Office of Health Care Quality

Day Care for the Elderly and Adults with a Medical Disability
10.12.04
10.09.07

Frequently Asked Questions
**Regulation**

1. Q: Which set of regulations do I need to get to ensure my Adult Medical Day Care program is in compliance with the State?
   A: At a minimum, Adult Medical Day Care providers are required to comply with COMAR 10.12.04, Day Care for the Elderly and Adults with a Medical Disability, and COMAR 10.27. The Nurse Practice Act. Depending on the funding source, there may be other regulations which the provider may be required to comply with.

2. Q: COMAR 10.09.07 is another set of regulations for Adult Medical Day Care Services. Does the Office of Health Care Quality enforce these regulations?
   A: No, these regulations are enforced by the Department of Health & Mental Hygiene, Office of Health Services due to funding received by the Adult Medical Day Care provider.

3. Q: Does the Office of Health Care Quality (OHCQ) license and regulate social day (non-medical) programs?
   A: No, the OHCQ does not license or regulate social day programs. If you are interested in Adult Day Care Centers that operate using only a social model (non-medical), please contact your Area Agency on Aging or visit the Maryland Department of Aging website http://www.mdoha.state.md.us.

4. Q: How long do records need to be maintained after a participant is discharged?
   A: The center shall maintain participants' records for at least 5 years from the date of discharge, except as provided in Health-General Article, §4-403, Annotated Code of Maryland. However, if the center receives funding from a reimbursement source, it's the center's responsibility to ensure compliance with the funding source’s requirement as well, which may differ from OHCQ’s requirement.

5. Q: What is required for compliance with COMAR 10.12.04.27 C?
   A: COMAR 10.12.04.27 C states that a participant may not be in transit for more than 1 hour without an opportunity for a rest stop. The center is responsible for documenting the time of when each participant is picked up from home and when the participant is dropped off at the center. The center must also document the time of when the participant left the center and when the participant was dropped off at home. In addition, a rest stop must be offered to any participant who is in transit for more than 1 hour.

6. Q: If the center provides documentation indicating the entire van run was less than 1 hour, is it still necessary to record each participant’s pick up and drop off time?
   A: Yes.

**Office of Health Services Waiver Program**

7. Q: Are all ADMC centers required to receive funding from the Office of Health Services?
   A: No, all day care providers are not required to receive funding from the Office of Health Services. If they do not receive Medical Assistance funding, they would abide by COMAR 10.12.04 or other applicable regulations.

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8. **Q:** Considering the new waiver program that was effective July 1, 2008, how many sets of regulations do ADMC centers have to comply with?
**A:** With the new waiver program, there will be different sets of regulations for which day care centers must comply with. If providers have any of the following enrolled waiver participants in their centers, they will also need to comply with those regulations: Traumatic Brain Injury Waiver (COMAR 10.09.46), Older Adults Waiver (COMAR 10.09.54), Living At Home Waiver (COMAR 10.09.55), Model Waiver (COMAR 10.09.27), New Directions and Community Pathways Waivers (these are DDA – COMAR 10.22.12), in addition to COMAR 10.09.61 which is for the enrollment of recipients into the Medical Day Care Services Waiver.

9. **Q:** What is the current daily reimbursement rate per resident from Medical Assistance?
**A:** For questions regarding reimbursement and Medical Assistance program, please contact Evalyn Curry, Program Supervisor for Medical Day Care at the Office of Health Services at 410-767-1444.

**Licensing & Survey**

10. **Q:** What is the first step in becoming a licensed Adult Medical Day Care provider? **A:**
The first step in the Adult Medical Day Care (AMDC) licensure process is to attend a new provider meeting. This meeting is offered quarterly on the Spring Grove Hospital Campus. To register for this meeting, please call 410-402-8221 or toll free 877-402-8221. In addition, you may visit the OHCQ website’s Adult Medical Day Care section [http://dhmb.state.md.us/ohcq/regulated_programs/amdc.htm](http://dhmb.state.md.us/ohcq/regulated_programs/amdc.htm).

11. **Q:** Are there resources available to assist individuals in the licensure process? **A:**
The OHCQ will walk you through the licensure process, but the OHCQ should not be considered as a consultant. In addition, the following individuals may also be contacted for assistance:

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<tr>
<th>Name</th>
<th>Phone</th>
<th>Position and Department</th>
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<tbody>
<tr>
<td>Stella Odunukwe</td>
<td>410-402-8142</td>
<td>AMDC Health Facility Surveyor Coordinator</td>
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<td>Office of Health Care Quality</td>
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<td>Department of Health and Mental Hygiene</td>
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<tr>
<td>Evalyn Curry</td>
<td>410-767-1444</td>
<td>Medical Assistance Reimbursement</td>
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<td>Program Supervisor for Medical Day Care</td>
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<td>Department of Health and Mental Hygiene</td>
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<tr>
<td>Jim Soucy</td>
<td>410-767-5925</td>
<td>Site Plans Review/Renovations</td>
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<td>General Services Administration (GSA)</td>
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12. **Q:** Is there a template for policies and procedures?
**A:** No, there is not a template for policies and procedures. If you are in need of assistance while developing your policies and procedures, the Office of Health Care Quality strongly recommends that you obtain a consultant, review written materials on how to draft policies and procedures, and/or conduct an internet search on “how to write policies and procedures.”

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13. Q: When do AMDC facilities receive a renewal survey?
A: Surveys are driven by the expiration date of the facility’s license. While our goal is to survey a facility prior to the expiration date of the license, if we are unable to do so due to administrative reasons, a facility’s license stays current until it is revoked or acted on by the Department.

14. Q: Is there a possibility of deemed status for those providers that are CARF (Commission on Accreditation of Rehabilitation Facilities) accredited?
A: Current laws and regulations do not allow for deemed status.

15. Q: How long does it take for a provider to receive a response to a plan of correction (POC)?
A: A provider has 10 days to send in a POC and OHCQ has 10 days to reply. Response times for Immediate Harm and Potential for Harm deficiencies are different and dependent on the situation. However, in the event of administrative or operational delays which are beyond the control of the OHCQ or licensee, the time frame for receipt or submission of the POC shall be reconsidered. If a provider has not received a response in a timely manner they should contact their Surveyor, or Stella Odunukwe at Stella.Odunukwe@maryland.gov or by phone 410-402-8142.

16. Q: What happens if my license expired and I have not, yet, been surveyed?
A: While our goal is to survey a facility prior to the expiration date of the license, if we are unable to do due to administrative reasons, a facility’s license stays current until it is revoked or acted on by the Department. However, State Government Article, §10-226(b) requires that the licensee at least two calendar weeks before a license expires, allow sufficient time for application renewal of the license.

17. Q: Can a provider be licensed for both Adult Medical Day Care and Assisted Living?
A: Yes, a provider can be licensed for both Adult Medical Day Care and Assisted Living. However, the provider must obtain a license for each program and each program must be contained in a dedicated structure or portion of a structure. For additional information on Assisted Living licensure, please contact the Assisted Living Unit at 410-402-8217 or toll free at 877-402-8221. In addition, you may visit the OHCQ website’s Assisted Living section http://dhmh.state.md.us/ohcq/regulated_programs/assisted_living.htm

Nursing
18. Q: ADCAPS are required to be completed “quarterly” – what is the definition of "quarterly"?
A: Quarterly means a rolling 90 day period.

19. Q: Nursing Notes need to be completed "monthly" – what is the definition of "monthly"?
A: Monthly means a rolling 30 day period.

20. Q: How is “semiannually” defined?
A: Semiannually means a rolling 180 day period.

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21. Q: Can ADCAPS substitute for the monthly nursing note? If ADCAPS are done quarterly do you still need to do a monthly progress note in the month the ADCAPS are completed? 
A: No, there is no substitution of the monthly notes and the ADCAPS; one does not take the place of the other. COMAR 10.12.04.14 A (4) documents that at least monthly, the nurse shall observe the health, functional status, and adherence to a prescribed medical regimen and document his or hers observation in the participant’s medical record. This monthly note may not be interchanged for the ADCAP.

22. Q: Does a supervising nurse (RN) have to be onsite at the AMDC at all times? 
A: COMAR 10.12.04.13A(2)(b) As the supervising registered nurse (RN), the RN must be on site sufficient time to meet the needs of the participants, consistent with the Nurse Practice Act.

In the absence of the supervising nurse (RN), the licensed practical nurse (LPN) shall be on site at least 35 hours per week and sufficient to meet resident nursing needs per COMAR 10.12.04.13A(2)(c).

Per the Maryland Nurse Practice Act, the LPN must be in a team relationship with at least one licensed health professional that is not a licensed practical nurse.

COMAR 10.27.10.01B (11). “Definition” “Team relationship” means the practicing of licensed practical nursing only with at least one licensed health professional that is not a licensed practical nurse.

23. Q: What is the role of the LPN in AMDC? Can the LPN write care plan updates every 3 months, assess new admissions or write monthly nursing notes? 
A: The LPN may not do new admissions or initiate a care plan but may update the written care plan every three months. The LPN can document the care s/he provides, but the monthly note includes assessment and evaluation of care and, therefore, needs to be written by the supervising RN. Per the Nurse Practice Act COMAR 10.27.10. 02. A, B, & C, the LPN contributes to the nursing process in a team relationship and, therefore, is present to augment the role of the supervising RN.

24. Q: Can an LPN complete the ADCAPS? 
A: No. The ADCAPS is a comprehensive assessment that must be completed by a Registered Nurse. This includes the initial ADCAPS, the quarterly ADCAPS, and the ADCAPS that is completed as a result of a change in a participant’s health status.

Emergency Preparedness

25. Q: Is Adult Medical Day Care required to have an emergency preparedness plan? 
A. AMDC programs were not a part of the new emergency planning requirements of HB770 for residential providers. However, COMAR 10.12.04.40 does require the center to comply with NFPA 101 Life Safety Code in addition to ensuring that centers have floor plans with evacuation routes.

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26. **Q:** It has been identified that there are two different versions of the ADCAPS - one that includes section VI Therapies (Nursing) and one that does not include this section. Which version is the most current and, therefore, should be used by providers?

**A:** Minor changes were made to the ADCAP form. On page 4, section I, Assessment B. Schedule of Completion, the wording “every month thereafter” was changed and now reads “quarterly thereafter.” This version of the ADCAP does include section VI Therapies (Nursing). The current ADCAP now has a revision date of 02-25-09 located on the bottom left corner. A copy of the ADCAP with instructions can be retrieved from the OHCQ website [http://dhmh.state.md.us/ohcq/regulated_programs/amdc_forms.htm](http://dhmh.state.md.us/ohcq/regulated_programs/amdc_forms.htm). This link is updated monthly.

27. **Q:** It has been identified that, to receive funding from your office, the ADCAPS needs to be completed monthly (p. 4 of the ADCAPS instructions - "The entire assessment is to be completed during the first month of enrollment and every month thereafter.") Is there a reference to this monthly requirement in regulation?

**A:** COMAR 10.12.04.20A Comprehensive assessments (ADCAPS) documents that ADCAPS are to be completed quarterly as long as there is no change in the participant’s condition. The assessment shall include (1) Health status, (2) Functioning status, (3) Participation in activities, (4) Nutritional Status, (5) Psychosocial status and, (6) Home management skills.

In addition, COMAR 10.09.07.03 I documents that the provider shall maintain medical records for each participant which shall include, at the minimum, the following: COMAR 10.09.07.03 I (7) The initial social history, quarterly ADCAPS assessment and, when needed, social service and activity progress notes; and COMAR 10.09.07.03N, Establish a multidisciplinary team consisting of all appropriate medical day care staff who shall: COMAR 10.09.07.03N(2) Determine the medical, psychosocial, and functional status of each participant by conducting quarterly ADCAPS evaluations;

28. **Q:** How does the Office of Health Care Quality define an Adult Medical Day Care Center?

**A:** A Medical Adult Day Care Center means any facility which admits elderly, disabled persons who require part time (at least four hours a day) provision of nursing services, supervision assistance with activities of daily living, a structured activities program, counseling services, and nutritional services. Adult Day Care is designed to give elderly individuals a health care oriented place to be cared for during the day time while continuing to live with their families or in the community. Adult Day Care is meant for people who would otherwise qualify for care in a nursing home.

29. **Q:** As an Adult Medical Day Care provider are we required to validate when a participant leaves for medical appointments?

**A:** COMAR 10.12.04.26 D (3) the center shall maintain the following administrative and fiscal records: (g) the daily schedule of activities; (i) Attendance records.

30. **Q:** As an Adult Medical Day Care provider which regulation are we to comply with related to nursing services? COMAR 10.12.04.13 B (2) or Medicaid Waiver 10.09.07.04 A & C (1) (2) (3) (4)?

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Nursing staff performing nursing services shall comply with the Medicaid Waiver 10.09.07.04 A & C (1) (2) (3) & (4) assuming that nursing staff are providing nursing services to Medicaid Waiver participants. Non Medicaid Waiver participants shall comply with COMAR 10.12.04.13 B (2) (3). Also, keep in mind the registered nurse must comply with COMAR 10.27 the Nurse Practice Act.

31. Q: As an Adult Medical Day Care provider are we required to have medical confirmation that a participant is free from communicable disease before being admitted to the center?
A: Yes. COMAR 10.12.04 10 B (5) documents, Medical confirmation that the individual is free from communicable disease and other active reportable airborne disease.
Acceptable forms of documentation may include: (1) TB skin test, (2) Physicians order, or (3) Chest x-ray

32. Q: As an Adult Medical Day provider are we required to have current and pertinent laboratory results in the medical record related to a participant’s diagnosis?
A: Yes. COMAR10.12.04.26 D (1) The center shall maintain at least the following information for each participant: (j) Admission physical and subsequent additional information.

33. Q: As an Adult Medical Day provider are we required to retain current physician’s orders and a list of the medications if the participant is not administered medications at the center?
A: Yes. COMAR 10.12.04.17 A The center shall include the original or faxed medication order in the participant’s medical record.

34. Q: In an Adult Medical Day Care Center is the nurse required to monitor and assess a participant who is having side effects of medication that are not given at the center?
A: Yes. COMAR 10.12.04.14 A (2) The nurse or designee shall communicate with the participant’s physician to report observed changes in the participant’s health status, including the reaction to medicine, and to obtain current medical orders regarding such items as diet, medications, and treatments.

35. Q: Is an AMDC required to report incident’s that occur in an ADMC to the Office of Health Care Quality?
A. Yes. COMAR 10.12.04.24A Reports and Actions Required in Unusual Occurrences. The center shall immediately report an occurrence such as a communicable disease or food-borne outbreak, poisoning, death, fire, or other unusual incident that threatens the health or safety of any participant or staff member to:
(1) The Office of Health Care Quality

40. Q: Are Adult Medical Day Care Centers required to having a licensed social worker?
A: This requirement is optional under COMAR 10.12.04.15A (4) A licensed social worker shall provide social work services to participants. If the social and emotional needs are identified during the assessment that is required in Regulation .10 of this chapter, a licensed social worker shall be consulted before the establishment of goals to meet those needs.

However, if you are a Medicaid Waiver provider you are required to comply with

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COMAR 10.09.07.04 B. the medical day care center shall also have: (1) A full-time or part-time licensed social worker, who has at least 1 year of experience providing services to adults in a health care setting.

41. Q: Can an Adult Medical Day Care Center discharge a participant immediately without notice?  
A: COMAR 10.12.04.23A Before a center discharges a participant the center shall formulate a discharge plan, including at least a 30-day written advance notice to the participant or participant’s responsible party, and shall assist the participant in obtaining the resources needed to implement the plan. COMAR10.12.04.23B The 30-day written notice of discharge specified in §A of this regulation is not required when (1) The health and safety of the participant or other individuals in the center would be endangered by the continued presence of the participant; (2) The participant has urgent medical needs; or (3) There is an emergency requiring less than 30 days notice, in which case the center shall notify the Department of the discharge and circumstances.

42. Q: As an Adult Medical Day Care Center if the supervising RN has resigned from the facility can the AMDC staff the facility with an agency RN’s(s)? Keep in mind the RNs may vary on a daily basis while ADCAPS are due on a rolling 90 day period. The ADCAP conceivably could be completed by different RNs? 
A: If the center’s supervising nurse (RN) has resigned the center is still required to comply with COMAR 10.12.04.13B (2). The center may contract with a staffing agency to retain a registered nurse. The registered nurse while working in an AMDC must comply with the standards of practice outlined in the nurse practice act as well as the requirements set forth in COMAR 10.12.04.13B(2). Current regulations do not provide a waiver for the absence of the supervising nurse (RN).

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