review of survey coordination cannot be delegated, these costs account for the salaries, fringe benefits, and one-time start-up costs necessary to implement and support the delegation framework.

The Department continues to be ready to work with any county that wants to augment nursing home survey activities utilizing county funds only. Since this approach would augment, but not supplant, OHCQ activities, the administrative burden is significantly lower and could be managed by administrative support provided by the county and in-kind support provided by OHCQ including oversight and training.

For all of the reasons stated above, we respectfully support amendments to SB 376. The Department believes the proposed amendments to the bill would address both the oversight interests of the sponsors, while maintaining OHCQ's survey progress. If you would like to discuss this further, please do not hesitate to contact Sarah Case-Herron, Director of Governmental Affairs, at sarah.case-herron@maryland.gov.

Sincerely,

A handwritten signature in blue ink that reads "Ryan B. Moran". The signature is fluid and cursive, with a horizontal line underneath the name.

Ryan Moran, DrPH, MHSA
Acting Secretary