



MEDICAL CARE POLICY ADMINISTRATION

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

201 WEST PRESTON STREET • BALTIMORE, MARYLAND 21201

Parris N. Glendening
Governor

October 16, 1998

Martin P. Wasserman, M.D., J.D.
Secretary

MARYLAND MEDICAL ASSISTANCE PROGRAM
Personal Care Services Transmittal No. 35

TO: Personal Care Case Monitoring Agencies
Personal Care Provider Agencies

FROM: Joseph M. Millstone, Director *JM*
Medical Care Policy Administration

NOTE: Please ensure that appropriate staff members in your organization are informed of the contents of this transmittal.

RE: Notice of Withdrawal of Previously Proposed Amendments to Regulations .01, .03, .05, and .07 and Notice of Revised Proposed Amendments to Regulation .07 Under COMAR 10.09.20 Personal Care Services - Fee Increase

ACTION:
Proposed Regulations

EFFECTIVE DATE:
1/1/99

WRITTEN COMMENTS TO:
Michele Phinney, 201 W. Preston St., Rm 538
Baltimore, Maryland 21201
Fax (410) 767-6483 or call
(410) 767-6499

PROGRAM CONTACT PERSON:
Douglas C. Sommers, Chief
Division of Long Term Care Services
(410) 767-1444

COMMENT PERIOD EXPIRES November 9, 1998

The Secretary of the Department of Health and Mental Hygiene is withdrawing proposed amendments to Regulations .01, .03, .05, and .07 under COMAR 10.09.20 Personal Care Services. These amendments were included in Personal Care Services Transmittal No. 33, dated June 29, 1998, and were published in the Maryland Register (Vol. 25, Issue 15) July 17, 1998. These proposed amendments would have clarified certain definitions, revised limitations and revised invoice processing requirements.

(Continued on reverse side)



It is now being proposed to amend only Regulation .07 to increase the fee for Level 3 personal care services and increase fees for case monitoring services. (These rate increases are in effect as of July 1, 1998 through December 31, 1998 under emergency status approved by the Joint Committee on Administrative, Executive, and Legislative Review.) These amendments change the existing fee schedule as follows:

- Increase the Level 3 maximum fee from \$25 to \$50 per day of personal care delivered by personal care providers and personal care provider agencies.
- Establish new monthly case monitoring service maximum fees for four specific jurisdictions and all remaining counties as a group.

The proposed amendments, as published in the October 9, 1998, Maryland Register, are attached.

JMM:mfd
Attachment

PROPOSED ACTION ON REGULATIONS

- (1) Springfield Hospital Center:
 - (a) Inpatient — per day [\$378]
 - (text unchanged)
- (12) ... Grove Hospital Center:
 - (a) Inpatient per day [93] \$413,
 - (b) Domestic care — per day [\$103] \$105;
- (13) Upper ... Community Health Center: inpatient — per day [\$320] \$382;
- (14) Bradenburg ... inpatient — per day... [\$273] \$285;
- (15) Holly Center: inpatient per day... [\$206] \$252;
- (16) Potomac ... inpatient — per day [\$229] \$228;
- (17) Rosewood ... inpatient — per day... [\$367] \$376.

Benefit (+) Cost (-)	Magnitude
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- D. On regulated industries or trade groups:
 - (1) Personal Care Providers and Provider Agencies (+) \$2,000,000
 - (2) Case Monitoring Agencies (+) \$ 578,760
- E. On other industries or trade groups: NONE
- F. Direct and indirect effects on public: NONE

III. Assumptions. (Identified by Impact Letter and Number from Section II).

A. Payment for Level 3 personal care services will increase from \$25 to \$50 per day. It is projected that program costs will increase by \$25 per day for an average 360 cases per day during the period January 1, 1999, through June 30, 1999, and that approximately 40 new cases will receive services at a cost of \$50 per day, for a total increase of approximately \$2,000,000. Fifty percent of this amount is federal funds.

In addition, case monitoring fees will increase by an average of \$53 per case per month. Local health department providers certify State match and will receive \$26.50 additional in federal funds. It is projected that 3,640 fees per month will be paid during the period January 1, 1999, through June 30, 1999, resulting in additional federal funds payments of \$578,760.

Total impact on the Medical Assistance Program is therefore \$1,000,000 general funds, \$1,578,760 federal funds.

D(1). Program payments to providers of Level 3 services will increase by approximately \$2,000,000 during the period January 1, 1999, through June 30, 1999, as indicated in item A.

D(2). Local health departments will receive additional federal funds payments of \$578,760 for case monitoring services during the period January 1, 1999, through June 30, 1999, as indicated in item A.

Economic Impact on Small Businesses

The proposed action has minimal or no economic impact on small businesses.

Opportunity for Public Comment

Comments may be sent to Michele A. Phinney, Regulations Coordinator, O'Connor Building, 201 West Preston Street, Room 521, Baltimore, Maryland 21201, or fax to (410) 333-7687, or call (410) 767-6499. These comments must be received by November 9, 1998.

.07 Payment Procedures.

- A. (text unchanged)
- B. Payment to personal care providers shall:
 - (1) — (2) (text unchanged)
 - (3) Be made according to the following fee schedule for personal care services:

Description	Maximum Fee
Day of Personal Care — Level 1	\$10
Day of Personal Care — Level 2	20
Day of Personal Care — Level 3	[25] 50
Day of Training	10

- (4) — (6) (text unchanged)
- C. Payments to personal care provider agencies shall be:
 - (1) — (2) (text unchanged)
 - (3) Made according to the following fee schedule:

Description	Maximum Fee
Day of Personal Care (Agency) — Level 1	\$10
Day of Personal Care (Agency) — Level 2	20

MARTIN P. WASSERMAN, M.D.
Secretary of Health and Mental Hygiene

Subtitle 09 MEDICAL CARE PROGRAMS

10.09.20 Personal Care Services

Authority: Health-General Article, §§2-104(b), 15-103, and 15-105, Annotated Code of Maryland

Notice of Proposed Action
(98-321-P)

The Secretary of Health and Mental Hygiene proposes to amend Regulation .07 under COMAR 10.09.20 Personal Care Services. The Secretary of Health and Mental Hygiene is withdrawing previously proposed amendments to Regulations .01, .03, .05, and .07 under COMAR 10.09.20 Personal Care Services which were published in 25:15 Md. R. 1206 — 1207 (July 17, 1998).

Statement of Purpose

The proposed amendments are required to establish a payment increase for Level 3 personal care services consistent with the Maryland Medical Assistance Program's budget for fiscal year 1999. In addition, the amendment increases case monitoring fees.

Comparison to Federal Standards

There is no corresponding federal standard to this proposed regulation.

Estimate of Economic Impact

I. Summary of Economic Impact. These amendments will set new Level 3 fees for personal care providers and provider agencies, and increase the fee for case monitoring agencies.

II. Types of Economic Impacts.	Revenue (R+/R-) Expenditure (E+/E-)	Magnitude
A. On issuing Agency: Medical Assistance Program	(E+)	\$2,578,760
B. On other State agencies:	NONE	
C. On local governments:	NONE	

Description	Maximum Fee
Day of Personal Care (Agency) — Level 3	[25] 50
(4) — (5) (text unchanged)	
D. (text unchanged)	
E. Payments to case monitoring agency providers shall be:	
(1) (text unchanged)	
(2) Made according to the following fee schedule for personal care case monitoring services:	

Description	Maximum Fee
Month of case monitoring (Agency):	[\$150] 215
Baltimore City	
Baltimore County	[160] 200
Montgomery County	[240] 290
Prince George's County	[190] 255
Other counties	[150] 185
(3) (text unchanged)	

MARTIN P. WASSERMAN, M.D.
Secretary of Health and Mental Hygiene

Subtitle 09 MEDICAL CARE PROGRAMS

Agency Health-General Article, §§2-104(b), 15-103, and 15-104
Annotated Code of Maryland

Notice of Proposed Action
[98-275-P]

The Secretary of the Department of Health and Mental Hygiene proposes to amend Regulation .01 under COMAR 10.09.62 Maryland Medicaid Managed Care Program: Definitions; Regulations .01, .02, and .04 under COMAR 10.09.63 Maryland Medicaid Managed Care Program: Eligibility and Enrollment Regulation .06 under COMAR 10.09.64 Maryland Medicaid Managed Care Program: MCO Application Regulations .02, .03, .05, .08, .11, .11-1, .11-2, .15, .16, and .20 and to adopt new Regulations .24 and .25 under COMAR 10.09.65 Maryland Medicaid Managed Care Program: Managed Care Organizations; Regulation .01 under COMAR 10.09.66 Maryland Medicaid Managed Care Program: Access; Regulations .01, .04, .06, .07, .10, .13, .21, and .28 under COMAR 10.09.67 Maryland Medicaid Managed Care Program: Benefits; Regulation .01, .02, .09, .10, and .14 under COMAR 10.09.68 Maryland Medicaid Managed Care Program: Rare and Expensive Case Management and Stop Loss Case Management Regulation .10 under COMAR 10.09.70 Maryland Medicaid Managed Care Program: Specialty Mental Health System; and Regulations .01, .02, .03 under COMAR 10.09.72 Maryland Medicaid Managed Care Program: Departmental Administrative Procedures, to become effective January 1, 1999.

Statement of Purpose

The purpose of this action is to amend the regulations governing HealthChoice, the Maryland Medicaid Managed Care Program and respond to changes prompted by the 1998 General Assembly's passage of several pieces of legislation affecting the Program. The amendments are for continuation of the expansion of the Rare and Expensive Case Management Program, as well as the implementation of dental services for pregnant women and enhanced dental care for children.

The amended regulations strengthen the Department's ability to enforce outreach requirements consistent with the recently enacted HB922 and SB650. Also, the amended regulations implement SB38 by changing the definition of historic provider to include durable medical equipment providers licensed as residential service agencies.

The amendments address problems in the HealthChoice Program identified during the 1998 legislative session by the MCOs or various advocacy and recipient groups. Although not the product of legislation, the problems need immediate attention and these changes address the problems identified. They include: (1) the need to use a nationally recognized substance abuse assessment instrument, (2) the need to specify time frames for preauthorization and delivery of durable medical equipment and supplies approval and modification of time limits, and processes, (3) coverage of a newborn visit in the hospital by an out-of-network provider, (4) continuity of care provisions for special needs children receiving occupational, physical, and speech therapy when they enter an MCO, (5) the need to specify timelines for MCO response to provider complaints, (6) timelines for provision of encounter data; and (7) the need to streamline the Stop Loss Program.

Additionally, COMAR 10.09.69.10 is amended by deleting five optional services which are defined more appropriately as "long-term care". These services were originally included to provide services to the traumatically brain injured (TBI) population; however, this population is being removed from the REM Program while the program drafts a request for a waiver from the Health Care Financing Administration for a special program for the TBI.

Finally, these amendments include various clean-up and nonsubstantive changes.

Comparison to Federal Standards

There is no corresponding Federal standard to this proposed regulation.

Estimate of Economic Impact

I. Summary of Economic Impact. The regulations add funding for enhanced dental services for children and dental care coverage for pregnant women, and require additional children to receive case management under the Rare and Expensive Case Management Program.

II. Types of Economic Impacts

	Revenue (R+/R-)	Expenditure (E+/E-)	Magnitude
A. On issuing agency			
(1) Dental	(E-)		\$ 860,000
(2) REM	(E-)		1,000,000
B. On other State agencies	NONE		
C. On local governments	NONE		
	Benefit (+)	Cost (-)	Magnitude
D. On regulated industries			
Trade groups			
Managed care organizations			860,000
E. On other industries or trade groups			
Case management industry			\$1,000,000
F. Direct and indirect effects on public			
		NONE	

Assumptions. (Identified by Impact Letter and Number in Section III)

A. The fiscal impact includes an addition of \$860,000 for the proposed period for improving access to dental services.