

REGULATION TRACKING
MEDICAID ADVISORY COMMITTEE MONTHLY REPORT
October 23, 2014

COMAR	TITLE	PURPOSE	AELR DATE	DATE OF 1 ST PRINTING IN MD REG	DATE OF FINAL PRINT IN MD. REG.	APPROVED (10 DAYS AFTER FINAL)
10.09.36.03	General Medical Assistance Provider Participation Criteria	The purpose of this proposal is to amend the language of COMAR 10.09.36.03 to bring the regulation in line with statutory documentation.	9/30/14			
10.09.23	EPSDT Services ICFA	The purpose of this proposal is to clarify which services require preauthorization.	10/10/14			
10.09.65.19	Maryland Medicaid Managed Care Program : Managed Care Organizations	The purposes of this proposal are to Implement the mid- year adjustment to the calendar year 2014 MCO's HealthChoice rates and to add a supplemental payment for Hepatitis C drugs.	9/30/14			
10.09.60.01 —.22, 10.09.62.01, 10.09.63.01 —.03 and .06, 10.09.64.05 —.07 and .10, 10.09.65.01 —.05, .08, .10—.12, .14, .15, .20, .21, and .27, 10.09.66.02, .04, .05 and .07,	Primary Adult Care Eligibility Definitions Eligibility and Enrollment MCO Application Managed Care Organizations Access	The purposes of this action are to: 1) Repeal in its entirety COMAR 10.09.60 Primary Adult Care Eligibility as the program ended January 1, 2014; 2) Remove all references to Substance abuse services and the Specialty Mental Health System as they are being combined, substance abuse is being taken out of the MCO benefit package and covered through the Behavioral health ASO; 3) Add language to include rehabilitative services as a covered benefit for the Medicaid expansion population; 4) Clarify that specialty drugs may only be available via mail order; 5) Remove requirement that MCOs provide a durable plastic card; 6) Remove requirement that a paper copy of the provider directory be included as part of the enrollee handbook; 7) Add disease management as a covered service; and 9) Remove obsolete language and update incorrect references	10/3/14			

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10.09.67.01, .04, .06, .12, and .26—.28	Benefits					
10.09.70	Maryland Medicaid Managed Care Program: Non-Capitated Covered Services	The purposes of this proposal are to repeal an obsolete chapter regarding the Specialty Mental Health System, as these services are now addressed in COMAR 10.09.59, and to adopt a new chapter that clarifies all the services that are not the responsibility of the MCOs but are covered by the Department on a fee-for-service basis.	8/21/14	10/3/14		
10.09.80	Community-Based Substance [Abuse] Use Disorder Services	The purpose of this proposal is to amend the current chapter to include all covered community-based substance use disorder services under one chapter. The amendment clarifies the substance use disorder community-based services that are covered under the HealthChoice MCO self-referred process and covered by the Department on a fee-for-service basis.	8/28/14	10/3/14		
10.09.59	[Rehabilitation and Other] Specialty Mental Health Services	The purpose of this proposal is to clarify details of Medicaid's specialty mental health system, including participant access, provider requirements, and services offered.	8/21/14	10/3/14		
10.09.41	Employed Individuals with Disabilities	The purpose of this proposal is to amend the requirements specified in regulations to (1) Extend the certification period associated with the EID program from 6 months to a 12 month certification period and (2) Restore a less restrictive pre-existing premium requirement (current requirement was promulgated, effective 3/1/2014, but not implemented).	9/30/14			
10.09.91	Presumptive Eligibility by Hospitals	The purpose of this proposal is to adopt new regulations that comply with the provisions of the Affordable Care Act that relate to presumptive eligibility by hospitals.	8/28/14	10/3/14		
10.09.02.07	Physicians' Services	The purpose of this proposal is to update the rates in the fee schedule for Physician's Services.	8/21/14	10/3/14		
10.09.49	Telemedicine	The purpose of this action is to repeal the geographic limitations on healthcare services delivered via telemedicine. This amendment is in accordance with SB198/HB802, passed during the 2014 legislative session.	8/18/14	10/3/14		

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10.09.33.04	Health Homes: Conditions for Provider Participation	The purpose of this proposal is to clarify requirements for providers regarding access to real-time pharmacy data.	6/18/14	7/25/14		
10.09.54	Home and Community Based Options Waiver	The purpose of this proposal is to include Medicaid coverage of respite care under this chapter to be offered in both enrolled nursing facilities and assisted living facilities.	7/29/14	9/5/14		
10.09.10	Nursing Facility Services	The purpose of this proposal is to: (1) Extend the cost threshold of 10 percent for providers to request an interim rate change due to higher costs in the Administrative/Routine, Other Patient Care and Capital cost centers to December 31, 2014; (2) Maintain current reimbursement rates for nursing home providers for the period July 1, 2014 -December 31, 2014 consistent with the Program's budget for Fiscal Year 2015; (3) Extend the Interim Working Capital Fund for one year from May 1, 2014 to May 1, 2015; and (4) Classify costs incurred for legal services for establishing financial eligibility or to obtain representation or guardianship of nursing facility residents or their property as non-allowable costs.	6/17/14	7/25/14		
10.09.23.12	Early and Periodic Screening, Diagnosis and Treatment (EPSDT) Services	Repeal regulation due to conflicting effective dates	5/27/14	7/11/14	10/17/14	
10.09.28.12	Residential Rehabilitation for Children in Certain Out-of-Home Placements					
10.09.45	Mental Health Case Management	The purpose of this amendment is to limit the existing Targeted Case Management (TCM) program to adults, the result of creating an equivalent service for children and youth under a new chapter.	5/30/14	7/11/14	9/19/14	10/1/14

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10.09.90	Mental Health Case Management: Care Coordination for Children and Youth	The purpose of this proposal is to create a new chapter 10.09.90, which will apply to providers organized to deliver mental health case management services for children and youth.	5/30/14	7/11/14	9/19/14	10/1/14
10.09.89	1915(i) Community Options for Children, Youth, and Families	The purpose of this proposal is to create a new chapter 10.09.89, which will implement a home and community-based services benefit for children and youth with serious emotional disturbances and their families, authorized under a 1915(i) Medicaid State Plan Amendment.	5/30/14	7/11/14	9/19/14	10/1/14