Maryland
DEPARTMENT OF HEALTH
Wes Moore, Governor · Aruna Miller, Lt. Governor · Meena Seshamani, M.D., Ph.D., Secretary

Office of Health Care Quality
7120 Samuel Morse Drive
Second Floor
Columbia, MD 21046-3422

August 25, 2026

Small Assisted Living Providers
Sent via email to all Meeting Registrants
OHCQ Listening Session May 29, 2026

Dear Assisted Living Provider:

Thank you for your participation in the Office of Health Care Quality (OHCQ) Small Provider Listening Session that took place on May 29, 2026. As a follow up to the meeting, OHCQ is providing answers to the questions raised during the Session. This guidance is intended to assist providers and does not replace applicable statutes or regulations.

Providers raised concerns about the educational requirements associated with obtaining a CLIA Certificate of Waiver. OHCQ has submitted a targeted regulatory amendment that, if adopted, would allow a registered nurse or delegating nurse to sign the applicable CLIA waiver application. The proposal would also add CLIA waiver education to the required 80-hour Assisted Living Manager training course. Until any regulatory change becomes effective, providers remain responsible for complying with current requirements. OHCQ will continue to provide technical assistance regarding the application process.

Providers raised concerns about obtaining Workers' Compensation insurance during the initial licensure process. COMAR 10.07.14.07 requires applicants to provide documentation required by applicable law or the local jurisdiction, which may include verification of Workers' Compensation insurance. A link to the AL requirements can be found here: COMAR 10.07.14.07. In addition, the following are links to the Workers' Compensation Commission and Insurance Information. Providers should contact the Maryland Workers' Compensation Commission or an insurance professional for information regarding coverage requirements.

Providers reported receiving differing guidance from local authorities, consultants, and other organizations regarding requirements that may affect assisted living operations. OHCQ recognizes that inconsistent information can create confusion for providers.

OHCQ is responsible for interpreting and enforcing State assisted living requirements under COMAR 10.07.14. Requirements involving zoning, fire safety, building codes, or other local

matters may fall under the authority of local jurisdictions or other State agencies. Providers are responsible for complying with all applicable requirements.

OHCQ will continue to provide information about assisted living regulatory expectations through provider orientations and other educational resources. Assisted Living Managers may attend these sessions to receive additional guidance on regulatory expectations and how to navigate related local requirements. Registration information is posted on the OHCQ website approximately 30 days before the orientation class. Providers can find upcoming sessions by visiting the OHCQ website: Programs, Assisted Living, then Provider Resources.

Providers raised concerns about securing emergency evacuation or shelter agreements. An Assisted Living Program that is not participating in the Medicaid Waiver, may identify any safe location as an emergency shelter, as long as the location can accommodate the facility's residents for at least 72 hours. The location must have enough space, beds, bathrooms, water, heat, and other basic amenities needed to safely support residents during an emergency. A facility may also identify more than one emergency shelter, such as two separate locations, if one location cannot safely accommodate all residents. Medicaid Waiver Assisted Living Providers must list a licensed location as their backup emergency evacuation site. For further questions, please use this link or call (410) 402-8217.

Providers raised concerns about the cost of obtaining the required menu review by a licensed dietitian or nutritionist. OHCQ understands that obtaining menu review and approval from a licensed nutritionist or dietitian may create an additional cost for providers. This requirement is intended to help ensure that residents receive meals that are nutritionally appropriate and support their health and well-being. Menu review and approval is required every three years. Providers may wish to compare available options and seek services that best meet their program's needs and budget. OHCQ does not endorse any particular dietician or nutritionist. The Maryland Board of Dietetic Practice may be a resource. In addition, the Maryland Academy of Nutrition and Dietetics (MAND) website may be of assistance.

Providers raised concerns about outdated training materials being used by some approved 80-hour Assisted Living Manager training programs. These courses are intended for individuals seeking to become Assisted Living Managers. OHCQ maintains a list of approved training providers, and prospective Assisted Living Managers may review available programs and select the approved course that best meets their needs. OHCQ has submitted a targeted regulatory amendment that would clarify the required curriculum for approved 80-hour Assisted Living Manager courses and require instruction on the applicable requirements of COMAR 10.07.14. The proposed change would also strengthen OHCQ's ability to review approved training programs when concerns arise. Individuals may submit concerns about an approved training provider using our complaint submission form.

Providers raised concerns about situations in which a resident is no longer able to pay for assisted living services. OHCQ will develop a resource page to assist providers with finding support for residents that do not have resources. (1) Medicaid Community Support Waiver; (2)Senior Assisted Living Subsidy Program (SALS) by jurisdiction; (3) local Ombudsman; (4) Adult Protective Services. Providers should also be aware that COMAR 10.07.14.27A(2)(g) *requires an ALP to include in the financial portion of their resident agreement the procedures*

the assisted living program will follow in the event the resident or resident agent can no longer pay for services provided for in the resident agreement or for services or care needed by the resident, including 30 calendar days notice of the resident's discharge to the: (i) Ombudsman within the Department of Aging or local area agency on aging; and (ii) Local Department of Human Services or Adult Protective Services.

Providers identified several areas in which Medicaid waiver requirements can be difficult to navigate alongside assisted living licensure requirements. OHCQ will add links to relevant Medicaid waiver information and training resources to its website. Assisted living programs participating in Medicaid must comply with applicable assisted living licensure requirements under COMAR 10.07.14 as well as applicable Medicaid program requirements. Questions regarding Medicaid eligibility, enrollment, reimbursement, or waiver-specific requirements should be directed to the Maryland Medicaid program. Medicaid representatives also participate in OHCQ provider orientation sessions to provide information to interested providers.

Providers raised concerns regarding the regulatory provisions applicable when an Assisted Living Program has had no residents for 180 days. OHCQ does not have the authority to waive or dismiss regulatory requirements. The purpose of this requirement is to address licenses held by providers who do not intend to operate. OHCQ will evaluate each situation in accordance with COMAR 10.07.14 and the specific facts presented. Providers whose programs have no residents for an extended period are encouraged to contact OHCQ before the 180-day period expires.

Providers raised concerns about cost associated with vaccinations. OHCQ is pleased to announce that a targeted regulation change was submitted to clarify evidence of immunity for MMRV and adds a medical and religious exemption. This will give consistency between nursing homes and assisted living regulations. A link to the Maryland Vaccine Program can be found here for information on how to obtain free/low cost vaccines through the Maryland Vaccine Program. Eligible Marylanders can contact their local health department to check availability, or visit the health.maryland.gov for additional information.

Tuberculosis screening guidance at the federal, state and local level was described as inconsistent. The most current Center for Disease Control and Prevention (CDC) guidelines recommend all U.S. health care personnel be screened for TB upon hire. This screening should include a skin or blood test in addition to a TB symptom evaluation. The guidelines do not recommend annual screening for any healthcare personnel unless there is a known exposure or ongoing transmission at the facility. The one exception is for healthcare personnel with known latent TB who have not been treated (they should receive annual screening for TB symptoms). The State of Maryland has its own TB Prevention and Treatment Guidelines which are nearly identical on this topic (p.68). The CDC TB prevention guidelines incorporated by reference into the AL regs are from 2005. OHCQ will consider a targeted IBR regulation change at a later time.

Providers requested clarification regarding residents with Stage 3 or Stage 4 pressure injuries or skin ulcers. Please refer to COMAR 10.07.14.23B that states, *B. An assisted living program may not provide services to individuals who at the time of initial admission, as established by the initial assessment, would require: (2) Treatment of stage three or stage four skin ulcers;* If a

current resident acquires a stage 3 or higher wound ulcer, the ALPs must obtain a resident-specific waiver from OHCQ.

Providers asked whether an individual who receives nutrition through a gastrostomy tube may be admitted to an Assisted Living Program. A gastrostomy tube (G-tube) does not, by itself, establish that a waiver is required. The Assisted Living Program and delegating nurse must determine, based on the resident's assessment and care needs, whether the program is licensed, staffed, and clinically capable of safely meeting those needs. The delegating nurse has responsibilities within the scope of nursing delegation; however, the Assisted Living Program remains responsible for ensuring compliance with all applicable licensure, staffing, training, and resident-care requirements.

Providers requested information regarding the new licensure requirements for Assisted Living Managers (ALMs). The licensing of ALMs was the result of HB 1034/SB 720 (2022) passed by the Maryland General Assembly. On October 17, 2025, the Health Occupation's Board of Long-Term Care Administrators (BLTCA) proposed new regulations governing the licensure of ALMs. A copy of the proposal is available via the Division of State Documents (DSD). All ALM licensing questions should be directed to the BLTCA. Of note, the Health Occupations Boards license individuals, while OHCQ licenses facilities.

BLTCA Website: https://health.maryland.gov/bonha/Pages/index.aspx
BLTCA Email: mdh.BLTCA@maryland.gov
BLTCA phone: (410) 764-4750

Clarification was requested on the following short topics:

- OHCQ is updating the template Resident Agreement and a new version will be placed on our website.
- The regulations were updated to use calendar days throughout the chapter. Corrective action plans are due within 10 calendar days after receipt of the notice of deficiency.
- The interpretation of "semi-annual" in regards to "conduct semi-annual disaster drills" is 6 months after the last survey inspection.
- A list of approved vendors was requested for the 80-hour ALM course. This information is on the OHCQ website, under Programs, Assisted Living, right margin under Resources and the link can be found via the following link.
- A list of the new requirements for the assisted living providers was requested and this information is on the OHCQ website, under Programs, Assisted Living, right margin under Resources, Information on New COMAR 10.07.14.

Complex topics were raised during the session such as the cost of the delegating nurse, pharmacy reviews if residents have their own pharmacy, rising operational costs, and competitive hourly wages. Please know that OHCQ is committed to work across state agencies and with stakeholders to address these complex challenges and develop coordinated and collaborative solutions.

Lastly, please know that critical infrastructure and viability issues will be studied during the implementation of *HB 945 - Establishment of the Healthcare Quality Improvement Initiative,* which OHCQ supported. Recommendations will be developed and reported to the Governor and the Maryland General Assembly.

OHCQ appreciates your participation, feedback, and your dedication to Maryland's Assisted Living Program.

Please contact the Assisted Living Team if you have further questions. Thank you.

Sincerely,

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