

**2025 Home Health Agency Certificate of Need (CON) Review:
Qualifying Jurisdictions, Types of Applicants, Qualifications for Accepting a CON Application,
and Qualifying Maryland Applicants**

Qualifying Jurisdictions

Consistent with the Home Health Agency (HHA) Chapter of the State Health Plan (COMAR 10.24.16.04), multiple jurisdictions qualify as having a need for additional HHA services. The qualifying counties under a highly concentrated market are Allegany, Calvert, Caroline, Cecil, Charles, Dorchester, Garrett, Kent, Queen Anne’s, St. Mary’s, Somerset, Talbot, Washington, Wicomico and Worcester. The qualifying counties under insufficient choice of quality performing home health agencies are Anne Arundel, Baltimore, Carroll, Charles, Frederick, Garrett, Harford, Howard, Montgomery, Prince George’s, St. Mary’s, Wicomico and Baltimore City. There was no need identified for consumer choice.

Types of Applicants

Pursuant to the HHA Chapter of the State Health Plan (COMAR 10.24.16.06B), only the following types of entities are eligible to apply for a CON to provide HHA services:

- Existing Medicare-certified HHAs licensed in Maryland and proposing to add one or more jurisdictions to its authorized service area;
- Existing Medicare-certified HHAs licensed in another state and proposing to establish a new HHA in Maryland; or
- Non-HHA service providers currently licensed and accredited, in good standing, as a hospital, a nursing home or a Maryland residential service agency (RSA) providing skilled nursing services and proposing to establish a new HHA in Maryland.

Qualifications for All Applicants

The Commission will only accept a CON application submitted by an applicant that provides documentation that it qualifies as an applicant, in conformance with COMAR 10.24.16.06C.

Performance-Related Qualifications by Type of Applicant

Consistent with COMAR 10.24.16.06D and COMAR 10.24.16.07, quality measures and performance levels were approved by the Commission at its May 15, 2025 meeting to be used for the 2025 CON review schedule of proposed HHA projects. Performance-related qualifications necessary for accepting an application will vary by type of applicant as described in COMAR 10.24.16.07B-D. An applicant’s performance will be determined based on the data publicly reported on the applicable CMS Care Compare websites and, for Maryland nursing homes, the Maryland-specific patient/family satisfaction or experience of care survey on the Maryland Quality Reporting website (refer to Appendix A). Performance-related qualifications by type of applicant are summarized below.

Medicare-Certified HHA Applicants may qualify to apply for a CON by achieving both of the following performance levels from the October 2024 CMS Home Health Care Compare data set which reflects the time period July 1, 2023 to June 30, 2024, approximately.

(1) Quality of Patient Care (QOPC) Overall star rating equal to or better than the Maryland State average of 3.5 stars; and

(2) Home Health Consumer Assessment of Health Care Providers and Systems (HHAHPS®) Survey Summary Overall star rating equal to or better than the Maryland State average of 4.0 stars.

The same quality measures apply to both Maryland and non-Maryland HHAs. Consistent with COMAR 10.24.16.07B, a Maryland HHA applicant seeking to expand its authority to a jurisdiction it is not currently authorized to serve, must demonstrate that its existing Maryland HHA has achieved the required performance levels. Consistent with COMAR 10.24.16.07C, a non-Maryland HHA applicant seeking to establish a new HHA in Maryland must demonstrate that all the non-Maryland HHAs with which it has any common ownership, on average, has achieved the required performance levels. Data requirements for non-Maryland HHA applicants are outlined in Appendix B.

Hospital Applicants may qualify to apply for a CON to establish an HHA in Maryland by scoring at least the Maryland state average on both of the CMS Hospital Overall star ratings for the most recent three consecutive years from 2022, 2023 and 2024 October datasets. The data represent the years 2021 to 2024, approximately, but some measures vary. Note that mortality and readmission measures contributing to the overall star rating cover a three-year span.

(1) Quality of Patient Care (QOPC) Overall star rating equal to or better than the Maryland State average of 3.0 stars for all three years; and

(2) Hospital Consumer Assessment of Health Care Providers and Systems (HCAHPS®) Survey Summary star rating equal to or better than the Maryland State average of 3.0 stars, for all three years.

As provided in COMAR 10.24.16.07D(2), a Maryland hospital applicant with no HHA experience must demonstrate that it has achieved and maintained the minimum CMS Hospital Overall star ratings required for the applicable review cycle for its Maryland hospital. In addition, all the Maryland hospitals with which the applicant has any common ownership must have achieved, on average, for at least the three most recent years of operation, the minimum Hospital Overall star ratings. Data submission requirements for a Maryland hospital applicant in a multiple hospital system are outlined in Appendix C.

The same minimum CMS star ratings for Maryland hospital applicants are used for non-Maryland hospital applicants. Consistent with COMAR 10.24.16.07D(3), a non-Maryland hospital applicant must demonstrate that it has met the minimum CMS Hospital Overall star ratings, for at least the three most recent years of operation, and that all the hospitals with which it has any common ownership achieved and maintained, on average, the minimum Hospital Overall star ratings. Non-Maryland hospital applicants must submit data to the Maryland Health Care Commission to document that they have achieved the required quality measures and performance levels. Data requirements for a non-Maryland hospital applicant in a multiple hospital system are outlined in Appendix C.

Nursing Home Applicants may qualify to apply for a CON to establish an HHA in Maryland if they have a performance score that is equal to or greater than the Maryland average on the CMS Care Compare Nursing Home Overall star ratings for the most recent three consecutive years. A nursing home which has been cited by CMS for resident abuse will not qualify, even if that nursing home met the performance-related qualifications.

For this review cycle, the Maryland state average Nursing Home Overall star ratings for each of the three most recent consecutive years on the respective CMS October data sets, 2022, 2023, and 2024 reflecting July 1, 2021 to June 30, 2024 (reflecting 2022 – 2024 calendar years) are as follows:

(1) Quality of Patient Care (QOPC) Overall Nursing Home star rating equal to or better than the Maryland State average as follows: 3 stars in 2022; 3 stars in 2023; and, 3 stars in 2024.

Furthermore, a Maryland nursing home is also required to achieve and maintain the Maryland average rating on the Maryland-specific Experience of Care (EOC) Survey for the measure which asks respondents to rate the nursing home on a scale of 1 to 10 (with 10 being the most satisfied). For this review cycle, the three most recent Maryland EOC surveys comprise data for calendar years 2021, 2022, and 2023. The Maryland state average for the selected measure of rating the nursing home (on a scale of 1 to 10) for each of those years are as follows:

(2) Maryland-specific Experience of Care Survey equal to or better than the Maryland State average rating on scale of 1 to 10 as follows: 7.5 in CY 2021; 7.2 in CY 2022; and, 7.3 in CY 2023.

Consistent with COMAR 10.24.16.07D(4), a Maryland nursing home applicant must demonstrate that it has achieved and maintained, at a minimum, the Maryland state average on both the CMS Nursing Home Overall star ratings and the selected measure for rating the nursing home on the Maryland-specific EOC Survey, for the applicable three-year reporting periods. In addition, all the Maryland nursing homes with which the applicant has any common ownership must have achieved, on average, the same minimum performance-related requirements. Data submission requirements for a Maryland nursing home applicant that has any common ownership with other Maryland nursing homes are outlined in Appendix D.

Consistent with COMAR 10.24.16.07D(5), a nursing home applicant that only operates a nursing home or nursing homes in states other than Maryland must demonstrate that it has met the relevant performance requirements for the applicable review cycle. A non-Maryland nursing home is required to score, at a minimum, the Maryland state average on the CMS Nursing Home Overall star ratings for the each of the same three years of CMS reporting (CYs 2017 – 2019) as for a Maryland nursing home applicant. In addition, all the non-Maryland nursing homes with which it has any common ownership must have achieved and maintained, on average, the minimum CMS Nursing Home Overall star ratings. A non-Maryland nursing home applicant must submit data to the Maryland Health Care Commission to document it has achieved the required quality measures and performance levels. Data submission requirements for a non-Maryland nursing home applicant that has any common ownership with other nursing homes are outlined in Appendix D.

Maryland Residential Service Agency (RSA) Applicants may qualify to apply for a CON to establish an HHA in Maryland by demonstrating a track record of providing good quality of care. This is achieved by documenting that it has operated and provided skilled nursing services for at least three years, has established a system for collecting data that includes systematic collection of process, outcome and experience of care measures, and has maintained accreditation through a deeming authority recognized by the Maryland Department of Health for at least the three most recent years of operation, consistent with COMAR 10.24.16.07D(1). RSA applicants must submit data to the Commission to document ability to monitor the required quality measures and performance levels. Data requirements are outlined in Appendix E.

Applicants that may Qualify

Using the CMS October 2020 data set, a potential HHA applicant must achieve at a minimum the Maryland state average of 3.5 Stars on the Quality of Patient Care measure and 4 stars on Home Health Consumer Assessment of Health Care Providers and Systems (HHAHPS®) (refer to Appendix A). There are **15 Maryland Medicare-certified HHAs** which appear to meet or exceed the required performance levels and may qualify to apply for a CON to expand the agency's current authorization for the 2025 CON review cycle.

Using the CMS October 2022-2024 data sets, a potential hospital applicant must achieve, at a minimum, the Maryland state average of 3 Stars on both the CMS Hospital Overall star rating and the Hospital Consumer Assessment of Health Care Providers and Systems (HCAHPS®) survey, for all three consecutive years of CMS reporting (calendar years 2022 - 2024) (refer to Appendix A). There are **10 Maryland hospitals** which appear to meet or exceed the required minimum performance levels and may qualify to apply for a CON to establish an HHA for the 2025 CON review cycle.

Using the CMS October 2022-2024 data sets, a potential nursing home applicant must meet, at a minimum, the Maryland state average of 3 stars on the CMS Overall star rating for each of the three consecutive October datasets (2022, 2023, and 2024). In addition, Maryland nursing home applicants must achieve at least the Maryland average rating on the Maryland-specific Nursing Home Family Experience of Care Survey, for each of the three years, as follows: 7.5 (out of 10) in CY 2021; 7.2 in CY 2022; and 7.3 in CY 2023. Maryland nursing home applicants must score the same or higher for this measure for all three consecutive years of available data (refer to Appendix A). There are **57 Maryland nursing homes** which appear to meet or exceed the required minimum performance levels and may qualify to apply for a CON to establish an HHA for the 2025 CON review cycle

Appendix A: Data Sources

For the 2025 HHA CON review cycle (utilizing 2022 Home Health Survey data), the following CMS data sets are used to determine an applicant’s eligibility to apply for a CON by meeting the applicable performance-related qualifying requirements described in this document.

For Medicare-certified HHA applicants, refer to the archived CMS HHA data set at <https://data.medicare.gov/data/home-health-compare> then select “get archived data”. Use the October 2024 data sets; the columns are labeled “Quality of Patient Care Star Rating” in the Home Health Care Agencies dataset and “HHCAHPS Survey Summary Star Rating” in the Home Health Care Patient Survey (HHCAHPS) dataset.

For hospital applicants, refer to the archived CMS hospital data set at <https://data.medicare.gov/data/hospital-compare> then select “get archived data”. Use the October 2022, October, 2023, and October 2024– data sets; the columns are labeled “Overall Rating” in the Hospital General Information dataset and in the Patient Survey (HCAHPS)-Hospital dataset use the “Summary Star Rating” row and the “Patient Survey Star Rating.”

For nursing home applicants, refer to the archived CMS nursing home data set at <https://data.medicare.gov/data/nursing-home-compare> then select “get archived data”. Use the October 2022, October 2023, and October 2024 Provider Information data sets; the column heading “Overall Rating” shows the star summary score.

For Maryland nursing home applicants, refer to the Maryland-specific experience of care surveys for Calendar Years 2021, 2022, and 2023. The data set is available on the [Maryland Quality Reporting](#) site. Obtain the average rating score of 7.5 in CY 2021; 7.2 in CY 2022; and, 7.3 in CY 2023.

Appendix B: Sample: Data Submission Requirements for Non-Maryland Medicare-certified HHA Applicant that has Common Ownership with Any Non-Maryland Medicare-certified HHA

Worksheet B: Sample Non-Maryland HHA Applicant that has Common Ownership with Other Non-Maryland Medicare-certified HHA

CMS Provider ID	Provider Name	Overall Quality of Patient Care (QOPC) Star Rating Most Recent Year
	Applicant Non-Maryland Medicare-certified HHA	
	Related Non-Maryland Medicare-certified HHA	
	Related Non-Maryland Medicare-certified HHA	
	Related Non-Maryland Medicare-certified HHA	
	Related Non-Maryland Medicare-certified HHA	
	Related Non-Maryland Medicare-certified HHA	
	Related Non-Maryland Medicare-certified HHA	
Submit data as shown electronically in an excel spreadsheet		

CMS Provider ID	Provider Name	Overall Home Health CAHPS (HHCAHPS®) Summary Patient Survey Star Rating Most Recent Year
	Applicant Non-Maryland Medicare-certified HHA	
	Related Non-Maryland Medicare-certified HHA	
	Related Non-Maryland Medicare-certified HHA	
	Related Non-Maryland Medicare-certified HHA	
	Related Non-Maryland Medicare-certified HHA	
	Related Non-Maryland Medicare-certified HHA	
	Related Non-Maryland Medicare-certified HHA	
Submit data as shown electronically in an excel spreadsheet		

Appendix C: Sample: Data Submission Requirements for Hospital Applicant in a Multiple Hospital System.

Worksheet C: Sample Hospital Applicant

CMS Provider ID	Provider Name	Overall Star Rating last 3 years	Overall Star Rating last 3 years	Overall Star Rating last 3 years
	Applicant Hospital			
	Related Hospital			
	Related Hospital			
	Related Hospital			
	Related Hospital			
	Related Hospital			
	Related Hospital			
Submit data as shown electronically in an excel spreadsheet				

CMS Provider ID	Provider Name	HCAHPS® Patient Survey Star Rating last 3 years	HCAHPS® Patient Survey Star Rating last 3 years	HCAHPS® Patient Survey Star Rating last 3 years
	Applicant Hospital			
	Related Hospital			
	Related Hospital			
	Related Hospital			
	Related Hospital			
	Related Hospital			
	Related Hospital			
Submit data as shown electronically in an excel spreadsheet				

Appendix D: Sample: Data Submission Requirements for Nursing Home Applicant that has Any Common Ownership with Other Nursing Home(s)

Worksheet D: Sample Nursing Home Applicant

CMS Provider ID	Provider Name	Nursing Home Overall Star Rating last 3 years	Nursing Home Overall Star Rating last 3 years	Nursing Home Overall Star Rating last 3 years
	Applicant Nursing Home			
	Related Nursing Home			
	Related Nursing Home			
	Related Nursing Home			
	Related Nursing Home			
	Related Nursing Home			
	Related Nursing Home			
	Related Nursing Home			
Submit data as shown electronically in an excel spreadsheet				

Maryland Nursing Homes Only

CMS Provider ID	Provider Name	Experience of Care Rating last 3 years	Experience of Care Rating last 3 years	Experience of Care Rating last 3 years
	Applicant Nursing Home			
	Related Nursing Home			
	Related Nursing Home			
	Related Nursing Home			
	Related Nursing Home			
	Related Nursing Home			
	Related Nursing Home			
	Related Nursing Home			
Submit data as shown electronically in an excel spreadsheet				

Appendix E: Data Submission Requirements for Maryland Residential Service Agency (RSA) Applicants Providing Skilled Nursing Services

The information to be submitted by an RSA applicant shall include the following:

- Documentation of the agency's status as accredited for the three most recent years of operation;
- Documentation that the agency has provided skilled nursing services and information of the types of patients provided with this service, the specific types of skilled nursing services provided, and the utilization of this service during the most recent three years of operation (see Worksheet E1);
- A brief description of the agency's quality assurance program to include identification of the quality measures monitored comparable to those measures submitted by HHAs to CMS (for example, if the RSA uses a client survey, submit a copy of the survey); and
- Provision of examples of specific quality measures tracked and performance levels achieved during the most recent three years of operation (see Worksheet E2).

Worksheet E1: Sample RSA Applicant

Skilled Nursing Services Provided to RSA Clients	Number of RSA Clients with Skilled Nursing Services		
	last 3 years	last 3 years	last 3 years
Medications and observation of medication effectiveness			
IV therapy			
Tube feedings			
Wound care, dressing changes			
Teaching and training activities (for example, diabetes foot care)			
Ostomy care			
Tracheostomy care			
Requiring nursing care of other devices such as urinary catheters			
Requiring specialized assessment/management (specify)			
Receiving psychiatric evaluation/therapy			
Other (specify)			
Other (specify)			
Other (specify)			
Other (specify)			
TOTAL number of RSA clients receiving skilled nursing services			
Number of RSA clients NOT receiving skilled nursing services*			

*RSA clients receiving therapy from a non-nurse healthcare professional (such as a physical or occupational therapist).

Note: A client receiving BOTH nursing and other therapist services are counted ONLY as skilled nursing services.

Worksheet E2: Sample RSA Applicant

Sample Types of Quality Measures*	Measure Type	Performance Level Achieved		
		last 3 years	last 3 years	last 3 years
Timely Initiation of Care	Process			
Improvement in Ambulation	Outcome			
Improvement in Bed Transferring	Outcome			
Improvement in Bathing	Outcome			
Improvement in Shortness of Breath	Outcome			
Improvement in Management of Oral Medication	Outcome			
How often Needed Acute Care Hospitalizations	Outcome			
Care provided by HHA team in a professional way	Experience of Care			
HHA team communicated well	Experience of Care			
HHA team discussed medicines, pain, and home safety	Experience of Care			
HHA received rating of 9 or 10 (with 10 being the highest)	Experience of Care			

Note: Submit examples of quality measures collected for your client population. Performance level achieved is expressed as a percent of total HHA clients served in the year and meeting the quality measure.

*Include at least five to ten examples of quality measures selected from your process, outcome, and experience of care measures.