

Chapter 437

(Senate Bill 527)

AN ACT concerning

Elderly Individuals – Howard County and Montgomery County Adult Day Health Care Services Pilot Program and Task Force

FOR the purpose of establishing the Howard County and Montgomery County Adult Day Health Care Services Pilot Program in Howard County and Montgomery County to integrate the provision of medical adult day care services, home health care services, and medical services provided under the Maryland Medical Assistance Program; authorizing Howard County and Montgomery County to jointly authorize the operation of one or more integrator entities to coordinate services provided under the pilot program; establishing the Task Force on the Howard County and Montgomery County Adult Day Health Care Services Pilot Program; and generally relating to the Howard County and Montgomery County Adult Day Health Care Services Pilot Program and Task Force.

BY repealing and reenacting, without amendments,
Article – Health – General
Section 14–201
Annotated Code of Maryland
(2019 Replacement Volume and 2021 Supplement)

BY adding to
Article – Health – General
Section 14–2A–01 through 14–2A–03 to be under the new subtitle “Subtitle 2A.
Howard County and Montgomery County Adult Day Health Care Services
Pilot Program and Task Force”
Annotated Code of Maryland
(2019 Replacement Volume and 2021 Supplement)

Preamble

WHEREAS, Demographic changes in the State have increased the need to identify, deliver, and manage health care in cost-effective ways; and

WHEREAS, Medical adult day care is a structured group program that provides health, social, and related support services to functionally disabled adults; and

WHEREAS, Medical adult day care programs are provided to individuals who may also access home health care and medical services programs; and

WHEREAS, The delivery of medical adult day care, home health care, and medical care is fragmented and uncoordinated; and

WHEREAS, A majority of the cost of reimbursing these services is borne by the Maryland Medical Assistance Program, including services provided by managed care organizations; and

WHEREAS, Over the last decade the number of individuals aged 65 and older has grown by 33% in the State, creating an increased demand to meet the unique care needs of this population; and

WHEREAS, In surveys of seniors, 90% of the respondents have indicated a desire to age in their homes (“age in place”); and

WHEREAS, There is an increasing focus on addressing social determinants of health as studies have shown that 80% of an individual’s overall health is tied to nonmedical factors and that social isolation and loneliness impact 43% of seniors; and

WHEREAS, An integrated and flexible hybrid model for medical adult day care, home health care, and medical care would allow for active and ongoing assessment of the health needs of the senior population using these services and maintain engagement by individuals in their own health care needs; and

WHEREAS, Improved continuity of care would enable seniors to stay in their homes and in the community and defer higher levels of care, keeping them out of nursing homes and other acute care settings; now, therefore,

SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, That the Laws of Maryland read as follows:

Article – Health – General

14–201.

(a) In this subtitle the following words have the meanings indicated.

(b) “Day care center for the elderly” means a place that:

(1) Is operated to provide, with or without charge, care for elderly individuals; and

(2) Either is:

(i) Designated for group care for at least 4 elderly individuals; or

(ii) A family home that provides care for 2 or 3 elderly individuals.

(c) “Elderly individual” means an individual who:

- (1) Is 55 years old or older;
- (2) Lives alone or with a spouse, family relative, or friend;
- (3) Needs temporary supervision and care during a part of a day in a protective group setting; and
- (4) Has a disability that is:
 - (i) A reasonably static physical impairment that prevents:
 - 1. Gainful employment; or
 - 2. The accomplishment of the routine of normal daily activities without assistance; or
 - (ii) A permanent or recurrent mental impairment.

**SUBTITLE 2A. HOWARD COUNTY AND MONTGOMERY COUNTY ADULT DAY
HEALTH CARE SERVICES PILOT PROGRAM AND TASK FORCE.**

14-2A-01.

(A) IN THIS SUBTITLE THE FOLLOWING WORDS HAVE THE MEANINGS INDICATED.

(B) “ELDERLY INDIVIDUAL” HAS THE MEANING STATED IN § 14-201 OF THIS TITLE.

(C) “INTEGRATOR” MEANS AN ENTITY THAT:

(1) ORGANIZES A VOLUNTARY ASSOCIATION OF LICENSED MEDICAL ADULT DAY CARE PROVIDERS, HOME HEALTH CARE PROVIDERS, AND OTHER PROVIDERS AND ENTITIES TO COORDINATE TO PROVIDE INTEGRATED SERVICES UNDER THE PILOT PROGRAM; AND

(2) IS LICENSED IN THE STATE TO PROVIDE AT LEAST ONE OF THE SERVICES INCLUDED IN THE PILOT PROGRAM.

(D) “PILOT PROGRAM” MEANS THE HOWARD COUNTY AND MONTGOMERY COUNTY ADULT DAY HEALTH CARE SERVICES PILOT PROGRAM.

(E) “TASK FORCE” MEANS THE TASK FORCE ON THE HOWARD COUNTY AND MONTGOMERY COUNTY ADULT DAY HEALTH CARE SERVICES PILOT PROGRAM.

14-2A-02.

(A) THIS SECTION APPLIES ONLY IN HOWARD COUNTY AND MONTGOMERY COUNTY.

(B) (1) THERE IS A HOWARD COUNTY AND MONTGOMERY COUNTY ADULT DAY HEALTH CARE SERVICES PILOT PROGRAM.

(2) THE PURPOSE OF THE PILOT PROGRAM IS TO INTEGRATE THE PROVISION OF MEDICAL ADULT DAY CARE SERVICES, HOME HEALTH CARE SERVICES, AND MEDICAL SERVICES PROVIDED UNDER THE MARYLAND MEDICAL ASSISTANCE PROGRAM.

(C) PARTICIPATION IN THE PILOT PROGRAM IS LIMITED TO ELDERLY INDIVIDUALS WHO ARE:

**(1) RESIDENTS OF HOWARD COUNTY OR MONTGOMERY COUNTY;
AND**

(2) RECEIVING MEDICAL ADULT DAY CARE SERVICES, HOME HEALTH CARE SERVICES, OR MEDICAL SERVICES PROVIDED UNDER THE MARYLAND MEDICAL ASSISTANCE PROGRAM, INCLUDING MEDICAL SERVICES THAT ARE OFFERED BY A MANAGED CARE ORGANIZATION.

(D) SERVICES PROVIDED UNDER THE PILOT PROGRAM SHALL INCLUDE, WHEN APPLICABLE:

(1) AN EVALUATION AND ASSESSMENT OF EACH PILOT PROGRAM PARTICIPANT BY A LICENSED NURSE TO COMPLETE AN INTERDISCIPLINARY CARE PLAN FOR THE PARTICIPANT;

(2) THE PROVISION OF REMOTE SERVICES TO THE PARTICIPANT, USING AN ELECTRONIC DEVICE WITH VIDEO CONFERENCING CAPABILITY ISSUED TO THE PARTICIPANT TO FACILITATE COMMUNICATION WITH PROVIDERS;

(3) THE CREATION OF A MEDICATION STRATEGY FOR THE PARTICIPANT IN ORDER TO PROVIDE APPROPRIATE EVALUATION AND MONITORING OF THE ADMINISTRATION OF MEDICATIONS;

(4) A PROGRAM OF ACTIVITIES AND SOCIAL ENGAGEMENT TO ASSIST PARTICIPANTS IN REDUCING LONELINESS AND DEPRESSION AND TO DEVELOP A SENSE OF COMMUNITY WITH OTHER PARTICIPANTS;

(5) COORDINATION OF MEDICAL CARE AND OTHER SERVICES ORDERED BY A PHYSICIAN FOR THE PURPOSE OF ALLOWING PARTICIPANTS TO LIVE SAFELY IN THEIR HOME ENVIRONMENT;

(6) THE PROVISION OF BASIC HOUSEKEEPING SERVICES TO ASSIST PARTICIPANTS IN DAILY ACTIVITIES THAT MAY BE CHALLENGING; AND

(7) THE PROVISION OF TRANSPORTATION AND DELIVERY OF MEALS.

(E) (1) HOWARD COUNTY AND MONTGOMERY COUNTY JOINTLY MAY DESIGNATE AND AUTHORIZE THE OPERATION OF ONE OR MORE ENTITIES TO SERVE AS AN INTEGRATOR IN HOWARD COUNTY AND MONTGOMERY COUNTY.

(2) AN INTEGRATOR SHALL BE LICENSED IN THE STATE TO PROVIDE AT LEAST ONE OF THE SERVICES TO BE INCLUDED IN THE PILOT PROGRAM.

(F) IN CONSULTATION WITH HOWARD COUNTY AND MONTGOMERY COUNTY, AN INTEGRATOR SHALL COORDINATE ALL SERVICES PROVIDED UNDER THE PILOT PROGRAM.

14-2A-03.

(A) THERE IS A TASK FORCE ON THE HOWARD COUNTY AND MONTGOMERY COUNTY ADULT DAY HEALTH CARE SERVICES PILOT PROGRAM.

(B) THE TASK FORCE CONSISTS OF THE FOLLOWING MEMBERS:

(1) ONE MEMBER OF THE SENATE OF MARYLAND, APPOINTED BY THE PRESIDENT OF THE SENATE;

(2) ONE MEMBER OF THE HOUSE OF DELEGATES, APPOINTED BY THE SPEAKER OF THE HOUSE;

(3) ONE REPRESENTATIVE OF THE HOWARD COUNTY GOVERNMENT, DESIGNATED BY THE HOWARD COUNTY EXECUTIVE;

(4) ONE REPRESENTATIVE OF THE MONTGOMERY COUNTY GOVERNMENT, DESIGNATED BY THE MONTGOMERY COUNTY EXECUTIVE;

(5) THE SECRETARY OF AGING, OR THE SECRETARY'S DESIGNEE;

(6) THE SECRETARY, OR THE SECRETARY'S DESIGNEE; AND

(7) THE FOLLOWING MEMBERS, APPOINTED BY THE GOVERNOR:

(I) TWO REPRESENTATIVES OF THE MARYLAND ASSOCIATION OF ADULT DAY SERVICES;

(II) ONE REPRESENTATIVE OF THE HOME HEALTH CARE INDUSTRY; ~~AND~~

(III) ONE REPRESENTATIVE OF THE MARYLAND MANAGED CARE ORGANIZATION ASSOCIATION; AND

(IV) ONE REPRESENTATIVE OF THE GREATER MARYLAND AND THE NATIONAL CAPITAL AREA CHAPTERS OF THE ALZHEIMER'S ASSOCIATION.

(C) THE GOVERNOR SHALL DESIGNATE THE CHAIR OF THE TASK FORCE.

(D) HOWARD COUNTY AND MONTGOMERY COUNTY JOINTLY SHALL PROVIDE STAFF FOR THE TASK FORCE.

(E) A MEMBER OF THE TASK FORCE:

(1) MAY NOT RECEIVE COMPENSATION AS A MEMBER OF THE TASK FORCE; BUT

(2) IS ENTITLED TO REIMBURSEMENT FOR EXPENSES UNDER THE STANDARD STATE TRAVEL REGULATIONS, AS PROVIDED IN THE STATE BUDGET.

(F) THE TASK FORCE SHALL:

(1) EXAMINE THE STATUS OF MEDICAL ADULT DAY CARE IN THE STATE, INCLUDING THE PROVISION OF HOME HEALTH CARE AND MEDICAL SERVICES TO ENROLLEES IN MEDICAL ADULT DAY CARE PROGRAMS;

(2) REVIEW AND EVALUATE THE LIST OF REQUIRED SERVICES PROVIDED UNDER § 14-2A-02(D) OF THIS SUBTITLE;

(3) REVIEW AND EVALUATE THE EFFICACY OF PROVIDING SERVICES USING AN INTEGRATOR;

(4) IDENTIFY AND MEASURE ANY ENHANCED CONTINUITY OF CARE, USING THE INTEGRATOR MODEL, THAT WOULD ALLOW ENROLLEES TO REMAIN IN THEIR HOMES AND THE COMMUNITY, DEFER TREATMENT IN HIGHER LEVELS OF CARE SUCH AS NURSING HOMES, AND REDUCE THE INCIDENCE OF TREATMENT IN ACUTE CARE SETTINGS;

(5) IDENTIFY AND MEASURE ANY REDUCTION IN UNNECESSARY UTILIZATION OF EMERGENCY MEDICAL SERVICES BY ENROLLEES; ~~AND~~

(6) IDENTIFY AND COMPARE DIFFERENCES AND SIMILARITIES BETWEEN THE PILOT PROGRAM, USING THE INTEGRATOR MODEL, AND THE FEATURES OF THE PROGRAM FOR ALL-INCLUSIVE CARE OF THE ELDERLY (PACE), INCLUDING DIFFERENCES AND SIMILARITIES IN THE POPULATIONS SERVED;

~~(6)~~ (7) IDENTIFY AND MEASURE OTHER POTENTIAL BENEFITS OF THE INTEGRATOR MODEL, SUCH AS GREATER SOCIAL INTERACTION, ADDITIONAL TRANSPORTATION OPTIONS, AVOIDANCE OF FOOD INSECURITY, AND MONITORING THE ADMINISTRATION OF MEDICATIONS; AND

(8) MAKE RECOMMENDATIONS REGARDING THE IMPLEMENTATION OF THE PILOT PROGRAM ON A STATEWIDE BASIS.

(G) ON OR BEFORE OCTOBER 1 EACH YEAR, THE TASK FORCE SHALL REPORT ITS FINDINGS AND ANY RECOMMENDATIONS TO THE GOVERNOR AND, IN ACCORDANCE WITH § 2-1257 OF THE STATE GOVERNMENT ARTICLE, THE GENERAL ASSEMBLY.

SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect July 1, 2022. It shall remain effective for a period of 3 years and 6 months and, at the end of December 31, 2025, this Act, with no further action required by the General Assembly, shall be abrogated and of no further force and effect.

Approved by the Governor, May 16, 2022.