

INTERNAL REGULATIONS REPORT
February, 2023

COMAR	TITLE	PURPOSE	DATE GOV APPROVED/S UB'D TO AELR	DATE OF 1ST PRINT IN MD REG.	30-DAY COMMENT PERIOD: COMMENTS REC'D?	DATE OF FINAL PRINT IN MD REG.	DATE APPROVED (10 DAYS AFTER FINAL)
10.09.16	Behavioral Health Crisis Services	The purpose of the proposed action is to implement Maryland Medicaid's coverage of behavioral health crisis services. Pursuant to the 2023 Governor's Supplemental Budget (No. 5), which provides funds to expand capacity for individuals experiencing mental health crises, this proposal will establish the behavioral health crisis stabilization center service. This proposal also establishes the mobile crisis response team service and codifies the coverage, requirements, and reimbursement procedures for these two new benefits.	Submitted to AELR 12/13	2/24/23 Ant.	2/24/23-3/24/23 Ant.		
10.09.12	Disposable Medical Supplies and Durable Medical Equipment	The purpose of the proposed action is to update the Disposable Medical Supplies and Durable Medical Equipment (DMS/DME) payment procedures to reflect that the Department reimburses for Medicare-covered equipment and supplies at 85 percent of the Medicare rates established on January 1 of each year, in accordance with the approved budget for Fiscal Year 2023. In addition, the proposed action clarifies the methodology as to how the Department reimburses for Medicare-covered items.	Submitted to AELR 12/13	3/10/23 Ant.	3/10/23-4/10/23 Ant.		
10.09.21 and 10.67.06	Pharmacists and Maryland Medicaid Managed Care Program: Benefits	In accordance with Senate Bill 84 (Ch. 758 of the Acts of 2021) and Senate Bill 19 (Ch. 720 of the Acts of 2022), the purpose of the proposed action is to expand coverage for the administration of injectable medications for the treatment of sexually transmitted infections and maintenance injectable medications when performed by a pharmacist.	Submitted to AELR 12/13	1/27/23	1/27/23-2/27/23		
10.09.56	Home and Community-Based Services Waiver for Children with Autism Spectrum Disorder	The purpose of this action is to incorporate the Autism Waiver services fee schedule into regulations, including increased reimbursement rates for services covered under this chapter, pursuant to Ch. 484 (Senate Bill 290), Acts of 2022 - Fiscal Year 2023 Budget Bill and the Governor's Supplemental Budget.	Submitted to AELR 12/13	2/24/23 Ant.	2/24/23-3/24/23 Ant.		
10.09.46	Home and Community-Based Services Waiver for Individuals with Brain Injury.	The purpose of this action is to codify coverage for Brain Injury Waiver services provided to Maryland Medicaid participants via virtual supports as authorized, in accordance with the approved renewal of the waiver application, and to expand the settings where day habilitation service may be rendered. Additionally, this action incorporates the Brain Injury Waiver services fee schedule.	Submitted to AELR 12/13	1/27/23	1/27/23-2/27/23		
10.09.48	Targeted Case Management for People with Developmental Disabilities (DDA TCM)	The purpose of this action is to increase the reimbursement rate for Developmental Disabilities Administration (DDA) targeted case management (TCM) providers by 8 percent.	Submitted to AELR 12/13	3/10/23 Ant.	3/10/23-4/10/23 Ant.		
10.09.80	Community Based Substance Use Disorder Services	The purpose of the proposed action is to update the listed provider reimbursement rate to the 7.25 percent increased rate, effective for Fiscal Year 2023, pursuant to Senate Bill 290 Fiscal Year 2023 Budget (2022) and the Governor's supplemental budget. This proposal also adds coverage of peer recovery support service, establishes the providers eligible to provide this service, and sets the requirements for reimbursement.	Submitted to ALER 1/18/23	2/24/23 Ant.	2/24/23 - 3/27/23 Ant.		

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10.09.54	Home and Community Based Options Waiver (HCBOW)	The purpose of this action is to clarify coverage for services provided via telehealth to Medicaid participants by Home and Community-Based Options Waiver (HCBOW) providers, in accordance with Senate Bill 3, Preserve Telehealth Access Act of 2021. Additionally, the proposed action adds the HCBOW services fee schedule to the payment procedures regulation.	Submitted to AELR 12/13	2/10/23	2/10/23-3/10/23		
10.09.29	Residential Treatment Center Services (RTC)	The purpose of the proposed action is to enable providers to bill for an increased maximum rate for residential treatment center (RTC) services for dates of service starting on January 1, 2023. The action also adds language describing the Department's RTC rate rebasing practices.	Submitted to AELR 12/13	3/10/23 Ant.	3/10/23-4/10/23 Ant.		
10.09.04	Home Health	The proposed changes align regulations with current policy and practice related to services appropriately rendered via telehealth by home health providers. Additionally, this action codifies reimbursement procedures, including a 4 percent increase pursuant to FY 2023 budget. Finally, it codifies federally-required electronic visit verification procedures that will be applicable to home health providers beginning January 1, 2023.	Submitted to AELR 12/13	2/24/23 Ant.	2/24/23-3/24/23 Ant.		
10.09.27	Home Care for Disabled Children Under a Model Waiver	The purpose of this action is to implement a rate increase for Model Waiver services, pursuant to Senate Bill 290 (Fiscal Year 2023 Budget) and the Governor's supplemental budget. Additionally, this action clarifies coverage for services provided via telehealth to Medicaid participants by Model Waiver providers, in accordance with Ch.7 (S.B. 3), Acts of 2021, Preserve Telehealth Access Act of 2021.	Submitted to AELR 12/13	2/24/23 Ant.	2/24/23-3/24/23 Ant.		
10.09.53	EPSDT: Nursing Services for Individuals Younger than 21 Years Old	The purpose of this action is to effectuate Fiscal Year 2023 rate increases for services covered under this chapter.	Submitted to ALER 1/24/23	3/10/23 Ant.	3/10/23 – 4/10/23 Ant.		
10.09.07	Medical Day Care Services	The purpose of this action is to effectuate Fiscal Year 2023 rate increases for services covered under this chapter.	Submitted to ALER 1/24/23	3/10/23 Ant.	3/10/23 – 4/10/23 Ant.		
10.09.06	Adult Residential Substance Use Disorder Services	The purpose of the proposed action is to update the listed provider reimbursement rate to the 7.25 percent increased rate, effective for Fiscal Year 2023, pursuant to Senate Bill 290 Fiscal Year 2023 Budget (2022) and the Governor's supplemental budget. This proposal also establishes service provisions and limitations related to telehealth in accordance with The Preserve Telehealth Access Act of 2021. Finally, to align with updates in the approved 1115 HealthChoice Waiver renewal, this proposal removes the coverage limitation for services that exceed two 30-day spans of care within a 12-month period.	Submitted to AELR 12/13	2/24/23 Ant.	2/24/23-3/24/23 Ant.		
10.09.10	Nursing Facility Services	The purpose of the proposed action is to update the budget adjustment factor for FY 2023 and extend the sunset date for the Interim Working Capital Fund for one year.	Submitted to ALER 1/24/23	3/10/23 Ant.	3/10/23 – 4/10/23 Ant.		
10.09.89	1915(i)	The purpose of the proposed action is to update the listed provider reimbursement rate to the 7.25 percent increased rate, effective for Fiscal Year 2023, pursuant to Senate Bill 290 Fiscal Year 2023 Budget (2022) and the Governor's supplemental budget. This action also consolidates the new and existing reimbursement rates under Regulation .14 Payment Procedures.	Submitted to AELR 12/13	3/10/23 Ant.	3/10/23-4/10/23 Ant.		

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10.09.34	TBS	The purpose of this action is to update reimbursement rates for initial therapeutic assessments and reassessments, and therapeutic behavioral services for dates of service on or after July 1, 2022.	Submitted to ALER 1/24/23	3/10/23 Ant.	3/10/23 – 4/10/23 Ant.		
10.09.77	Urgent Care Centers	The purpose of this action is to: Ease the condition for participation that an urgent care center have a physician on site during hours of operation by allowing certified nurse practitioners and physician assistants to satisfy this requirement; permit services rendered via telehealth to be reimbursed in compliance with COMAR 10.09.49 Telehealth Services; and replace outdated term ‘recipient’ with ‘participant’ throughout the chapter.	Submitted 12/9/22	1/13/23	1/13/23 – 2/13/2023 Held by AELR for additional review		
10.09.09	Medical Laboratories	The proposed action updates the Medical Laboratory Fee Schedule incorporated by reference, adds preauthorization requirements for laboratory services and replaces the outdated term “recipient” with “participant”.	Submitted to AELR 12/13	2/24/23 Ant.	2/24/23-3/24/23 Ant.		
10.09.33	Health Homes	The purpose of this action is to codify the increase in provider rate by 7.25% for Fiscal Year 2023. This action also updates COMAR references and adds clarifying language regarding the enrollment process.	Submitted to AELR 12/13	2/24/23 Ant.	2/24/23-3/24/23 Ant.		
10.09.02	Physician Services	To update the Maryland Medical Assistance Program Professional Service Provider Manual and Fee Schedule incorporated by reference; allow services rendered via telehealth to be reimbursed in compliance with COMAR 10.09.49 and remove limitations on the reimbursement of services rendered by telephone between in accordance with SB03; clarify the services for which a provider may be reimbursed up to acquisition costs; allow physicians to be reimbursed for visits solely for the purpose of administering certain vaccines; change the outdated term recipient to participant; and correct a reference in Regulation .09 to the provider participation criteria in Regulation .03.	Submitted 12/9/22	1/13/23	1/13/23 – 2/13/2023 Held by AELR for additional review		
10.09.31 & 10.67.06	Emergency Services Transporters; MMCP: Benefits	To increase the reimbursement rate received by the Emergency Service Transporters for services provided to Medicaid participants from \$100 to \$150. In addition, Emergency Service Transporters will be reimbursed \$150 per interaction for situations in which Medicaid participants do not require or refuse transportation services and for transportation to alternative destinations other than an Emergency Department (ED). Lastly, this action defines Mobile Integrated Health (MIH) services and sets the reimbursement rate at \$150 for the Emergency Service Transporters per qualified visit and requires MCOs to provide this benefit to participants.	Submitted 8/31/22	10/21/22	10/21/22 - 11/21/22 NOFA Submitted 1/9/23		
10.09.23	EPSDT Services	To update the Audiology, Physical Therapy, and Early Periodic, Screening, Diagnosis, and Treatment Provider Manual incorporated by reference effective January 1, 2022; permit certain services to be rendered via telehealth to be reimbursed in compliance with COMAR 10.09.49 Telehealth Services; other minor clean-ups.	Submitted to AELR 12/13	2/24/23 Ant.	2/24/23-3/24/23 Ant.		
10.09.05	Dental Services	To align regulations with current policy and practice related to services appropriately rendered via telehealth by dental providers. Clarifies periodontal preauthorization requirements, removes occlusal adjustment preauthorization requirements, and incorporates by reference the 2022 Dental Fee Schedule. Further aligns regulations to permit Medicaid to provide coverage of dental services for adults effective January 1, 2023.	Submitted 10/14/22	12/30/22	12/30/22 – 1/30/23 Held by AELR for additional		

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10.09.95	Special Psychiatric Hospital	To expand coverage of inpatient mental health services in special psychiatric hospitals for Medicaid adults aged 21 to 64 for up to 60 days, and permit reimbursement when providers render services in facilities located in contiguous states and the District of Columbia. Aligns Medicaid regulations with the CMS-approved HealthChoice Medicaid Section 1115 Demonstration. Updates the referenced regulation for the waiver-eligible definition.	Submitted 8/31/22	11/4/22	11/4/22 - 12/4/22 NOFA submitted 1/9/23		
10.09.40, 10.09.52, & 10.09.76	Early Intervention Services Case Management, Service Coordination for Children with Disabilities, & SBHC	Combined education proposal: <ul style="list-style-type: none"> • 10.09.40 – updates terminology to reflect current practices • 10.09.52 – clarifies distinctions between service coordination for Autism Waiver and IEP/IFSP participants • 10.09.76 -- Align regulations with the provisions of Senate Bill 830, Secretary of Health – School Based Health Centers – Guidelines and Administration of Grants, 2021, Ch. 606 & Senate Bill 3, Preserve Telehealth Access Act of 2021. 	Submitted 11/10/22	1/13/23	1/13/23- 2/13/23 Held by AELR for additional review		
10.09.01	Advance Practice Nurse Services	To align regulations with current practices for rendering of telehealth in compliance with COMAR 10.09.49, and remove the term “recipient” and replace it with “participant”.	Submitted 11/10/22	2/24/23 Ant.	2/24/23- 3/24/23 Ant.		
10.09.17	Physical Therapy Services	To align regulations with current policy and practice related services rendered via telehealth by cross-referencing requirements established in COMAR 10.09.49 Telehealth Services.	Submitted 11/10/22	3/10/23 Ant.	3/10/23- 4/10/23 Ant.		
10.09.55.03 and .06	Physician Assistants	To align regulations with current policy and practice related to services appropriately rendered via telehealth by physician assistants.	Submitted 11/10/22	12/30/22	12/30/22- 1/30/23		
10.09.15.03 and .07	Podiatry Services	To align regulations with current policy and practice related to services appropriately rendered via telehealth by podiatry services providers, and replace term “recipient” with “participant” to reflect current terminology.	Submitted 11/10/22	3/10/23 Ant.	3/10/23- 4/10/23 Ant.		
10.09.49 & 10.09.96	Telehealth Services & Remote Patient Monitoring	To update the Maryland Medicaid telehealth and remote patient monitoring regulations in compliance with Senate Bill 3, Preserve Telehealth Access Act of 2021.	10/3/22	11/18/22	11/18/22 – 12/18/22 Held by AELR for additional review		