

**REGULATION TRACKING**  
**MEDICAID ADVISORY COMMITTEE MONTHLY REPORT**  
**October 14, 2015**

COMAR	TITLE	PURPOSE	AELR DATE	DATE OF 1 <sup>ST</sup> PRINTING IN MD REG	DATE OF FINAL PRINT IN MD. REG.	APPROVED (10 DAYS AFTER FINAL)
10.09.10	Nursing Facility Services	The purpose of this proposal is as follows: -To modify the phase-in schedule of the prospective reimbursement methodology. -To modify the implementation dates of the hold harmless provision. -To clarify language related to the hold harmless provision, waiver of minimum occupancy, out-of-State facility reimbursement, appeal process, and exemption from cost reporting. -To correct certain citations. -To decrease Fiscal Year 2016 Medicaid nursing facility services rates by an adjustment factor to be consistent with the Fiscal Year 2016 budget.	10/9/15			
10.09.20	Community Personal Assistance Services	The purpose of this proposal is to modify Medicaid coverage of personal assistance services for individuals who do not require an institutional level of care, in order to cover and pay for services in a manner that is consistent with the Program's coverage of personal assistance services under COMAR 10.09.84 Community First Choice for individuals who require an institutional level of care.	10/9/15			
10.09.24.08-1	Medical Assistance Eligibility	The purpose of this proposal is to amend current regulations regarding the time period during which disposals of assets (other than trusts) must be evaluated so that it is consistent with current Medicaid eligibility policy and current federal requirements.	9/25/15			
10.09.36	General Medical Assistance Provider Participation Criteria	The purpose of this proposal is to update provider participation criteria to require high-risk providers (newly enrolling and re-enrolling DMS/DME and Home Health providers) to undergo a fingerprint-based criminal background check prior to enrollment, a requisite of the enhanced provider screening requirements under the Affordable Care Act. This language aligns with recent federal policy clarification on "Fingerprint-Based Criminal Background Checks."	10/9/15			
10.09.23	Early and Periodic Screening, Diagnosis and Treatment (EPSDT) Services	The purpose of this proposal is to update the per diem rate for participants receiving services in an Intermediate Care Facility for substance use disorder treatment.	9/30/15			
10.09.63.06	MCO: Eligibility & Enrollment	The purposes of this proposal are to: Requires MCOs to notify the Department 90 days prior to the effective date of a provider termination;	8/13/15	9/18/15		

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10.09.64.05 10.09.65.17 10.09.66.06	MCO Application  MCOs  MCO Access	At the Department's discretion, require MCOs to reimburse the Department for the costs of notifying enrollees of their right to change MCOs due to a primary care provider contract termination; Update an incorrect cross reference; Add language to limit MCO applicants from applying to participate in the Program, if there are no underserved areas in the State; Clarify that MCO provider termination surveys are required for all provider types; and Include physician assistants as allowable PCPs.				
10.09.84.06, .23	Community First Choice	The purpose of this proposal is to specify dates by which participant-employed providers of personal assistance may no longer enroll, nor bill, and by which plans of service may no longer include participant-employed providers. It also establishes a requirement for agencies that provide personal assistance services to collect and maintain documentation to verify services rendered.	7/7/15	8/21/15		
10.09.23.04  10.09.28.04	EPSDT Services  Residential Rehab. For Children	The purpose of this proposal is to repeal residential rehabilitation services from regulations to align with the Medicaid State Plan. Maryland will remove residential rehabilitation services from its State Plan with CMS effective July 1, 2015. And, remove residential rehabilitation as a covered service under EPSDT services.	6/25/15	8/7/15		
10.09.49	Telehealth	The purpose of this proposal is to combine the Maryland Telemedicine Program and the Maryland Medicaid Telemental Health Program under the same chapter Telehealth.	6/5/15	7/10/15		
10.09.70	Maryland Medicaid Managed Care Program: Non-Capitated Covered Services	The purpose of this amendment is to update and clarify behavioral health services that MCOs are not required to reimburse as a result of the ASO transition.	5/27/15	7/10/15		
10.09.59	Specialty Mental Health Services	The purpose of this amendment is to update and clarify behavioral health services delivered by specialty mental health providers within the Public Behavioral Health System.	6/12/15	7/24/15		
10.09.75	Maryland Medicaid Managed Care Program:	The purpose of this proposal is to clarify the criteria and processes for the MCO's corrective managed care (CMC) programs and to require MCOs to implement a CMC program.	5/19/15	6/26/15		

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	Corrective Managed Care					
10.09.65.03  10.09.67.04; .07; .27  10.09.69.17  10.09.72.06	MCOs  Benefits  REM  Departmental Dispute Resolution Procedures	The purpose of this action is to: <ol style="list-style-type: none"> <li>1. Remove outdated Value Based Purchasing language;</li> <li>2. Clarify that only over-the-counter emergency contraceptives are covered without a prescription;</li> <li>3. Move coverage of transportation between hospitals from MCO Limitations to Covered Hospital Services;</li> <li>4. Update REM diagnosis codes to ICD10; and</li> <li>5. Clarify that IRO decisions can be appealed by the MCO</li> </ol>	5/14/15	7/10/15		
10.09.02	Physicians' Services	The purpose of this proposal is to align Medicaid coverage of gender reassignment with the Maryland State Employees' Health Benefit program and recent changes in Medicare policy.	11/25/14	1/23/15		