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Baltimore and Howard Counties

Education, Health, and Environmental Affairs
Committee

Executive Nominations Committee

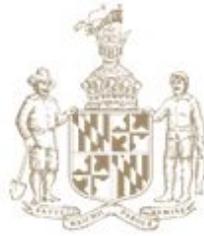
Joint Committee on Ending Homelessness

Chair

Joint Committee on Fair Practices and
State Personnel Oversight

Chair

Howard County Senate Delegation



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Support SB733: Public Health - Care of Medically Fragile Individuals (Channing's Law)

Background:

- “Medically fragile individuals” are anyone under the age of 21 with a complex medical condition.

The Issue:

- These individuals require professional nurse monitoring or other parental supervision on a 24-hour basis, otherwise they may have life-threatening complications or other serious health deteriorations.

What SB733 does:

- This bill would require the Office of Health Care Quality (OHCQ) to establish a training program and a skills review and check for nurses who care for medically fragile individuals in their homes.
- The legislation details the qualifications and selections process for the instructors in the training program, as well as the fee charged to those participating in the training and skills review.
- Finally, the bill tasks the OHCQ with monitoring compliance with this legislation.

Why is SB733 needed?

- Currently, there is a shortage of licensed practical nurses who meet the required criteria for Medicaid participation with medically fragile individuals.
- Without the proper care at home, medically fragile individuals often have no choice but to return to the hospital, which is a very costly option.
- This bill aims to close the gap and to provide support to medically fragile individuals as well as their families.

Additional information:

- Maryland, one of 16 states in the country and the only state in this geographic region projected to have a nursing shortage in 2025, according to the U.S. Health Resources and Services Administration.

- As of December 31, 2017, there were 583 individuals younger than age 21 who were identified as medically fragile who received private duty nursing services from Medicaid in calendar 2017.
- Total expenditures for this population in calendar 2017 totaled \$69.6 million. Total includes \$26.1 million to cover the cost of 271 inpatient hospital stays.
- In 2017, a total of 66 readmissions occurred within 30 days of discharge, a readmission rate of 24%.