



Legislative Update 2024 Session

MARCH 21, 2024



Quick Statistics

- ❑ March 18th – Opposite Chamber Bill Crossover Date
- ❑ April 1st – Day 83 Budget bill to be passed by both Chambers
- ❑ April 8th – 90th Day – ADJOURNMENT “SINE DIE”
- ❑ 1,574 bills introduced in the Senate
- ❑ 1,903 bills introduced in the House
- ❑ Staff tracking currently ≈ 215 bills

Major Bills



SB 1054/HB 1051 - Maternal Health – Assessments, Referrals, and Reporting (Maryland Maternal Health Act of 2024)

This bill requires:

- 1) a provider who receives reimbursement from Medicaid for obstetric services to complete a “prenatal risk assessment form” for a patient, as specified;
- 2) the “birthing facility” where an infant is born to complete a postpartum infant and maternal referral form and submit the form to the local health department (LHD); and
- 3) the Secretary of Health in collaboration with MHCC is to develop a Maryland Report Card for Birthing Facility Maternity Care for each birthing facility in the State.

Major Bills



***HB 784 - Task Force on Reducing Emergency Department Wait Times**

This bill requires:

- 1) Establishes the Task Force on Reducing Emergency Department Wait Times.
- 2) By January 1, 2026, the task force must report its findings and recommendations to the Governor and the General Assembly.
- 3) The Maryland Institute for Emergency Medical Services Systems (MIEMSS) must provide staff for the task force.
- 4) A member of the task force may not receive compensation, but it is entitled to reimbursement for expenses.
- 5) The bill takes effect June 1, 2024, and terminates June 30, 2026.

Major Bills



SB 1000/HB 1122 - Maryland Health Care Commission – Nursing Homes – Acquisitions

This bill requires:

- 1) a person, at least 60 days before making a contractual arrangement for the acquisition of a nursing home, to submit a request for “acquisition” to the Maryland Health Care Commission (MHCC) and provide notice to the residents and staff of the nursing home.
- 2) The Executive Director of MHCC must review a completed request for acquisition within 45 days and, in consultation with the Secretary of Health, may
 - (1) approve the acquisition;
 - (2) approve the acquisition with conditions;
 - (3) deny the acquisition; or
 - (4) refer the request for acquisition to MHCC for a final decision.

Major Bills



SB 1000/HB 1122 - Maryland Health Care Commission – Nursing Homes – Acquisitions, con't

This bill requires:

- 4) In determining if the acquisition is in the public interest, the executive director must consult with the Attorney General on whether the acquisition raises public interest concerns
- 5) If the executive director denies a request for acquisition, a person that is a party to the acquisition may submit a written request for the Commission to review the decision in accordance with regulations adopted by MHCC.
- 6) If the executive director refers a request for acquisition to MHCC, the commission must use the criteria specified in the bill or regulations adopted by MHCC to make a final decision.
- 7) A person that is a party to the acquisition may take a direct judicial appeal within 30 days after the Commission makes a final decision

Major Bills



SB 1000/HB 1122 - Maryland Health Care Commission – Nursing Homes – Acquisitions, con't

This bill requires:

- 8) MHCC must send each final decision to the Secretary of Health, the Secretary of Aging, OHCQ, and the Office of the Attorney General (OAG).
- 9) Immediately following the acquisition of a nursing home and every three years thereafter, the person that acquired the nursing home must submit a report to MHCC in accordance with regulations. MHCC must provide the report required to the Secretary of Health, the Secretary of Aging, OHCQ, and OAG.

Major Bills



SB 1000/HB 1122 - Maryland Health Care Commission – Nursing Homes – Acquisitions, con't

This bill requires:

- 10) MHCC must adopt regulations that: require the person that acquired ownership of a nursing home to:
 - (1) reduce the number of resident rooms that contain more than two beds in accordance with standards established by MHCC or
 - (2) receive a waiver from this requirement; establish standards for the evaluation of the quality of the facilities currently or previously owned, whether in the State or outside the State, by the person that submitted a request for acquisition; and
 - (3) establish criteria for the executive director and MHCC to consider when making a decision regarding a request for acquisition. If the executive director refers a request for acquisition to MHCC, the commission must use the criteria specified in the bill or regulations adopted by MHCC to make a final decision.

Major Bills



Trauma Funding

SB 1092 - Vehicle Registration - Emergency Medical System Surcharge - Increase and Distribution of Funds

- 1) This bill increases the annual surcharge on vehicle registration fees that supports emergency medical services (EMS) in the State by \$23.00 (from \$17.00 to \$40.00).
- 2) The bill also increases the portion of that surcharge distributed to the Maryland Trauma Physician Services Fund (MTPSF) by \$5.00 (from \$2.50 to \$7.50).
- 3) Finally, it ensures a constant level of funding for The R Adams Cowley Shock Trauma Center as at least \$9.00 of the \$40.00 surcharge must be annually allocated by the Governor to the center, with the balance paid to the Maryland Emergency Medical System Operations Fund (MEMSOF).
- 4) Provides flexibility to MHCC in disbursing funds from the (MTPSF).

Major Bills



Trauma Funding

SB 362 - Budget Reconciliation and Financing Act of 2024 (BRFA)

**HB 1439 - Public Health - Funding for Trauma Centers and Services – integrated into the BRFA*

This bill :

- 1) alters the purpose, contents, and sources of the funding of the Maryland Trauma Physician Services Fund;
- 2) alters the entities to which money from the Maryland Trauma Physician Services Fund is transferred;
- 3) alters the methodology used to determine eligibility for disbursements from the Maryland Trauma Physician Services Fund;
- 4) The bill also increases the portion of that surcharge distributed to the Maryland Trauma Physician Services Fund (MTPSF) by \$5.00 (from \$2.50 to \$7.50).
- 5) Provides flexibility to MHCC in disbursing funds from the (MTPSF).

Studies



SB 791/HB 932 - Health Insurance - Utilization Review – Revisions

- a) The Maryland Health Care Commission and the Maryland Insurance Administration, in consultation with health care practitioners and payors of health care services, jointly shall conduct a study on the development of standards for the implementation of payor programs to modify prior authorization requirements for prescription drugs, medical care, and other health care services based on health care practitioner–specific criteria.
- b) The Maryland Health Care Commission and the Maryland Insurance Administration jointly shall establish a workgroup to, in consultation with the Maryland Insurance Administration, shall:
 - (1) assess monitor the progress toward implementing the requirements in § 19–108.5 of the Health – General Article, as enacted by Section 1 of this Act, including monitoring any federal or State developments relating to the requirements; and
 - (2) review issues or recommendations from other states that are implementing a real–time benefit requirement, including establishing a link at the point of prescribing for any available coupons.

Studies



Budget and Taxation - 2024 Budget Language Decisions

Study Primary - MHCC

M00R01.01 Maryland Health Care Commission: 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 Report: on private payer coverage of ambulatory surgery centers.

Author: MHCC; Due Date: September 1, 2024

Studies



Budget and Taxation - 2024 Budget Language Decisions

Studies w/ MDH:

Recruitment and Retention of Anesthesiologists in Maryland:

The committees request that the Maryland Department of Health (MDH), the Maryland Health Care Commission (MHCC), and the 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.

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 the 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.

Studies



Budget and Taxation - 2024 Budget Language Decisions

Study with HSCRC

M00R01.02 Health Services Cost Review Commission:

Add the following language to the special fund appropriation: provided that \$125,000 of this appropriation made for the purpose of administration in the Health Services Cost Review Commission (HSCRC) may not be expended until HSCRC, in consultation with the Maryland Health Care Commission (MHCC), submits a report evaluating findings and recommendations from the Commission to Study Trauma Center Funding in Maryland.

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 be canceled if the report is not submitted to the budget committees.

Status of Bills



SB 409/HB 628 - Health Occupations - Clinical Marriage and Family Therapists - Reciprocal Licensure Requirements

SB 705/HB 728 - Health Insurance - Qualified Resident Enrollment Program (Access to Care Act)

SB 204/HB 34 - Interstate Social Work Licensure Compact

SB 359/HB 425 - Advanced Practice Registered Nurse Compact

SB 403/HB 1134 - Hospitals and Related Institutions - Residential Treatment Centers - Accreditation

SB 409/HB 628 - Health Occupations - Clinical Marriage and Family Therapists - Reciprocal Licensure Requirements

SB 784/HB 935 - Comprehensive Community Safety Funding Act

SB 694/HB 887 - Maryland Department of Health – Health Commissions and Maryland Insurance Administration – Study (2/21)

SB 705/HB 728 - Health Insurance - Qualified Resident Enrollment Program (Access to Care Act) (2/21)

SB 791/HB 932 - Health Insurance - Utilization Review – Revisions (2/21)

Status of Bills, con't



HB 804 - Certificate of Need - Psychiatric Health Care Facilities and Psychiatric and Mental Health Services - Exemption

SB 778/HB 1339-Health Insurance - Hearing Aids for Adults – Coverage

SB 595/HB 879 -Health Benefit Plans - Calculation of Cost Sharing Contribution - Requirements and Prohibitions

SB 825/HB 1475 -Health Facilities – Delegation of Inspection Authority – Related Institutions and Nursing Homes

The End (Not Literally)

