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UPDATES FOR THE WEEK ENDING FEBRUARY 28, 2020

Below are updates to the bills being tracked by LifeSpan Network:

Two bills were withdrawn this week --

House Bill 1256: Nursing Home Administrators – License Requirements, opposed by LifeSpan, would have altered the nursing home administrator applicant requirements by saying that an applicant whose experience is through the AIT program only has to have an AIT program that is 320 hours (8 weeks) long of full-time or part-time training within one year **or** can have one year as a hospital administrator. The bill also would have required (not authorized) the BENHA to waive any education requirements for an individual who has been licensed in good standing for one year in another state and would have required the BENHA to waive any examination requirement for someone who has practiced for five years in another state. It is anticipated that this issue will generate further discussion this interim.

House Bill 1291: Health Facilities – Certificate of Need – Exemption for Hospitals Providing Hospice Program Services. This bill would have exempted from the CON process a hospital who wants to provide hospice services. An aggressive grassroots effort by hospices and some health systems contributed to the sponsor withdrawing the bill.

Budget Update:

House Bill 152/Senate Bill 192: The Budget Reconciliation and Financing Act were heard this week along with the Medicaid budgets. The Senate health budget subcommittee will make their decision on Tuesday. So far, the response to increasing the provider rates from 2% to 4% have been positive. Please note that the full committee will need to reject the change in the BRFA before it is clear the path that the General Assembly will take to increase the provider rates.

Bills either heard or acted upon this week included --

Senate Bill 519: Public Health – Behavioral Health Programs and Health Care Facilities – Safety Plan. This bill requires the Department, before approving a license for a health care facility licensed under Title 19 (home health, hospice, nursing facilities, assisted living, medical adult day care) to have a safety plan for the safety of those served by it. It is my understanding that a licensee's emergency/disaster plan will qualify as a safety plan. The purpose of this bill was to ensure behavioral health programs had a safety plan and a community relations plan for the community where it is located; however, for legal reasons, those licensed under Title 19 were also included.

Senate Bill 576: Health Occupations – Nurse Practitioners – Certifications of Competency and Incapacity. Lifespan supported this bill and it was voted by the full Senate (44-0). This bill allows a nurse practitioner to determine an individual’s competency for the appointment of a guardianship of a disabled person or for the delivery of medical care. The hearing in the House is this week on March 3rd.

Senate Bill 863/House Bill 1091: Maryland Medical Assistance Program – Long-Term Care Services and Supports – Personal Needs Allowance. This bill states that when determining the available income of a recipient who is an aged, blind, or disabled person, the Department of Health must establish a personal needs allowance of not less than: (1) \$450 per month; or (2) \$5,400 per year. The bill had a \$45 million fiscal note. LifeSpan opposed due to the concern that it would cause Medicaid recipients in nursing facilities and in other settings to lose eligibility. The sponsors amended the bill to apply only to recipients in medical adult day centers and the sponsors have requested a new fiscal note.

House Bill 712/Senate Bill 260: Labor and Employment - Leave with Pay - Bereavement Leave (Family Bereavement Act). This bill requires employers to allow for bereavement leave as part of their paid leave and includes the death of a pet. The Economic Matters Committee voted the bill favorable but removed the provision regarding the death of a pet. The Senate Committee has not yet acted upon the bill.

House Bill 839/Senate Bill 539: Labor and Employment – Family and Medical Leave Insurance Program – Establishment. Both the House Economic Matters Committee and the Senate Finance Committee heard this bill this week. LifeSpan submitted written testimony in opposition. At this point, because of the recent enactments of minimum wage and paid sick leave, there does not seem to be momentum to pass this bill this Session.

Senate Bill 449: Labor and Employment – Direct Care Workforce Innovation Program. The Senate Finance Committee heard and already voted this bill favorable with amendments. The first amendment was offered by LifeSpan and added geriatric nursing assistants to the list of direct care workers. The second amendment would require applicants to include how they advise employees of their rights as employees. The purpose of the bill is to develop a program to provide matching grants to eligible entities (includes non-profit associations) to create and expand on successful recruitment and retention strategies that address the range of potential barriers to increasing the number of direct care workers. The goal of the program is to ensure the availability of trained direct care workers across the state. Direct care workers include home health aides, certified nursing assistants, personal aide, and psychiatric aide.

House Bill 977/Senate Bill 981: Workgroup to Study Long-Term Care Medicaid Eligibility and Payments to Providers. This bill was heard in the Senate Finance Committee and sets up another workgroup to look at Medicaid eligibility for nursing facilities through the Joint Committee on Children, Youth and Families. LifeSpan questions the need for another workgroup, especially through this Joint Committee (Senate sponsor co-chairs this committee). The House hears this bill this week.

Senate Bill 738/House Bill 1120: Health Care Providers and Health Benefit Plans – Discrimination in Provision of Services. This bill has been heard in both the House and the Senate committees. It states that a hospital or related institution may not refuse, withhold from, or deny to any individual medical services or otherwise discriminate against any individual with respect to the individual’s medical care because of the race, color, religion, sex, age, national

origin, marital status, sexual orientation, gender identity, genetic information, or disability of the individual. Similar provisions are for those regulated under a health occupation board of by a health insurance carrier. LifeSpan requested that similar language for health occupations and health insurance plans (may refuse, withhold, or deny any person services if providing the service would cause the entity not to be able to conform to the usual and regular requirements, standards, and regulations imposed on the entity) be applied to hospitals and related institutions.

Bills to be heard this week --

Hearing 3/2. House Bill 1628: Sales and Use Tax Rate Reduction and Services. LifeSpan will be opposing this bill. This bill is the “answer” to the question “How will the State fund Kirwan (education bill)?”. This bill will impose the sales tax (at 5%) on almost all services. As you will see, certain services are exempted, such as a health care or social assistance service or a service provided by a business, professional, labor, or political association. The classifications are tied to the “NAICS” - North American Industrial Classification System, United States Manual, 2017 Edition, Published by The United States Office of Management and Budget. LifeSpan’s opposition is grounded on member’s concerns regarding the NAIC classification and the impact that having to pay a tax on services will have a detrimentally effect on members, especially those that take Medicaid.

Hearing 3/5. House Bill 1010: Health Care Facilities – Discrimination (LGBTQ Senior Bill of Rights). This bill adds to the Patient Bill of Rights for comprehensive care facilities but specifically the rights of the LGBTQ community. LifeSpan is writing a letter of concern that this issue is better addressed in the above-referenced bill Senate Bill 738/House Bill 1120.

Hearing 3/5 (both committees). Senate Bill 969/House Bill 1063: Health Care Facilities – Assisted Living Programs – Regulations, Staffing and Training. This bill states that, among other provisions, the regulations on ALP must require a nurse to be on-site for every ALP between 7 AM and 7 PM and require (for programs with more than 5 beds) a training program that requires eight hours of initial training before employment and an additional 40 hours within the first 60 days of employment. LifeSpan is opposed to this bill and has sent out an action alert for members to contact their legislators and members of the committees to oppose.

Hearing 3/5 (both committees). House Bill 1168/Senate Bill 897: Maryland Department of Health – Residential Service Agencies – Training Requirements. This bill requires RSA to have six hours of annual and 4 hours of training for Alzheimer’s and dementia for direct care staff for direct care staff and supervisory staff. MNCHA is taking the lead on this bill.

Hearing 3/5 (in the Senate). Senate Bill 938/House Bill 1571: Hospitals – Change in Status – Hospital Employee Retraining and Placement. This bill revises the current hospital retraining program. The bill states that, on July 1 each year, each hospital shall pay directly to the Maryland Department of Labor (MDOL) a fee equal to 0.006% of the total gross patient revenue approved by the HSCRC for the hospital for the immediately preceding year, which will be paid into a special fund. each hospital must submit an annual report to the health services cost review commission and the MDOL on: (1) the number of hospital employees displaced due to layoffs; (2) the categories of hospital employees displaced due to layoffs; and (3) the number of hospital employees to whom hospitals directly provided funding for retraining purposes. The fund will be used by MDOL for the retraining of, and job-seeking assistance for, hospital employees who are nonexecutive employees, who are not licensed physicians or physical assistants, and who are

unemployed or who may become unemployed as a result of the closing, partial closure, delicensing, downsizing, or acquisition of a hospital or the merging of hospitals.

Hearing 3/5. Senate Bill 966: Health Facilities – Assisted Living Programs – Referrals and Licenses. This bill addresses penalties for operating without a license and for referring an individual (willfully and knowingly) to an assisted living program operating without a license. The bill also regulates agencies that refer individuals to assisted living programs.

BILLS FOR DISCUSSION:

House Bill 1282: Criminal Procedure – Vulnerable Adult Abuse Registry. This bill the MDH shall establish and maintain a registry containing the names of individuals who have been found by a state agency to have abused, neglected, or misappropriated or exploited the property of a vulnerable adult or who have been convicted of a vulnerable adult abuse crime. The names and information contained in the registry shall be available for public inspection as provided in this subtitle. The MDH may discharge its responsibilities under this subtitle directly, or through interagency agreement, if authorized access to the records by means of a single centralized agency is assured.

House Bill 1527/Senate Bill 833: Adult Protective Services – Vulnerable Adults Registry – Investigations and Records of Abuse and Neglect and Workgroup Study. This bill also provides the requirements on State agencies for investigations and records of abuse and neglect. It also establishes a workgroup to further study the issue.