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Revision: HCFA-AT-80-38 (BPP)
May 22, 1980

State Maryland

SECTION 5 PERSONNEL ADMINISTRATION

Citation
42 CFR 432.10(a)
AT-78-90
AT-79-23
AT-80-34

5.1 Standards of Personnel Administration

(a) The Medicaid agency has established and will maintain methods of personnel administration in conformity with standards prescribed by the U.S. Civil Service Commission in accordance with Section 208 of the Intergovernmental Personnel Act of 1970 and the regulations on Administration of the Standards for a Merit System of Personnel Administration, 5 CFR Part 900, Subpart F. All requirements of 42 CFR 432.10 are met.

The plan is locally administered and State-supervised. The requirements of 42 CFR 432.10 with respect to local agency administration are met.

(b) Affirmative Action Plan

The Medicaid agency has in effect an affirmative action plan for equal employment opportunity that includes specific action steps and timetables and meets all other requirements of 5 CFR Part 900, Subpart F.

TN # 78-1
Supersedes _____
TN # _____

Approval Date 2-28-78 Effective Date 9-30-77

Revision: HCFA-AT-80-38 (BPP)
May 22, 1980

State Maryland

5.2 [Reserved]

TN # _____
Supersedes _____
TN # _____

Approval Date _____

Effective Date _____

Revision: HCFA-AT-80-38 (BPP)
May 22, 1980

State Maryland

Citation
42 CFR Part 432,
Subpart B
AT-78-90

5.3 Training Programs; Subprofessional and
Volunteer Programs

The Medicaid agency meets the requirements of 42 CFR Part 432, Subpart B, with respect to a training program for agency personnel and the training and use of subprofessional staff and volunteers.

TN # 79-5
Supersedes
TN # _____

Approval Date 12-18-78 Effective Date 2-27-78

Revision: HCFA-AT-80-38 (BPP)
May 22, 1980

State Maryland

SECTION 6 FINANCIAL ADMINISTRATION

Citation
42 CFR 433.32
AT-79-29

6.1 Fiscal Policies and Accountability

The Medicaid agency and, where applicable, local agencies administering the plan, maintains an accounting system and supporting fiscal records adequate to assure that claims for Federal funds are in accord with applicable Federal requirements. The requirements of 42 CFR 433.32 are met.

TN # 76-18
Supersedes
TN #

Approval Date 8-10-76

Effective Date 6-30-76

Revision: HCFA-AT-81- (SPP)

State MARYLAND

Citation
42 CFR 433.34
47 FR 17490

6.2 Cost Allocation

There is an approved cost allocation plan on file with the Department in accordance with the requirements contained in 45 CFR Part 95, Subpart E.

TN # 83-4
Supersedes
TN # 76-18

Approval Date 14 SEP 1982 Effective Date 7/1/82

Revision: HCFA-AT-80-38 (BPP)
May 22, 1980

State Maryland

Citation
42 CFR 433.33
AT-79-29
AT-80-34

6.3 State Financial Participation

- (a) State funds are used in both assistance and administration.

State funds are used to pay all of the non-Federal share of total expenditures under the plan.

There is local participation. State funds are used to pay not less than 40 percent of the non-Federal share of the total expenditures under the plan. There is a method of apportioning Federal and State funds among the political subdivisions of the State on an equalization or other basis which assures that lack of adequate funds from local sources will not result in lowering the amount, duration, scope or quality of care and services or level of administration under the plan in any part of the State.

- (b) State and Federal funds are apportioned among the political subdivisions of the State on a basis consistent with equitable treatment of individuals in similar circumstances throughout the State.

TN # 76-18
Supersedes
TN # _____

Approval Date 8-10-76

Effective Date 6-30-76

Revision: HCFA-PM-91-4 (BPD)
AUGUST 1991

OMB No. 0938-

State/Territory: Maryland

SECTION 7 - GENERAL PROVISIONS

Citation

7.1 Plan Amendments

42 CFR 430.12(c)

The plan will be amended whenever necessary to reflect new or revised Federal statutes or regulations or material change in State law, organization, policy or State agency operation.

TN No. 42-11
Supersedes TN No. 78-2 Approval Date JUN 05 1992 Effective Date NOV 01 1991

HCFA ID: 7982E

Revision: HCFA-PM-91-4 (BPD)
AUGUST 1991

OMB No.: 0938-

State/Territory: Maryland

Citation
45 CFR Parts
80 and 84

7.2 Nondiscrimination

In accordance with title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000d et. seq.), Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 70b), and the regulations at 45 CFR Parts 80 and 84, the Medicaid agency assures that no individual shall be subject to discrimination under this plan on the grounds of race, color, national origin, disability or age.

In addition, in accordance with Maryland State Law and policy, the Medicaid agency assures that no individual shall be subject to discrimination under this plan on the grounds of sex, religion, marital status, and sexual orientation.

The Medicaid agency has methods of administration to assure that each program or activity for which it receives Federal financial assistance will be operated in accordance with title VI regulations and State Law. These methods for title VI are described in ATTACHMENT 7.2-A.

TN # 11-09
Supersedes TN # 92-11

Approval Date SEP 9 2011 Effective Date 4/1/2011

Revision: HCFA-PM-91- 4 (BPD)
AUGUST 1991

OMB No.: 0938-

State/Territory: Maryland

Citation
42 CFR 430.12 (b)

7.4 State Governor's Review

The Medicaid agency will provide opportunity for the Office of the Governor to review State plan amendments, long-range program planning projections, and other periodic reports thereon, excluding periodic statistical, budget and fiscal reports. Any comments made will be transmitted to the Health Care Financing Administration with such documents.

Not applicable. The Governor -

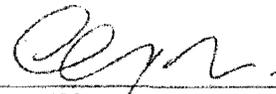
Does not wish to review any plan material.

Wishes to review only the plan materials specified in the enclosed document.

I hereby certify that I am authorized to submit this plan on behalf of

State Department of Health and Mental Hygiene
(Designated Single State Agency)

Date: May 13, 2011



(Signature)

Deputy Secretary Health Care Financing
(Title)

(Charles J. Milligan, Jr.)

TN # 11-06
Supersedes TN # 92-11

Approval Date JUL 29 2011 Effective Date APRIL 1, 2011

STATE PLAN FOR MEDICAL ASSISTANCE
UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
STATE OF: MARYLAND

Title VI of the Civil Rights Act of 1964, Section 601 states that "no person in the United States shall on the grounds of race, color or national origin, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance." In addition to ensuring compliance with the Civil Rights Act of 1964, Section 601, EACU also monitors and ensures compliance with the Hill-Burton Act, Section 504 of the Rehabilitation Act of 1973; the Age Discrimination Act of 1975; and the Omnibus Budget Reconciliation Act of 1981 (Block Grants).

The Secretary of the Department of Health and Mental Hygiene (DHMH), by law and policy, does not permit discrimination against anyone on the basis of race, color, national origin, age, religion, disability, gender identity, sex, or sexual orientation. This nondiscrimination policy applies to all facilities and programs operated directly by DHMH as well as to providers of health services who receive federal funds under Medicare Part A or Medicaid.

Anyone who believes that an act of discrimination has taken place in the areas of delivery of services, treatment procedures, or any other areas as defined in Title VI has the right to file a complaint and to receive a prompt investigation of the allegation(s). All federally funded programs must comply with the requirements and provisions of Title VI of the Civil Rights Act of 1964, Section 601.

The Equal Access Compliance Unit (EACU) is responsible for ensuring that all individuals receive nondiscriminatory delivery of services from all DHMH facilities and programs operated directly by the Department as well as providers of health services who receive federal funds under Medicare Part A, or Medicaid, regardless of race, color, national origin (including individuals who are Limited English Proficient), age, religion, disability, gender identity, sex or sexual orientation.

EACU monitors and audits DHMH programs operated directly by the Department and other providers of health care operating in the State of Maryland, who are receiving federal funds, to ensure that they do not deny or have the effect of denying qualified clients equal access to federally assisted health care, medical benefits and services for which such persons qualify. Anyone who believes an act of discrimination has taken place in the areas of delivery of services, treatment procedures, or other covered areas, may file a complaint with EACU or the U.S. Department of Health and Human Services (HHS), Office of Civil Rights.

DHMH POLICY

<http://www.dhmh.state.md.us/policies/inpolm.htm>

OFFICE OF EQUAL OPPORTUNITY PROGRAMS (OEOP)- DHMH POLICY 02.06.04
Effective Date- September 5, 2006

POLICY ON EQUAL EMPLOYMENT OPPORTUNITY (EEO)

SHORT TITLE: EEO POLICY

I. EXECUTIVE SUMMARY

Federal statutes and the Maryland Code of Fair Practices prohibit the practice of all forms of discrimination in employment based on non-merit factors. This policy implements the Equal Employment Opportunity program at the Department of Health and Mental Hygiene (DHMH) and ensures compliance with all applicable Federal and State laws and regulations. The policy further prohibits any unit of DHMH from conducting business with firms, institutions, or agencies that engage in workplace discrimination. All units of the Department as well as grant-in-aid programs, health services providers, and DHMH contractors/subcontractors that receive Federal or State funds are covered by this policy.

Each Deputy Secretary, Program Director, Facility CEO, Health Officer, unit head or supervisor of one or more employees shall ensure that a review of EEO practices is included as a component of the annual performance evaluation completed for each subordinate supervisor.

The Executive Director, OEOP, or designee has the following responsibilities:

- * to develop, recommend, and monitor DHMH EEO policies and procedures to assure the Department is in compliance with Federal and State laws and regulations.
- * to provide technical assistance to DHMH components in matters regarding EEO practices.
- * where authorized, to act on behalf of the Secretary or Deputy Secretaries of DHMH to carry out the provisions and intent of this policy.
- * to accept timely complaints and conduct on-site reviews, as necessary.
- * to cooperate with Federal and State offices responsible for equal employment opportunity.
- * to prepare an annual EEO report for all DHMH and submit it to the Maryland Commission on Human Relations (MCHR).
- * to monitor all personnel transactions—hiring, promotions, transfers, reassignments, terminations, discipline, etc.— for EEO compliance.

All DHMH employees or employment applicants are advised that they may contact OEOP or alternative resources for information or questions regarding EEO, or to file a complaint.

II. BACKGROUND

DHMH Policy 02.06.04 supersedes and replaces the version dated July 15, 2005. The only significant change, which is administrative in nature, is renaming the Office of Community Relations (OCR) to Office of Equal Opportunity Programs (OEOP). The DHMH policy review process was waived.

Department of Health & Mental Hygiene
OFFICE OF REGULATION AND POLICY COORDINATION (ORPC) - POLICY ADMINISTRATOR
201 West Preston Street - Suite 512 - Baltimore Maryland 21201-2301
Phone 410 767-5934 FAX 410 333-7304

TN No: 11-09 Approval Date:
Supersedes No: Original 1974

SEP 9 2011

Effective Date: 4/1/2011

DHMH POLICY 02.06.04
OFFICE OF EQUAL OPPORTUNITY PROGRAMS

III. POLICY STATEMENTS

A. **AUTHORITY**

Federal and State laws and regulations prohibit the practice of discrimination in employment. This prohibition applies to employment discrimination based on non-merit factors including race, color, national origin, age, religion, sex, disabilities, and any other non-merit factors. Authority for this policy is derived from the following mandates, but other laws and regulations may also apply:

1. Title VII of the Civil Rights Act of 1964, as amended, forbids employment discrimination based on race, color, religion, sex, and national origin;
2. The Age Discrimination in Employment Act of 1967 (ADEA) makes discrimination against employees for reasons of age illegal;
3. Article 49B, Annotated Code of Maryland and the Rehabilitation Act of 1973 prohibit discrimination against persons with a disability.
4. The Equal Pay Act of 1963 prohibits discrimination in wages based on sex.
5. Title I and V of the Americans With Disabilities Act of 1990 prohibits discrimination based upon a disability.
6. The Governor's Executive Order 01.01.1995.19 -Code of Fair Practices prohibits employment discrimination in State Government including discrimination based on sexual orientation.

B. **SCOPE**

1. This policy applies to all DHMH programs, facilities, independent units such as Boards and Commissions, Local Health Departments, grant-in-aid programs, health services providers, and DHMH contractors/subcontractors receiving Federal or State funds.
2. No component of DHMH shall conduct business with firms, institutions, service providers, or agencies that engage in unlawful discrimination.

C. **ROLES AND RESPONSIBILITY**

1. Each Deputy Secretary shall ensure that equal opportunity exists in all employment practices within the scope of his or her responsibility.
2. Each Deputy Secretary, Program Director, Facility CEO, Health Officer, unit head or supervisor of one or more employees shall ensure that a review of EEO practices is a component of the annual performance evaluation completed for each subordinate supervisor.
3. Each Program Director, Facility CEO, Health Officer, and unit head or supervisor of one or more employees shall follow the guidelines of this policy within his or her area of responsibility.
4. The Executive Director, OEOP, is designated by the Secretary, DHMH, to have oversight responsibility for the following:

DHMH POLICY 02.06.04
OFFICE OF EQUAL OPPORTUNITY PROGRAMS

- a. Develop, recommend, and monitor policies and procedures necessary for DHMH to be EEO compliant with Federal and State laws and regulations.
- b. Provide technical assistance and advice on EEO practices to all DHMH components.
- c. Monitor all personnel transactions- hiring, promotions, transfers, reassignments, terminations, discipline, etc. for EEO compliance.
- d. Where authorized, act for the Secretary or Deputy Secretary in carrying out the provisions of this policy.
- e. Accept timely complaints and conduct on-site reviews, as necessary.
- f. Work in concert with the Maryland Commission on Human Relations (MCHR) and the Federal Equal Employment Opportunity Commission (EEOC) in the investigation of alleged discrimination.
- g. Prepare and submit relevant reports to the Secretary and appropriate Federal and State agencies.

D. RESOURCES FOR OBTAINING SERVICE

1. DHMH OFFICE OF EQUAL OPPORTUNITY PROGRAMS-EMPLOYMENT EQUITY UNIT

The OEOP Employment Equity Unit attempts to quickly resolve employment discrimination disputes through mediation, investigation, and training; and to maintain a discrimination-free work environment for all employees within DHMH regardless of race, color, sex, religion, national origin, age, disability, or sexual orientation.

- a. If you believe you have been discriminated against at DHMH, you may file a complaint with the Employment Equity Unit. Complaints must be filed within 30 days of the alleged discriminatory practice or act. Please call 410-767-6600 to schedule an appointment. All matters discussed in office will be kept confidential, except where a complaint is filed and served on management. If you decide to submit a written complaint after discussion with the Employment Equity Unit staff, they will assist you in completing the Fair Employment Practices Complaint Form.
- b. You may choose instead to file a complaint with the Statewide EEO Coordinator at the Department of Budget and Management, the Maryland Commission on Human Relations, or the US Equal Employment Opportunity Commission. Please note that the filing deadlines vary.
<http://www.dhmh.state.md.us/ocr/eeu/eeuhome.htm>

2. DBM OFFICE OF THE STATEWIDE EEO COORDINATOR

The Office of the Statewide EEO Coordinator enforces the Governor's Code of Fair Employment Practices, which ensures equal employment opportunity for all State employees and applicants for State employment, and provides a means for resolution of employment discrimination complaints. DHMH employees may wish to file directly with this office. Complaints must be filed within 30 days of the alleged discriminatory practice or act.

DHMH POLICY 02.06.04
OFFICE OF EQUAL OPPORTUNITY PROGRAMS

DBM Office of the Statewide EEO Coordinator
301 West Preston Street - Room 608
Baltimore, Maryland 21201
410-767-3800 or 1-800-411-5123 <http://www.dbm.maryland.gov/>

3. **THE MARYLAND COMMISSION ON HUMAN RELATIONS (MCHR)**
Within 180 days of the employment decision you believe to have been discriminatory, call the MCHR at 410-767-8600 to set up an appointment or begin the process of filing a charge of discrimination.

Maryland Commission on Human Relations
6 St. Paul Street, 9th Floor,
Baltimore, MD 21201
410 767-8600 <http://www.mchr.state.md.us/>

4. **US EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)**
EEOC is responsible for employment discrimination on a Federal level. The agency is charged with enforcing Title VII of the Civil Rights Act of 1964, as amended, the Equal Pay Act (EPA), the Americans with Disabilities Act (ADA) of 1990 and the 1967 Age Discrimination in Employment Act (ADEA). Complaints must be filed within 300 days of the alleged discriminatory practice or act, or in some cases when you become aware of the alleged discriminatory practice or act.

Equal Employment Opportunity Commission
Baltimore District Office - 10 South Howard Street, 3rd Floor
Baltimore, Maryland 21201
410-962-3932 <http://www.eeoc.gov/>

IV. REFERENCES

- * The Equal Pay Act of 1963, <http://www.eeoc.gov/epa/>
- * Title VII, The Civil Rights Act of 1964, as amended.
<http://www.eeoc.gov/policy/vii.html>
- * The Age Discrimination in Employment Act of 1967
<http://www.eeoc.gov/policy/adea.html>
- * Titles I and V, The Americans with Disabilities Act of 1990
http://www.eeoc.gov/abouteeo/overview_laws.html
- * Governor's Executive Order 01.01.1995.19 - Code of Fair Practices, 1995
http://www.dbm.maryland.gov/dbm_publishing/public_content/dbm_taxonomy/employee_services/equal_employment_opportunity/codeoffairpractices1995.htm

APPROVED:

/S/ Signature on File

S. Anthony McCann, Secretary

September 5, 2006
Effective Date

DHMH POLICY

<http://www.dhmh.state.md.us/policies/inpolm.htm>

**OFFICE OF DIVERSITY AND INCLUSION (ODI)/
EQUAL OPPORTUNITY PROGRAMS (EOP)**

**DHMH POLICY 01.02.01
Effective Date: March 7, 2011**

SERVICE NONDISCRIMINATION POLICY

I. EXECUTIVE SUMMARY

Discrimination is prohibited in the delivery of all services provided by the Department of Health and Mental Hygiene (DHMH). Furthermore, no component or agent of DHMH shall do business on behalf of the Department with entities that engage in discrimination.

The Federal and State statutes providing the authority for this policy are discussed and the basis on which the statutes prohibit discrimination are stated.

The responsibilities of the Deputy Secretaries, the Fair Practices Officer and DHMH employees are explained, and the guidelines for compliance with this policy are stated. Links to relevant online documents are also provided.

II. BACKGROUND

The DHMH Service Nondiscrimination Policy establishes the guidelines for the nondiscriminatory delivery of services by the Department. This version 01.02.01 recodifies, supersedes and replaces DHMH 02.06.01 dated June 29, 2007. The changes to this version are administrative in nature and include changing the codification number, changing the office name and updating references and hyperlinks.

III. POLICY STATEMENTS

A. AUTHORITY

In accordance with Federal and State mandates, DHMH prohibits discrimination in the delivery of services on the basis of race, sex, age, color, national origin, religion or belief, marital status, sexual orientation, genetic testing, political opinion or affiliation, and mental and/or physical disability based on, but not limited to, the following:

- Title VI, Civil Rights Act of 1964, as amended;
- Section 504, Rehabilitation Act of 1973;
- Age Discrimination Act of 1975;

Department of Health & Mental Hygiene
OFFICE OF REGULATION AND POLICY COORDINATION (ORPC)
201 West Preston Street - Suite 512 - Baltimore Maryland 21201-2301
Phone 410 767-6499 FAX 410 767-6483

DHMH POLICY 01.02.01**SERVICE NONDISCRIMINATION POLICY****OFFICE OF DIVERSITY AND INCLUSION (ODI) / EQUAL OPPORTUNITY PROGRAMS (EOP)**

- Title II, Subtitle A of the Americans With Disabilities Act of 1990, as amended;
- Article 49B, Annotated Code of Maryland, as amended;
- COMAR 01.01.2007.16 Code of Fair Employment Practices;
- COMAR 01.01.2007.01 Standards of Conduct for Executive Branch Employees; and
- Other applicable Federal and State mandates that may include provisions on nondiscrimination in the delivery of services.

B. APPLICABILITY

1. This policy applies to all programs, activities and benefits operated or provided directly or indirectly by DHMH.
2. This policy also applies to all grant programs, health care providers, contractors and subcontractors that receive Federal or State Funds.

C. ROLES AND RESPONSIBILITIES

1. The Secretary hereby assigns each Deputy Secretary responsibility for ensuring the nondiscriminatory delivery of services by all programs directly or indirectly under his or her administration.
2. The Fair Practices Officer (or designee) shall have the following responsibilities:
 - Monitor and enforce DHMH compliance efforts to avoid discrimination;
 - Monitor policies and procedures necessary for compliance with applicable Federal and State mandates;
 - Provide staff assistance to the Secretary and Deputy Secretaries for enforcement of this policy;
 - Provide technical assistance and advice to staff in administrative and program units regarding the nondiscriminatory delivery of services;
 - Act for the Secretary or Deputy Secretaries, when authorized, to carry out the provisions of this policy;
 - Conduct on-site reviews, as necessary, to ensure nondiscrimination in the delivery of services;
 - Provide compliance training for DHMH staff; and
 - Prepare and submit relevant reports to the Secretary and appropriate State and Federal agencies;

This version DHMH 01.02.01 effective March 7, 2011 recodifies and supersedes DHMH 02.06.01 dated June 29, 2007.

TN: 14-014

Approval Date: **MAR 02 2015**

PAGE 2 OF 4

Effective Date: October 1, 2014

Supersedes No: NEW

DHMH POLICY 01.02.01**SERVICE NONDISCRIMINATION POLICY****OFFICE OF DIVERSITY AND INCLUSION (ODI) / EQUAL OPPORTUNITY PROGRAMS (EOP)**

- Investigate complaints of discrimination covered by this policy.
3. All employees (including volunteers), vendors, contractors, subcontractors, agents, grantees and health care providers that receive Federal or State funds are responsible for compliance with the requirements of this policy.

D. COMPLIANCE

1. Employees shall act impartially in the delivery of services and not give preferential treatment to any private organization or individual. (COMAR 01.01.2007.01).
2. No employee shall refuse, withhold or deny service to any person because of race, sex, age, color, national origin, religion or belief, marital status, genetic testing, sexual orientation, political opinion or affiliation, or physical and/or mental disability.
3. Employees shall provide reasonable accommodations to individuals with disabilities to ensure an equivalent level of delivery of service.
4. Violation of these requirements is unlawful and is subject to disciplinary action, penalties or fines, as appropriate.
5. Employees who observe actual or possible discrimination in the delivery of services are encouraged to report the occurrence to the Fair Practices Officer at 410 767-6600 or OEOP@dhhm.state.md.us.

IV. REFERENCES

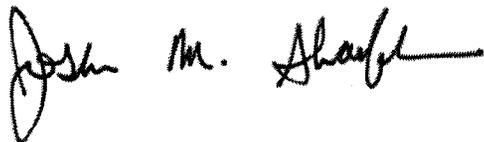
- Title VI, Civil Rights Act of 1964, as amended
http://www.justice.gov/crt/grants_statutes/titlevi.txt
- Section 504, Rehabilitation Act of 1973
<http://www.hhs.gov/ocr/504.html>
- Age Discrimination Act of 1975
http://www.dol.gov/oasam/regs/statutes/age_act.htm
- Title II A, The Americans with Disabilities Act of 1990, as amended.
<http://www.ada.gov/adahom1.htm>
- Annotated Code of Maryland, Article 49B, as amended
<http://www.michie.com/maryland/lpext.dll/mdcode/298ed/292c8?fn=document-frame.htm&f=templates&2.0#>
- COMAR 01.01.2007.01 Standards of Conduct for Executive Branch Employees
<http://www.dsd.state.md.us/comar/comarhtml/01/01.01.2007.01.htm>
- COMAR 01.01.2007.16 Code of Fair Employment Practices
<http://www.dsd.state.md.us/comar/comarhtml/01/01.01.2007.16.htm>

DHMH POLICY 01.02.01

SERVICE NONDISCRIMINATION POLICY

OFFICE OF DIVERSITY AND INCLUSION (ODI) / EQUAL OPPORTUNITY PROGRAMS (EOP)

APPROVED:



Joshua M. Sharfstein, M.D., Secretary, DHMH

March 7, 2011
Effective Date

7.4.B Temporary Extension to the Disaster Relief Policies in effect following the COVID-19 National Emergency

Effective the day after the end of the PHE until the last day of the twelfth month after the end of the PHE, the agency temporarily extends the following election of section 7.4 (approved on 12/15/2022 in SPA Number MD-22-0019) of the state plan:

Section A – Eligibility

3 x The agency applies less restrictive financial methodologies to individuals excepted from financial methodologies based on modified adjusted gross income (MAGI) as follows.

Less restrictive resource methodologies:

Disregard as a resource income that would otherwise have been part of an individual’s liability for his or her institutional or home- and community-based waiver services based on application of the post-eligibility treatment-of-income (PETI) rules but which became countable resources on or after March 18, 2020 for the following non-MAGI groups:

- Qualified Medicare Beneficiaries, 1902(a)(10)(E)(i)
- Special Low-income Medicare Beneficiaries, 1902(a)(10)(E)(iii)
- Qualifying Individuals, 1902(a)(10)(E)(iv)
- Individuals eligible for but not receiving cash assistance, 1902(a)(10)(A)(ii)(I)
- Individuals eligible for cash assistance but for institutionalization, 42 CFR 435.211
- HCBS waiver participants under a Special Income Level, 42 CFR 435.217
- NF residents under a Special Income Level, 1902(a)(10)(A)(ii)(V)
- Medically needy individuals eligible based on age, blindness, or disability
42 CFR 435.320, 435.322, 435.324

Such resources will be disregarded through the twelve months following the end of the month in which the COVID-19 public health emergency ends.

Section 7.4.B. Temporary Extension to the Disaster Relief Policies for the COVID-19 National Emergency

Effective May 12 until the dates reflected below the agency temporarily extends the following election in 7.4 (approved on April 17, 2020, in SPA Number MD-20-0001) of the state plan:

Premiums and Cost Sharing

X The agency suspends enrollment fees, premiums and similar charges for:

a. All beneficiaries

b. X The following eligibility groups or categorical populations:

Please list the applicable eligibility groups or populations.

§1902(a)(10)(A)(ii)(XV) TWWIIA Basic group.

Such premiums will be suspended through December 31, 2023.

§1902(a)(10)(A)(ii)(XIV) targeted low-income children.

Such premiums will be suspended through April 30, 2024

Vaccine and Vaccine Administration at Section 1905(a)(4)(E) of the Social Security Act

During the period starting March 11, 2021 and ending on the last day of the first calendar quarter that begins one year after the last day of the emergency period described in section 1135(g)(1)(B) of the Social Security Act (the Act):

Coverage

The state assures coverage of COVID-19 vaccines and administration of the vaccines.¹

The state assures that such coverage:

1. Is provided to all eligibility groups covered by the state, including the optional Individuals Eligible for Family Planning Services, Individuals with Tuberculosis, and COVID-19 groups if applicable, with the exception of the Medicare Savings Program groups and the COBRA Continuation Coverage group for which medical assistance consists only of payment of premiums; and
2. Is provided to beneficiaries without cost sharing pursuant to section 1916(a)(2)(H) and section 1916A(b)(3)(B)(xii) of the Act; reimbursement to qualified providers for such coverage is not reduced by any cost sharing that would otherwise be applicable under the state plan.

Applies to the state's approved Alternative Benefit Plans, without any deduction, cost sharing or similar charge, pursuant to section 1937(b)(8)(A) of the Act.

The state provides coverage for any medically necessary COVID-19 vaccine counseling for children under the age of 21 pursuant to §§1902(a)(11), 1902(a)(43), and 1905(hh) of the Act.

The state assures compliance with the HHS COVID-19 PREP Act declarations and authorizations, including all of the amendments to the declaration, with respect to the providers that are considered qualified to prescribe, dispense, administer, deliver and/or distribute COVID-19 vaccines.

Additional Information (Optional):

¹ The vaccine will be claimed under this benefit once the federal government discontinues purchasing the vaccine.

Reimbursement

The state assures that the state plan has established rates for COVID-19 vaccines and the administration of the vaccines for all qualified providers pursuant to sections 1905(a)(4)(E) and 1902(a)(30)(A) of the Act.

List Medicaid state plan references to payment methodologies that describe the rates for COVID-19 vaccines and their administration for each applicable Medicaid benefit:

Att. 4.19B pg. 5, 7, 8, 10, 13, 25, and 33C-E

The state is establishing rates for COVID-19 vaccines and the administration of the vaccines pursuant to sections 1905(a)(4)(E) and 1902(a)(30)(A) of the Act.

The state's rates for COVID-19 vaccines and the administration of the vaccines are consistent with Medicare rates for COVID-19 vaccines and the administration of the vaccines, including any future Medicare updates at the:

Medicare national average, OR
Associated geographically adjusted rate.

The state is establishing a state specific fee schedule for COVID-19 vaccines and the administration of the vaccines pursuant to sections 1905(a)(4)(E) and 1902(a)(30)(A) of the Act.

The state's rate is as follows and the state's fee schedule is published in the following location :

The state's fee schedule is the same for all governmental and private providers.

The below listed providers are paid differently from the above rate schedules and payment to these providers for COVID-19 vaccines and the administration of the vaccines are described under the benefit payment methodology applicable to the provider type:

The payment methodologies for COVID-19 vaccines and the administration of the vaccines for providers listed above are described below:

The state is establishing rates for any medically necessary COVID-19 vaccine counseling for children under the age of 21 pursuant to sections 1905(a)(4)(E), 1905(r)(1)(B)(v) and 1902(a)(30)(A) of the Act.

The state's rate is as follows and the state's fee schedule is published in the following location :

PRA

Maryland establishes the following rates for COVID-19 vaccine counseling: facility rate is \$26.10 and the non-facility rate is \$42.41 as of January 20, 2022. Providers must bill using 99401 with CR modifier.

For FQHCs and RHCs: Effective with dates of service March 11, 2021, the Department will pay only FQHCs and RHCs that agree to accept this alternate payment methodology (APM) and agree that the Medicaid facility rate covers their increased costs associated with COVID-19 vaccine counseling visits in supplement to their PPS rate. The Department will pay the Medicaid rate for COVID-19 vaccine counseling by staff who have authority under state law and are covered under the Maryland Medicaid State Plan to counsel Medicaid members regarding COVID-19 vaccines. The supplemental amounts made under this APM are in addition to the PPS paid to FQHCs/RHCs for an eligible encounter. The amount in total paid to FQHC and RHC providers is at least their provider-specific PPS rate. This APM was developed to support FQHCs/RHCs, as a key COVID-19 vaccine provider identified in the Maryland COVID-19 vaccination strategy. Payments under this APM are to cover the additional costs associated with counseling Medicaid members considering COVID-19 vaccines by FQHCs/RHCs during COVID-19 vaccine-only visits. The supplemental amount paid under this APM is the Medicaid facility rate for COVID-19 vaccine counseling. The APM for COVID-19 vaccine counseling is only paid for incident-to visits when no service eligible for the encounter rate is provided.

Disclosure Statement Under the Privacy Act of 1974 any personally identifying information obtained will be kept private to the extent of the law. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid Office of Management and Budget (OMB) control number. The OMB control number for this project is 0938-1148 (CMS-10398 # 75). Public burden for all of the collection of information requirements under this control number is estimated to take up to 1 hour per response. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to CMS, 7500 Security Boulevard, Attn: Paperwork Reduction Act Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

COVID-19 Testing at section 1905(a)(4)(F) of the Social Security Act

During the period starting March 11, 2021 and ending on the last day of the first calendar quarter that begins one year after the last day of the emergency period described in section 1135(g)(1)(B) of the Social Security Act (the Act):

Coverage

The state assures coverage of COVID-19 testing consistent with the Centers for Disease Control and Prevention (CDC) definitions of diagnostic and screening testing for COVID-19 and its recommendations for who should receive diagnostic and screening tests for COVID-19.

The state assures that such coverage:

1. Includes all types of FDA authorized COVID-19 tests;
2. Is provided to all categorically needy eligibility groups covered by the state that receive full Medicaid benefits;
3. Is provided to the optional COVID-19 group if applicable; and
4. Is provided to beneficiaries without cost sharing pursuant to section 1916(a)(2)(I) and 1916A(b)(3)(B)(xiii) of the Act; reimbursement to qualified providers for such coverage is not reduced by any cost sharing that would otherwise be applicable under the state plan.

Please describe any limits on amount, duration or scope of COVID-19 testing consistent with 42 CFR 440.230(b).

Maryland Medicaid Fee-For-Service (FFS) provides coverage for a maximum of four over-the-counter tests every rolling 30 days. This count may be exceeded based on medical necessity. To qualify for coverage, the OTC test must be authorized under Food and Drug Administration (FDA) Emergency Use Authorized (EUA) and/or FDA approved.

Applies to the state's approved Alternative Benefit Plans, without any deduction, cost sharing, or similar charge, pursuant to section 1937(b)(8)(B) of the Act.

The state assures compliance with the HHS COVID-19 PREP Act declarations and authorizations, including all of the amendments to the declaration.

Additional Information (Optional):

Reimbursement

The state assures that it has established state plan rates for COVID-19 testing consistent with the CDC definitions of diagnostic and screening testing for COVID-19 and its recommendations for who should receive diagnostic and screening tests for COVID-19.

List references to Medicaid state plan payment methodologies that describe the rates for COVID-19 testing for each applicable Medicaid benefit:

The state is establishing rates for COVID-19 testing pursuant to sections 1905(a)(4)(F) and 1902(a)(30)(A) of the Act.

The state's rates for COVID-19 testing are consistent with Medicare rates for testing, including any future Medicare updates at the:

- Medicare national average, OR
- Associated geographically adjusted rate.

The state is establishing a state specific fee schedule for COVID-19 testing pursuant to sections 1905(a)(4)(F) and 1902(a)(30)(A) of the Act.

The state's rate is as follows and the state's fee schedule is published in the following location :

The state's fee schedule is the same for all governmental and private providers.

The below listed providers are paid differently from the above rate schedules and payment to these providers for COVID-19 testing is described under the benefit payment methodology applicable to the provider type:

Federally Qualified Health Centers (FQHCs)

Additional Information (Optional):

The payment methodologies for COVID-19 testing for providers listed above are described below:

PRA

Disclosure Statement Under the Privacy Act of 1974 any personally identifying information obtained will be kept private to the extent of the law. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid Office of Management and Budget (OMB) control number. The OMB control number for this project is 0938-1148 (CMS-10398 # 75). Public burden for all of the collection of information requirements under this control number is estimated to take up to 1 hour per response. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to CMS, 7500 Security Boulevard, Attn: Paperwork Reduction Act Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

COVID-19 Treatment at section 1905(a)(4)(F) of the Social Security Act

During the period starting March 11, 2021 and ending on the last day of the first calendar quarter that begins one year after the last day of the emergency period described in section 1135(g)(1)(B) of the Social Security Act (the Act):

Coverage for the Treatment and Prevention of COVID

X The states assures coverage of COVID-19 treatment, including specialized equipment and therapies (including preventive therapies).

X The state assures that such coverage:

1. Includes any non-pharmacological item or service described in section 1905(a) of the Act, that is medically necessary for treatment of COVID-19;
2. Includes any drug or biological that is approved (or licensed) by the U.S. Food & Drug Administration (FDA) or authorized by the FDA under an Emergency Use Authorization (EUA) to treat or prevent COVID-19, consistent with the applicable authorizations;
3. Is provided without amount, duration or scope limitations that would otherwise apply when covered for purposes other than treatment or prevention of COVID-19;
4. Is provided to all categorically needy eligibility groups covered by the state that receive full Medicaid benefits;
5. Is provided to the optional COVID-19 group, if applicable; and
6. Is provided to beneficiaries without cost sharing pursuant to section 1916(a)(2)(I) and 1916A(b)(3)(B)(xiii) of the Act; reimbursement to qualified providers for such coverage is not reduced by any cost sharing that would otherwise be applicable under the state plan.

X Applies to the state's approved Alternative Benefit Plans, without any deduction, cost sharing, or similar charge, pursuant to section 1937(b)(8)(B) of the Act.

X The state assures compliance with the HHS COVID-19 PREP Act declarations and authorizations, including all of the amendments to the declaration.

Additional Information (Optional):

Coverage for a Condition that May Seriously Complicate the Treatment of COVID

The state assures coverage of treatment for a condition that may seriously complicate the treatment of COVID-19 during the period when a beneficiary is diagnosed with or is presumed to have COVID-19.

The state assures that such coverage:

1. Includes items and services, including drugs, that were covered by the state as of March 11, 2021;
2. Is provided without amount, duration or scope limitations that would otherwise apply when covered for other purposes;
3. Is provided to all categorically needy eligibility groups covered by the state that receive full Medicaid benefits;
4. Is provided to the optional COVID-19 group, if applicable; and
5. Is provided to beneficiaries without cost sharing pursuant to section 1916(a)(2)(I) and 1916A(b)(3)(B)(xiii) of the Act; reimbursement to qualified providers for such coverage is not reduced by any cost sharing that would otherwise be applicable under the state plan.

Applies to the state's approved Alternative Benefit Plans, without any deduction, cost sharing, or similar charge, pursuant to section 1937(b)(8)(B) of the Act.

The state assures compliance with the HHS COVID-19 PREP Act declarations and authorizations, including all of the amendments to the declaration.

Additional Information (Optional):

Reimbursement

The state assures that it has established state plan rates for COVID-19 treatment, including specialized equipment and therapies (including preventive therapies).

List references to Medicaid state plan payment methodologies that describe the rates for COVID-19 treatment for each applicable Medicaid benefit:

Attachment 4.19B pages 5 (physicians), 7 (advanced practice nurses), 8 (physician assistants), 30 (home health), 33 (outpatient hospital), 32-B (urgent care centers), 35 (pharmacies), and 33-C through 33-E (FQHCs); and Attachment 4.19A pages 2-3 (inpatient hospitals)

____ The state is establishing rates or fee schedule for COVID-19 treatment, including specialized equipment and therapies (including preventive therapies) pursuant to sections 1905(a)(4)(F) and 1902(a)(30)(A) of the Act.

____ The state's rates or fee schedule is the same for all governmental and private providers.

____ The below listed providers are paid differently from the above rate schedules and payment to these providers for COVID-19 vaccines and the administration of the vaccines are described under the benefit payment methodology applicable to the provider type:

Additional Information (Optional):

PRA Disclosure Statement Under the Privacy Act of 1974 any personally identifying information obtained will be kept private to the extent of the law. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid Office of Management and Budget (OMB) control number. The OMB control number for this project is 0938-1148 (CMS-10398 # 75). Public burden for all of the collection of information requirements under this control number is estimated to take up to 1 hour per response. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to CMS, 7500 Security Boulevard, Attn: Paperwork Reduction Act Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.