MMAC REGULATIONS REPORT SEPTEMBER 2017

COMAR	TITLE	PURPOSE	AELR DATE	DATE OF 1 ST PRINTING IN MD REG	30-DAY COMMENT PERIOD: COMMENTS REC'D?	DATE OF FINAL PRINT IN MD. REG.	APPROVED (10 DAYS AFTER FINAL)
10.09.04; .09; .53; .87; and .88	Ordering Providers	The purpose of this proposal is to require providers of home health, medical laboratory, private duty nursing, diagnostic testing, and x-ray services to identify by NPI on the claim the ordering provider, who shall be an individual enrolled in the Program with an active status on the date of service, in order for the claim to be paid.	9/14/17	10/27/17 Ant.	10/27/17—11/27/17 Ant.		
10.09.89.1 014	1915(i) Intensive BH Services for Children, Youth, and Families	The purpose of this proposal is to update the listed rates to the 2% increased rate.	9/14/17	10/27/17 Ant.	10/27/17—11/27/17 Ant.		
10.09.80.0	Community-Based	The purpose of this proposal is to update the listed rates to the 2%	9/1/17	10/13/17	10/13/17—11/13/17		
10.09.33.0	SUD Services Health Homes	increased rate. The purpose of this proposal is to update the listed rates to the 2%	9/1/17	Ant. 10/13/17	Ant. 10/13/17—11/13/17		
9	nealth nomes	increased rate.	3/1/1/	Ant.	Ant.		
10.09.10.0 7-1 and .07-2	Nursing Facility Services	The purpose of this proposal is to: (1) Extend the interim working capital fund; and (2) Establish the budget adjustment factor in order to provide a rate increase of 2 percent in accordance with the Fiscal Year 2018 budget.	9/1/17	10/13/17 Ant.	10/13/17—11/13/17 Ant.		
10.09.36.0 3-1	Conditions for Participation—Ho me and Community-Based Settings	The purpose of this proposal is to implement the Centers for Medicare & Medicaid Services' Community Settings Rule. The language enhances community integration requirements and qualities of settings where individuals receive Medicaid home and community-based services. The purpose of the rule is to increase opportunity for personal choices, integration in community life, dignity, privacy, and respect. The proposed regulation also includes a timeline for provider compliance.	9/5/17	10/13/17 Ant.	10/13/17—11/13/17 Ant.		
10.09.96 .01—.12	Remote Patient Monitoring	The purpose of this proposal is to create a new chapter governing medically necessary services via remote patient monitoring to assist Maryland Medicaid participants in managing and controlling their chronic conditions.	9/1/17	10/13/17 Ant.	10/13/17—11/13/17 Ant.		
10.01.04, 10.09.62- 10.09.68, 10.09.71 and 10.09.72	MCOs	The purpose of this proposal is to implement regulations to comply with newly adopted federal regulations impacting MCO requirements and over site. The new requirements include member rights, member materials, appeals and grievances and program integrity.	9/5/17	10/13/17 Ant.	10/13/17—11/13/17 Ant.		

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10.09.12.0 3—.05 and .07	DMS/DME	The purpose of this proposal is to update participation criteria for DMS/DME providers to require Medicare approval status, based on CMS guidance. Additionally, proposal removes corrective shoes as items not covered under this chapter. Finally, this proposal requires the ordering provider to be enrolled in the Maryland Medical Assistance Program and to be identified on the invoice.	6/30/17	9/29/17 Ant.	9/29/17—10/30/17 Ant.		
10.09.36.0	General Medical Assistance Provider Participation Criteria	The purpose of this proposal is to clarify that providers may not seek payment from multiple State agencies for the same service in order to prevent the occurrence of double State funding. Furthermore, this proposal updates language to align with the Maryland Medicaid Provider Agreement.	6/24/17	9/29/17 Ant.	9/29/17—10/30/17 Ant.		
10.09.84.0 2, .05—07, .10, .15, .18—.20, .23, and	Community First Choice	The purpose of this proposal is to clarify certain definitions, provider participation criteria, and covered services, and to change the methodology for payment of personal assistance exceeding 12 hours per day.	6/2/17	10/13/17 Ant.	10/13/17—11/13/17 Ant.		
10.09.27.0 1 and 10.09.47.0 3	Update hospital references	The purpose of this proposal is to correct outdated references to the hospital services regulations.	5/26/17	7/7/17	7/7/17—8/7/17	9/15/17	9/25/17
10.09.80.0 2, .03, and .05	Community-based SUD	The purpose of this proposal is to add references to COMAR 10.63, a set of regulations from the Behavioral Health Administration (BHA) that outlines requirements for Behavioral Health Providers. These references will require Medicaid providers to be in compliance with BHA regulations.	5/12/17	7/7/17.	7/7/17—8/7/17	9/15/17	9/25/17
10.09.49.0 2, .04— .07, .09— .11	Telehealth	The purpose of this proposal is to clarify and update the chapter based on administrative simplifications and clarifications. An additional purpose of this proposal is to expand permitted distant site providers in an effort to increase access to substance use disorder services via telehealth.	5/8/17	7/7/17	7/7/17—8/7/17		
10.09.03.0 1, .03—.07	Pharmacy	The purpose of this proposal is to update the Department's reimbursement methodology to pharmacy providers as required by the CMS Covered Outpatient Drug final rule (CMS-2345-FC), which mandates the transition from an Estimated Acquisition Cost to an Actual Acquisition Cost as the basis for the State Medicaid pharmacy ingredient cost reimbursement. The proposed action also removes unnecessary references to the Primary Adult Care	4/10/17	7/7/17	7/7/17—8/7/17	9/15/17	9/25/17

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		Program					
10.09.79.0 1—.08	Presumptive Eligibility for Correctional Facilities	The purpose of this proposal is to allow state and local correctional centers to conduct Maryland Medicaid presumptive eligibility determinations for justice-involved individuals leaving a correctional center.	4/19/17	5/26/17	5/26/17—6/26/17		
10.09.44.0	Programs of All- Inclusive Care for the Elderly (PACE)	The purpose of this action is to allow more than one PACE provider to operate in the State.	3/30/17	5/12/19	5/12/17—6/12/17		

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