
**Senate Budget and Taxation Committee
Health and Human Services Subcommittee**

Additional Pages

March 6, 2024

D12A02
Maryland Department of Disabilities

Committee Narrative

Update on Maryland Department of Disabilities (MDOD) Efforts to Fill Vacant Positions:

As of December 1, 2023, MDOD reported 2 positions that had been vacant for less than nine months. The committees request that MDOD submit a report regarding those vacant positions, including:

- the status of 2 positions that had been vacant for less than nine months, indicating if the positions have been filled as of the submission of the report;
- if applicable, candidates’ actual or anticipated start date; and
- recruitment strategies employed.

Information Request	Author	Due Date
Update on MDOD recruitment	MDOD	August 1, 2024

D16A06
Secretary of State

Committee Narrative

Adopt the following narrative:

Status of Vacant Positions: As of December 1, 2023, the Office of the Secretary of State reported 1 position that had been vacant for less than nine months and 1 position that had been vacant for more than one year. The Assistant Secretary of State for Charities and Legal Services is the position that had been vacant for less than nine months and was vacated due to a retirement in June 2023. The office is working to reclassify this senior level director title into 2 lower-level positions. The position that had been vacant for more than one year is a new forensic auditor position approved in a supplemental budget to the fiscal 2024 Budget Bill. The committees are interested in the status of filling the vacant positions and request the Office of the Secretary of State to submit a report providing an update on recruitment and hiring for the positions, including the status of reclassifying the Assistant Secretary of State for Charities and Legal Services position.

Information Request	Author	Due Date
Report on the status of vacant positions	Secretary of State	August 1, 2024

D26A07
Maryland Department of Aging

Committee Narrative

Adopt the following narrative:

Report on Prince George’s County Local Area Agency on Aging (AAA) Operations and Spending: The Maryland Department of Aging (MDOA) received \$3.6 million in federal stimulus funding through the Coronavirus Response and Relief Supplemental Appropriation Act between fiscal 2021 and 2023. MDOA distributed the funding to the 19 local AAAs to support program expenditures, and the funding expired September 30, 2023. Prince George’s County was 1 of 5 AAAs that did not completely expend its appropriation, leaving \$84,056 in federal funds unspent. Prince George’s County cited staffing challenges as the main reason for being unable to fully expend the appropriation. The committees are concerned about the ability of local jurisdictions to direct available funding to administer local services and request that MDOA and the Prince George’s County AAA submit a report on the former’s operations, including:

- an organizational chart of Prince George’s County AAA fiscal and operations units, indicating vacant positions;
- a description of revenue and expenditure process for receiving grants and funding programs;
- a list of fiscal 2023 and 2024 aggregated local, State, and federal revenue, and expenditures by program; and
- a description of barriers and challenges to receiving, processing, and spending funding.

Information Request	Author	Due Date
Report on Prince George’s County AAA operations	MDOA Prince George’s County AAA	August 1, 2024

D50H01
Military Department

Committee Narrative

Freestate ChalleNGe Academy (FCA) Staffing Requirements: FCA is a State-run 22-week residential program for 16- to 18-year-olds who have dropped out of high school or are at risk of dropping out. Academic trainings and instructions are the responsibility of the teaching staff and occur predominately in a classroom setting. It is followed by 12-month post-residential intervention phase where students are assisted by at least 1 trained mentor from the community for further development. The committees are interested in understanding the status of FCA’s teaching staff and mentors and its future staffing requirement. The committees request that the Military Department submit a report on FCA’s teaching staff and mentors including its long-term staffing plan highlighting strategies to hire and retain staff. In addition, the report should include information on the status of FCA staff who were reallocated during fiscal 2020 and early fiscal 2021 to support pandemic relief measures.

Information Request	Author	Due Date
Report on FCA staffing status and long-term staffing plan.	Military Department	October 1, 2024

D53T00
Maryland Institute for Emergency Medical Services Systems

Committee Narrative

Adopt the following narrative:

Update on Long-term Vacancies: As of December 31, 2023, the Maryland Institute for Emergency Medical Services Systems (MIEMSS) had 13 vacancies, 4 of which had been vacant for at least one year. At the budget hearing for MIEMSS on March 1, 2024, the agency testified that it had made offers to fill the 4 positions, which had been vacant for one year or more. The committees are concerned about the impact of long-term vacancies on State operations and request that MIEMSS submit an update on its long-term vacancies, including:

- the titles and classifications of the 4 positions that had been vacant for more than one year;
- the date each position became vacant;
- the status of the 4 positions, indicating if the positions have been filled as of the submission of the report; and
- actions taken by MIEMSS to recruit for these vacant positions.

Information Request	Author	Due Date
Update on long-term vacancies	MIEMSS	July 1, 2024

E50C
State Department of Assessments and Taxation

Budget Amendments

E50C00.01 Office of the Director

Add the following language to the general fund appropriation:

, provided that \$500,000 of this appropriation made for the purpose of administration may not be expended until the State Department of Assessments and Taxation (SDAT) submits a report to the budget committees on the property assessment notice mailing error that occurred in December 2023 and on management of contracts moving forward. The report shall include:

- (1) how the mailing error occurred;
- (2) the status of corrective actions taken to send out delayed notices and recover any potential losses in county and State revenue; and
- (3) how SDAT will manage contractor relations and oversight to safeguard against errors in the future.

The report shall be submitted by July 1, 2024, and the budget committees shall have 45 days from the date of the receipt of the report to review and comment. Funds restricted pending the receipt of a report may not be transferred by budget amendment or otherwise to any other purpose and shall revert to the General Fund if the report is not submitted to the budget committees.

Explanation: Property assessment notices are statutorily required to be mailed to property owners in December of each year. The notice provides an updated property value per the most recent assessment, a schedule for phase-in of the newly assessed value over three years, and information on how the property owner may appeal the proposed value within 45 days of the notice. After the scheduled due date of assessment appeals in February 2024, the budget committees became aware of an error in the December 2023 mailing of assessment notices. Over 100,000 property owners did not receive the required notice at the end of December 2023, representing a total difference in property tax revenue of approximately \$151.6 million to counties and \$18.4 million to the State. This language restricts funding for administration until SDAT submits a report on the reasons for and resolution of the property assessment notice mailing error and on management of contracts moving forward.

Information Request**Author****Due Date**

Report on property assessment mailing error
and contract management

SDAT

July 1, 2024

M00A01
Office of the Secretary
Maryland Department of Health

Committee Narrative

Adopt the following narrative:

Overdose Response Efforts: As the opioid crisis evolves and overdoses in Maryland rise, the committees are interested in understanding the range and effectiveness of strategies that the Maryland Department of Health (MDH) is implementing to address the crisis. The committees request that MDH **include in the annual report for the Commission on Behavioral Health Care Treatment and Access** provide a list of departmentwide or interdepartmental initiatives designed to address substance use disorder among Maryland residents. Initiatives should include statewide efforts managed by MDH and be inclusive of preventive, educational, and relevant supportive services and programs. **Specifically, the annual report should include:**

- initiative names and brief descriptions of their function and activities;
- list of deliverables, goals, and outcomes, as applicable of the group or project;
- other agencies or nongovernmental entities involved with the initiative;
- date of establishment and date of termination (if applicable);
- MDH's plan to continue the effort, including anticipated date to end or reevaluate project outcomes; and
- costs associated with each project from inception through the end of fiscal 2024, including unspent allocated funds.

M00A01
Office of the Secretary
Maryland Department of Health

Committee Narrative

Adopt the following narrative:

Implementation of Recommendations from Financial Compliance Audit: In the Statewide Review of Budget Closeout Transactions for Fiscal Year 2022 released in January 2023, the Office of Legislative Audits (OLA) included findings related to a review of 16 Maryland Department of Health (MDH) accounts and identified \$3.5 billion in federal fund revenue that lacked proper supporting documentation. This finding was repeated in OLA’s fiscal 2023 closeout audit, which found that \$2.3 billion in federal fund revenue lacked proper documentation. In an October 2023 fiscal compliance audit for the MDH Office of the Secretary and Other Units, OLA covered MDH’s federal fund accounting policies and procedures and published findings related to MDH’s failure to recover federal revenue, lack of adequate processes to verify receipt of federal fund reimbursement requests, and deficit balance in the Medicaid clearing account (which receives and reallocates federal funds to appropriate expenditure accounts). As of November 2023, MDH had implemented 13 of 28 recommendations published by OLA. The committees are interested in MDH’s progress toward meeting the goal of implementing all recommendations by the close of fiscal 2024 to address the deficiencies in its federal fund accounting procedures. The committees request that MDH submit a report with the following information, as of August 1, 2024:

- the status of implementing each of the 28 recommendations published by OLA;
- a brief description of personnel and budgetary changes associated with implementing each recommendation;
- an indication of which recommendations, if any, were not implemented by June 30, 2024, and the reasons they were not implemented by that date or will not be implemented; and
- if applicable, estimated implementation dates for each recommendation that had not been completed by August 1, 2024.

Information Request	Author	Due Date
Report on implementation of recommendations from financial compliance audit	MDH	September 1, 2024

M00A01
Office of the Secretary
Maryland Department of Health

Committee Narrative

Add the following language to the general fund appropriation:

Further provided that \$500,000 of this appropriation made for the purposes of Executive Direction may not be expended until the Maryland Department of Health (MDH) submits a report to the budget committees on ~~staffing vacancies throughout~~ **recruitment and new positions at MDH**. The report shall ~~address barriers to attracting and maintaining staff and include data as of the close of fiscal 2023 and 2024 on~~ the following:

- (1) ~~a comparison of compensation at MDH and other comparable administrative positions at the federal and local levels;~~
- (2) ~~a comparison of compensation of direct care staff to other private and nonprofit health care settings;~~
- (3) **(1) an evaluation of the impact of fiscal 2023 annual salary review adjustments and any other compensation benefits or incentives offered by MDH; and**
- (4) ~~discussion of recruitment and retention strategies for the MDH workforce;~~
- (5) ~~the potential long-term impacts of the Facilities Master Plan on MDH staffing alignment; and~~
- (6) **(2) a detailed breakout of new positions and contractual conversions departmentwide and by office in fiscal 2025.**

The report shall be submitted by August 15, 2024, and the budget committees shall have 45 days from the date of the receipt of the report to review and comment. Funds restricted pending the receipt of a report may not be transferred by budget amendment or otherwise to any other purposes and shall revert to the General Fund if the report is not submitted to the budget committees.

Explanation: Language in the fiscal 2023 and 2024 Budget Bill restricted funds pending reports on the reasons for vacancies and efforts to recruit and retain MDH employees, ~~and~~ ~~As of January 25, 2024, neither report had been~~ **MDH submitted one of the required reports on February 19, 2024.** Although the vacancy rate as of January 1, 2024, in MDH Administration had decreased more than 3 percentage points compared to the vacancy rate in January 2023, MDH continues to report large numbers of vacancies in its administrative offices and at State facilities. **The General Assembly remains interested in understanding the impact of recent**

compensation adjustments, recruitment strategies, and new fiscal 2025 positions on MDH staffing levels. The committees are concerned about MDH’s ability to continue decreasing its vacancy rate while adding hundreds of new positions across the department in fiscal 2025. This language restricts funds pending a report on ~~barriers to~~ **additional information related to recruitment and new positions** retention throughout MDH, including salary comparisons to other similar positions elsewhere in government or in different private or nonprofit care settings.

Information Request	Author	Due Date
MDH staffing and salary study update	MDH	August 15, 2024

M00B0104
Health Professional Boards and Commissions
Maryland Department of Health

Committee Narrative

Adopt the following narrative:

Maryland Board of Nursing Infrastructure Operations Transfer: Chapters 222 and 223 of 2023 temporarily repeal the Maryland Board of Nursing’s (BON) authority to employ staff, define the duties of its staff, and employ an executive director. Instead, authority of the board’s infrastructure and oversight operations are assigned to the Secretary of Health. The committees request that the Maryland Department of Health (MDH) and BON submit a joint report detailing the implementation of the transfer of BON infrastructure operations to MDH Office of the Secretary, including:

- how general funds within MDH Office of the Secretary and corresponding reimbursable funds within BON were spent in fiscal 2024;
- a list of the board’s activities that were determined to be infrastructure operations and were transferred to MDH Office of the Secretary;
- a breakdown of each agency’s role in infrastructure operations and the positions performing infrastructure and oversight duties; and
- details on BON and MDH Office of the Secretary’s plan to transition infrastructure operations back to BON beginning in fiscal 2026.

Information Request	Author	Due Date
Report on transfer of BON infrastructure operations	MDH BON	August 1, 2024

M00F
Public Health Administration
Maryland Department of Health

Budget Amendment

Add the following language to the general fund appropriation:

, provided that \$250,000 of this appropriation made for the purpose of executive direction may not be expended until the Maryland Department of Health (MDH) and the Department of Budget and Management submit a report to the budget committees on the Core Public Health Services funding formula, **including and how it is distributed** applied across the 24 local health departments (LHD) **and how MDH determines the local match required for each LHD.** The report shall include the following information:

- (1) the amount of LHD funding allocated in the prior fiscal year that should be included in the base amount for the purpose of calculating the formula each year, specifying whether the base amount should include salary adjustments;
- (2) a comparison of the annual formula growth to actual LHD expenditure growth, by jurisdiction, between fiscal 2022 through 2025;
- (3) details regarding the methodology and rationale for determining LHD funding allocation by jurisdiction;
- (4) actual non-State LHD expenditures by jurisdiction allocated to LHD in fiscal 2022 through 2024; ~~and~~
- (5) any recommendations to change the formula-;
- (6) **the local match percentage and amount required for each jurisdiction in each year from fiscal 2021 through 2025;**
- (7) **a description of how the local match percentage was applied in each fiscal year; and**
- (8) **recommendations to adjust the local match calculation to prevent burdensome increases in local funding requirements.**

The report shall be submitted by October 1, 2024, and the budget committees shall have 45 days from the date of the receipt of the report to review and comment. Funds restricted pending the receipt of a report may not be transferred by budget amendment or otherwise to any other

purpose and shall revert to the General Fund if the report is not submitted to the budget committees.

Explanation: Section 2-302 of the Health – General Article mandates formula funding for Core Public Health Services (funding for LHD) with an annual adjustment factor set to inflation and population growth. The formula, as currently written in statute, does not account for ongoing expenditures related to annual general salary increases, salary increments, or health insurance costs. **In addition, increases in the State allocation to LHDs resulted in significant increases in the amount of local match funding required for each LHD in fiscal 2024, and this will likely be the case in fiscal 2025 as well.** This language restricts funding until the ~~Maryland Department of Health~~ (MDH) and the Department of Budget and Management (DBM) submit a report on the funding formula calculation, recent actual LHD expenditures, and recommendations for any changes to the formula.

Information Request	Author	Due Date
Report on LHD funding formula	MDH DBM	October 1, 2024

M00F
Maryland Department of Health
Public Health Administration

Committee Narrative

Add the following language to the general fund appropriation:

Further provided that \$100,000 of this appropriation made for the purpose of executive direction in the Office of the Deputy Secretary for Public Health Services may not be expended until the Maryland Department of Health, in consultation with the Office of the Attorney General, submits a report to the budget committees on improving oversight of the physician dispensing process. The report should include the following:

- (1) a summary of the agencies' roles in overseeing the permit process for physician dispensing of controlled dangerous substances (CDS) and non-CDS;
- (2) a description of permit requirements for physicians to dispense non-CDS, including the rationale behind the permit requirements;
- (3) a description of the steps that would be needed to transfer oversight authority to the Board of Physicians and the resulting impact on the Office of Controlled Substances Administration; and
- (4) anticipated operational and fiscal impacts of changing the dispensing permit for non-CDS from the provider level to facility level.

The report shall be submitted by September 1, 2024, and the budget committees shall have 45 days from the date of the receipt of the report to review and comment. Funds restricted pending the receipt of a report may not be transferred by budget amendment or otherwise to any other purpose and shall revert to the General Fund if the report is not submitted to the budget committees.

Explanation: The committees are concerned that the process by which physicians are permitted to dispense non-CDS is inefficient and can result in unnecessary delays in dispensing non-CDS prescriptions. The committees are interested in opportunities to streamline the permit process by transferring oversight responsibilities from the Maryland Department of Health (MDH) Office of Controlled Substances Administration to the Board of Physicians or by changing parameters of the permit requirement. This language restricts funding for administrative purposes pending a joint report from MDH and the Office of the Attorney General (OAG) on the current dispensing permit process and impact of changes to the process.

Information Request

Authors

Due Date

Report on physician dispensing
permit process

MDH
OAG

September 1, 2024

M00F03
Prevention and Health Promotion Administration
Maryland Department of Health

Budget Amendment

Add the following language to the general fund appropriation:

Further provided that \$100,000 of this appropriation made for the purpose of program direction in the Prevention and Health Promotion Administration may not be expended until the Maryland Department of Health submits a report on the administration of the Maryland Pediatric Cancer Fund. The report shall include:

- (1) the status of regulations to determine allocations from the fund;
- (2) a description of the criteria for determining fund allocations;
- (3) a list of grantees receiving awards;
- (4) a description of the planned uses of each grant award;
- (5) the actual or estimated date that each grant was distributed to the grantee; and
- (6) if no awards have been distributed, a timeline for beginning distribution of grants in fiscal 2025.

The report shall be submitted by November 1, 2024, and the budget committees shall have 45 days from the date of the receipt of the report to review and comment. Funds restricted pending the receipt of the report may not be transferred by budget amendment or otherwise to any other purpose and shall revert to the General Fund if the report is not submitted to the budget committees.

Explanation: Chapters 253 and 254 of 2022 established the Maryland Pediatric Cancer Fund and required the Maryland Department of Health (MDH) to administer the fund to distribute pediatric cancer research grants, which could also support prevention and treatment. This language restricts funding for program direction until MDH submits a report on the administration of the Pediatric Cancer Fund.

Information Request	Author	Due Date
Report on Maryland Pediatric Cancer Fund administration	MDH	November 1, 2024

M00F03
Prevention and Health Promotion Administration
Maryland Department of Health

Budget Amendment

Add the following language to the general fund appropriation:

, provided that \$100,000 of this appropriation made for the purpose of administration in the Prevention and Health Promotion Administration may not be expended until the Maryland Department of Health submits a report on performance measures and evaluation of the Maryland Prenatal and Infant Care Grant Program. The report shall include, for fiscal 2023 through 2025 year to date:

- (1) a list of grantees by local jurisdiction;
- (2) a description of how each grant award was spent or will be spent;
- (3) performance measures and data collected from each grantee; and
- (4) a description of the department’s evaluation activities and performance goals to assess the effectiveness of the Maryland Prenatal and Infant Care Grant Program.

The report shall be submitted by October 1, 2024, and the budget committees shall have 45 days from the date of the receipt of the report to review and comment. Funds restricted pending the receipt of the report may not be transferred by budget amendment or otherwise to any other purpose and shall revert to the General Fund if the report is not submitted to the budget committees.

Explanation: This language restricts funding for administrative purposes until the Maryland Department of Health (MDH) submits a report on performance measures and evaluation of the Maryland Prenatal and Infant Care Grant Program administered by the Prevention and Health Promotion Administration.

Information Request	Author	Due Date
Report on performance monitoring of the Maryland Prenatal and Infant Care Grant Program	MDH	October 1, 2024

M00F03
Prevention and Health Promotion Administration
Maryland Department of Health

Committee Narrative

Adopt the following narrative:

Efforts to Fill Long-term Vacant Positions: As of February 9, 2024, the Maryland Department of Health (MDH) Prevention and Health Promotion Administration (PHPA) reported 39 vacancies, with 4 positions being vacant for more than one year. The committees request that MDH submit a report regarding the 4 long-term vacant positions, including:

- the status of the positions, indicating if the positions have been filled as of the submission of the report;
- if applicable, candidates’ actual or anticipated start dates; and
- recruitment strategies used to fill the positions.

Information Request	Author	Due Date
Report on status of long-term vacant positions in PHPA	MDH	July 1, 2024

M00F03
Prevention and Health Promotion Administration
Maryland Department of Health

Committee Narrative

Adopt the following narrative:

Performance Measures Related to Public Health Effects of Adult-use Cannabis: Chapter 26 of 2022 (Cannabis Reform) established the Cannabis Public Health Fund within the Maryland Department of Health Prevention and Health Promotion Administration (PHPA) and charged PHPA with administering the fund to address the health effects associated with the legalization of adult-use cannabis. Considering this new State investment in cannabis-related public health activities, the committees request that PHPA **submit a report detailing include** goals, objectives, and performance measures and outcomes related to public health effects of adult-use cannabis legalization **that will be incorporated into future annual Managing for Results (MFR) submissions.** Performance measures should include, but not be limited to, the prevalence of cannabis use among Maryland adults and youth shown separately. **The report should include actual fiscal 2024 data for each planned performance measure related to the public health effects of adult-use cannabis legalization and a timeline for inclusion of the selected performance measures in MFR submissions.**

Information Request	Author	Due Date
Performance goals and measures related to public health effects of adult-use cannabis legalization	MDH	With the submission of the fiscal 2026 allowance and annually thereafter November 1, 2024

M00F03
Prevention and Health Promotion Administration
Maryland Department of Health

Committee Narrative

Adopt the following narrative:

VIP Kids Program Administration: Beginning in fiscal 2024, the Maryland Department of Health (MDH) transitioned administration of the VIP Kids program under the Prevention and Health Promotion Administration from the Coordinating Center to a grant program for local health departments (LHD) to apply for funding to offer services under the program. The committees are concerned that this transition has potentially led to children formerly served by the program losing access. The committees request that MDH submit a report on the transition of the program from the Coordinating Center to LHDs, including:

- actual fiscal 2023 and 2024 expenditures on the VIP Kids program by fund type;
- the locations of program sites and program coverage areas by local jurisdiction before and after the transition;
- the number of children served by the VIP Kids program by jurisdiction before and after the transition;
- a description of MDH’s efforts to connect program participants served by the Coordinating Center with programs administered by LHDs;
- a list of LHDs that applied for grants and a list of LHDs that received grants through the program in fiscal 2024 and 2025;
- the reasons that LHDs chose not to apply for grants under the program; and
- a description of any efforts taken by MDH to encourage LHDs to apply for grants, inform LHDs of the availability of grants, and to provide technical assistance.

Information Request	Author	Due Date
Report on VIP Kids program administration	MDH	October 1, 2024

M00L
Behavioral Health Administration

Committee Narrative

Add the following language to the general fund appropriation:

, provided that ~~\$125,000~~ ~~\$500,000~~ of this appropriation made for the purpose of administration may not be expended until the Maryland Department of Health (MDH) submits ~~a two~~ reports to the budget committees on the recoupment and forgiveness of overpayments to providers, **and the transition to a new Administrative Services Organization (ASO)**. The **first** report shall include:

- (1) the status of completion of recoupment as of July 1, 2024, and if not yet completed, the report should include estimated date of completion;
- (2) the ending balance as of July 1, 2024, if process not yet completed;
- (3) the final amount recouped and forgiven at time of completion; ~~and~~
- (4) a brief explanation of the rationale behind forgiving providers, if provided;
- (5) a summary of the transition plan for the new ASO, including a timeline of key milestones in the transition process; and**
- (6) concerns or risks anticipated with this transition, and how MDH plans to address these concerns.**

The second report shall include:

- (1) a summary of the transition plan for the new ASO, including a timeline of key milestones in the transition process; and**
- (2) concerns or risks anticipated with this transition, and how MDH plans to address these concerns.**

The **first** report shall be submitted by August 1, 2024, **and the second report shall be submitted by December 1, 2024.** ~~and~~ ~~†~~The budget committees shall have 45 days from the date of the receipt of the **second** report to review and comment. Funds restricted pending the receipt of a report may not be transferred by budget amendment or otherwise to any other purpose and shall revert to the General Fund if the report is not submitted to the budget committees.

Explanation: Untimely and inaccurate provider payments issued by the ~~Administrative Services Organization~~ ASO led to the Maryland Department of Health (MDH) issuing provider reimbursements based on prior year estimates, resulting in the overpayment of some providers. Since fiscal 2021, MDH has been recouping and forgiving overpayments to reduce the balance owed to the State. As of January 2023, the balance was \$112 million, and MDH reported that it planned to complete the recoupment and forgiveness process by December 31, 2023. Language in the fiscal 2024 Budget Bill restricted funds pending a report providing an update on the status of recoupment. The report has not yet been submitted, and MDH has indicated recoupment will continue through the end of fiscal 2024. **In addition, because the transition to the current ASO vendor resulted in significant complications with provider reimbursements, the committees are concerned about the transition to the new ASO.** This language restricts funds until MDH submits a report by August 1, 2024, that provides an update on the overpayments and progress toward completing recoupment, **as well as information on the transition plan and a second report providing an updating on the transition plan.**

Information Request	Author	Due Date
Report on provider overpayment recoupment, and forgiveness, and ASO transition	Behavioral Health Administration	August 1, 2024 December 1, 2024

M00L
Behavioral Health Administration

Committee Narrative

Adopt the following narrative:

Update on Long-term Vacancies: As of December 31, 2023, the Maryland Department of Health Behavioral Health Administration (BHA) had 9 vacancies, which had been vacant for at least one year. The committees are concerned about the impact of long-term vacancies on State operations and request that BHA submit an update on its long-term vacancies, including:

- the titles and classifications of the 9 positions that had been vacant for more than one year;
- the date each position became vacant;
- the status of the 9 positions, indicating if the positions have been filled as of the submission of the report; and
- actions taken by BHA to recruit for these vacant positions.

Information Request	Author	Due Date
Update on long-term vacancies	BHA	July 1, 2024

M00Q01
Medical Care Programs Administration
Maryland Department of Health

Committee Narrative

Adopt the following narrative:

Recruitment and Retention of Anesthesiologists in Maryland: The committees request that the Maryland Department of Health (MDH), Maryland Health Care Commission (MHCC), and Health Services Cost Review Commission (HSCRC) in coordination with the Maryland Society of Anesthesiologists study barriers in the recruitment and retention of anesthesiologists. The study should also include recommendations to eliminate identified barriers. Additionally, the committees request that the agencies submit a joint report that outlines the findings and recommendations resulting from the study. The report should include, but not be limited to, the following information:

- the proportion of anesthesiologists' patient mix in hospital settings and ambulatory surgical facilities across Maryland that are covered by public payers;
- the average commercial payment rate for anesthesiologists nationally and in Maryland;
- the average commercial payment rate for anesthesiologists compared to current Medicare and Medicaid reimbursement rates;
- a comparison of the average commercial payment rates for anesthesiologists and other physicians as a percentage of Medicare reimbursement rates;
- a description of other compensation provided to anesthesiologists that is not included in reimbursement rates, such as stipends;
- the number of anesthesia groups, hospitals, ambulatory surgical facilities, and any other settings where anesthesia is provided that have hired temporary or contractual staffing for anesthesiologists;
- impacts of current commercial, Medicare, and Medicaid reimbursement rates for anesthesiologists on recruitment and retention efforts; and
- impacts of current commercial, Medicare, and Medicaid reimbursement rates for anesthesiologists on hospital and other care settings' access to anesthesia services.

Information Request**Author****Due Date**

Report on recruitment and
retention of anesthesiologists in
Maryland

MDH
MHCC
HSCRC

December 15, 2024

M00Q01
Medical Care Programs Administration
Maryland Department of Health

Committee Narrative

Adopt the following narrative:

Reimbursement for Maternal Fetal Medicine: The committees request that the Maryland Department of Health (MDH), in consultation with the Maryland Health Care Commission (MHCC) and Health Services Cost Review Commission (HSCRC), study reimbursement rates under the Medicaid program for services provided by maternal fetal medicine specialists. In order to assist MDH in completing this study, the committees request that MHCC and HSCRC provide all payer claim data to MDH that is necessary to complete the study. Additionally, the committees request that MDH submit a report that outlines the findings resulting from the study. The report should include the following information:

- the Current Procedural Terminology (CPT) codes billed by physicians identified as maternal fetal medicine specialists under Medicaid;
- the timing of when Medicaid reimbursement rates for each CPT code identified was last adjusted;
- the number of claims and funding amounts that have been billed through Medicaid for the identified CPT codes;
- demographic information for Medicaid participants receiving services billed as the identified CPT codes;
- the volume of claims billed through commercial insurers for the identified CPT codes; and
- a comparison of Medicaid, Medicare, and average commercial reimbursement rates for the identified CPT codes.

Information Request	Author	Due Date
Report on reimbursement of maternal fetal medicine	MDH MHCC HSCRC	December 15, 2024

M00Q01
Medical Care Programs Administration
Maryland Department of Health

Committee Narrative

Adopt the following narrative:

Nursing Home Participation in Medicaid and Reported Revenues: The committees are interested in nursing home participation in the Medicaid program and revenue by geographic area. The committees request that the Maryland Department of Health (MDH) submit a report on nursing homes serving Medicaid participants. The report should provide data for nursing homes participating in Medicaid, including revenue by local jurisdiction and for-profit and not-for-profit status.

Information Request	Author	Due Date
Report on nursing home Medicaid participation and revenue	MDH	December 15, 2024

M00Q01
Medical Care Programs Administration
Maryland Department of Health

Committee Narrative

Adopt the following narrative:

Medicaid Reimbursement of School-based Behavioral Health Services: The committees are interested in the Maryland Department of Health’s (MDH) efforts to expand Medicaid reimbursement of school-based behavioral health services. The committees request that MDH submit a report providing an update on federal approval and implementation of this expansion. The report should outline, if applicable:

- differences in rates for community-based and school-based behavioral health services reimbursed by Medicaid;
- differences in authorization and billing processes for community-based and school-based behavioral health services reimbursed by Medicaid;
- differences in provider credentials and requirements for community-based and school-based behavioral health services reimbursed by Medicaid;
- potential impacts of the expansion on the community behavioral health workforce and recommendations to mitigate any negative effects; and
- potential impacts of the expansion on access to community-based behavioral health services and recommendations to increase access to services.

Information Request	Author	Due Date
Report on Medicaid reimbursement of school-based behavioral health services	MDH	January 15, 2025

M00Q01
Medical Care Programs Administration
Maryland Department of Health

Committee Narrative

Adopt the following narrative:

End the Wait Initiatives to Increase Provider Capacity: Chapter 464 of 2022 (the End the Wait Act) required the Maryland Department of Health (MDH) to develop plans to reduce the waitlists for Medicaid home and community-based services (HCBS) waiver programs by 50% beginning in fiscal 2024. MDH indicated that wait lists and registries for HCBS waiver programs have grown and some authorized slots have not been filled due to the limited capacity of the HCBS provider network. Funding is included in the fiscal 2024 and 2025 budgets for end the wait initiatives, and a portion of the funds are specifically allocated to improve HCBS provider capacity. The committees request that MDH submit a report on end the wait initiatives, including:

- the efforts taken in fiscal 2024 and 2025 year to date to implement the HCBS waiver reduction plans;
- an analysis of the extent of Medicaid HCBS provider capacity shortages, detailing the Medicaid HCBS waiver programs and local jurisdictions with the lowest supply of available slots and providers; and
- actual uses of funding in fiscal 2024 and planned uses of funding in fiscal 2025 to improve HCBS provider capacity; and
- any other efforts by MDH to improve HCBS provider capacity.

Information Request	Author	Due Date
Report on end the wait initiatives related to provider capacity	MDH	October 1, 2024

M00Q01
Medical Care Programs Administration
Maryland Department of Health

Committee Narrative

Adopt the following narrative:

Proposed Federal Rule on Medicaid Long-term Care Data Reporting: In spring 2023, the federal Centers for Medicare and Medicaid Services published a proposed rule referred to as Ensuring Access to Medicaid Services, which would create new home- and community-based services (HCBS) data reporting requirements among other changes. The committees request that the Maryland Department of Health (MDH) submit a report detailing the provisions in the final rule and plans to operationalize the rule in Maryland. In addition, the report should include the process that MDH will take to collect and report the following information from long-term care providers generally (nursing home and HCBS providers):

- revenues allocated to salaries and wages of all direct care workforce nonadministrative staff, including registered nurses (RN), licensed practical nurses (LPN), certified nurse aides, noncertified or resident care aides, directors of nurses, and in-house clerical staff who regularly interact with residents, program participants, and caregivers; and
- revenues allocated to contracted nursing care services.

The report should also include a review of the average hourly wage rate for private duty nursing services, including RNs and LPNs, in nearby states and the labor market overall. Finally, the report should discuss licensure requirements for residential service agencies to provide RN oversight, outlining the scope of work, associated costs, and coverage of these costs in provider reimbursement rates.

Information Request	Author	Due Date
Report on federal rule on long-term care data reporting	MDH	Within 180 days of the release of the final federal rule

M00R01
Health Regulatory Commissions
Maryland Department of Health

Committee Narrative

Adopt the following narrative:

Private Payer Coverage of Ambulatory Surgical Facilities: The committees are interested in understanding individuals’ access to services provided at ambulatory surgical facilities paid for by private payers. The committees request that the Maryland Health Care Commission (MHCC) conduct a comprehensive study on the policies and procedures for including ambulatory surgical facilities in private payer plans. Additionally, the committees request that MHCC submit a report with findings and recommendations resulting from the study. The report should include:

- a detailed analysis of the cost differential between procedures performed in hospitals and procedures performed in freestanding facilities; and
- an assessment of the impact of integrating ambulatory surgical facilities with Total Cost of Care model agreements.

Information Request	Author	Due Date
Report on private payer coverage of ambulatory surgery centers	MHCC	September 1, 2024

M00R01
Health Regulatory Commissions
Maryland Department of Health

Committee Narrative

Adopt the following narrative:

Evaluation of the Maryland Primary Care Program (MDPCP) and Update on Outcome Based Credits: The Maryland Department of Health (MDH) and Health Services Cost Review Commission (HSCRC) have indicated that an independent evaluation is being conducted for the MDPCP. Given the role of the MDPCP in transforming care in the State under the Total Cost of Care (TCOC) model, the committees request that ~~the Health Services Cost Review Commission (HSCRC)~~, in consultation with the MDPCP Project Management Office within ~~the Maryland Department of Health (MDH)~~ provide **the independent evaluation of the MDPCP to the committees. The independent evaluation should include** information on the effectiveness of the program. In particular, this evaluation should ~~focus on~~ **outline** cost savings from the MDPCP reducing unnecessary utilization or hospitalization for patients participating in the MDPCP over the increased expenditures from provider incentives. Further, given the anticipated benefits that the outcome-based credits have on total cost of care metrics, the committees request information on the amount that outcome-based credits have discounted costs and MDPCP’s contribution to the achievement and maximization of the current and future outcome-based credits and other population health goals. **If the independent evaluation does not include this specified information, then HSCRC and MDH should provide supplemental materials to the committees with the requested information. In addition to the independent evaluation,** HSCRC should also provide an update on the timing of federal approval for the two remaining outcome-based credits and results for the outcome-based credit related to diabetes prevention.

Information Request	Author	Due Date
Evaluation of the MDPCP and status of outcome-based credits	HSCRC MDH	October 1, 2024

N00A01
Administration
Department of Human Services

Committee Narrative

Adopt the following narrative:

Report on Department of Human Services (DHS) Administration Efforts to Fill Vacant Positions: As of December 31, 2023, DHS Administration had 66 vacant positions, 13 of which had been unfilled for more than one year. Given recent departmentwide efforts to bolster employee recruitment, the committees are interested in monitoring vacancies within the DHS Administration. The committees request that DHS submit a report that should include:

- status of 13 positions that have been vacant for more than one year;
- planned or enacted changes to vacant positions, including reclassifications and position terminations; and
- active recruitment efforts to fill vacant positions;

Information Request	Author	Due Date
Report on DHS Administration to fill vacant positions	DHS	August 1, 2024

N00G
Department of Human Services
Local Department Operations

Adopt the following narrative:

Summer Food Benefits for Children: In November 2023, the Department of Human Services (DHS) submitted a Notice of Intent to participate in the new permanent nationwide Summer Electronic Benefit Transfer (EBT) program. This program will provide a benefit of \$40 per month per child for the three months in which children are out of school for those who qualify for free and reduced-price meals or meet certain other eligibility criteria. The committees are interested in monitoring the operation of the program. The committees request that DHS submit a report that:

- discusses actions taken by DHS to implement the new Summer EBT program;
- provides detail on administrative costs of the program;
- discusses efforts to work with local education agencies to implement the program;
- describes barriers or challenges faced in the implementation of the Summer EBT program;
- *describes the timing for benefits to be distributed to families, including information regarding whether it will be distributed monthly, more than once per month, or in one lump sum; and*
- provides information on the number of children receiving benefits by jurisdiction and month in the Summer EBT program as well as the dollar amount of benefits provided by jurisdiction and month.

The report should also detail information regarding federal requirements for benefit distribution timelines including frequency and required dates of distributions, any flexibilities that the State has in terms of determining the dates and frequency of distribution, and any other information related to the department's final determination of the dates and frequency of benefit distribution.

Information Request	Author	Due Date
Summer EBT program implementation and participation	DHS	October 1, 2024

N00H00
Child Support Administration
Department of Human Services

Committee Narrative

Adopt the following narrative:

Report on Department of Human Services (DHS) Child Support Administration (CSA) Efforts to Fill Vacant Positions: As of December 31, 2023, DHS CSA had 51.5 vacant positions, 6 of which had been unfilled for more than one year. Given recent departmentwide efforts to bolster employee recruitment, the committees are interested in monitoring vacancies within DHS CSA. The committees request that DHS submit a report that should include:

- The status of 6 positions that have been vacant for more than one year;
- planned or enacted changes to vacant positions, including reclassifications and position terminations; and
- active recruitment efforts to fill vacant positions.

Information Request	Author	Due Date
Report on DHS CSA to fill vacant positions	DHS	August 1, 2024

N00I0006
DHS Office of Home Energy Programs

1. Adopt the following narrative:

Implementation of Changes in Eligibility for Energy Assistance Programs: The committees are interested in receiving updates on the impact of changes in eligibility for energy assistance programs due to Chapter 207 of 2023. The committees request that the Department of Human Services (DHS) submit a report on the status of implementation of categorical eligibility for energy assistance, including an update on the status of the integration of the Office of Home Energy Programs data system within the Eligibility and Enrollment component of the Maryland Total Human Services Integrated Network platform, and the status of ongoing system maintenance to improve customer service. Additionally, the report should include a discussion of the number of additional households with incomes between 175% and 200% of the federal poverty level determined to be newly eligible for energy assistance benefits during the second half of fiscal 2024 and 2025, current through ~~December~~ **November** 1, 2024, as a result of income eligibility changes implemented through Chapter 207, and the adequacy of funding levels for energy assistance in the fiscal 2025 allowance to meet the increased number of recipients of benefits.

Information Request	Author	Due Date
Report on the status of implementation of categorical eligibility	DHS	January 1, 2025

N00I0006
Office of Home Energy Programs
Department of Human Services

Adopt the following narrative:

Customer Service Availability for Energy Assistance Programs: The committees are interested in monitoring customer service provided to applicants for energy assistance benefits related to assistance in completing applications and responding to related inquiries regarding application status. The committees request that the Department of Human Services (DHS) submit a report discussing the availability of customer service assistance provided by telephone separately by the staff of local administering agencies (LAA) and the DHS call center, including:

- whether applicants for energy assistance benefits are to receive assistance over the telephone to complete their application, including what types of assistance may be provided (such as, submitting required information over the telephone and the ability to submit an application and check on application status);
- the availability of LAA staff or DHS Call Center staff to respond to telephone calls from applicants, including the hours of operation that calls are received;
- the number of telephone calls received by each LAA in fiscal 2024 and the primary reasons for calls;
- the average response times for calls received;
- the number and share of calls that go to voicemail;
- the number and share of calls that are abandoned without a response or a voicemail;
- the number of inquiries made by email and average response time for an email; and
- the number of inquiries through in-person visits to local offices and average in person wait times for office visits.

For information provided regarding LAA, the information should be provided separately for each LAA.

Information Request	Author	Due Date
Report on customer service availability for energy assistance programs	DHS	September 1, 2024