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TO: The Honorable Delores G. Kelley, Chair  
Members, Senate Finance Committee

FROM: Danna L. Kauffman  
Pamela Metz Kasemeyer

DATE: January 25, 2022

RE: **SUPPORT** – Senate Bill 28 – *Home- and Community-Based Services – Waiver – Participation and Applications*

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On behalf of the LifeSpan Network and the Maryland Association of Adult Day Services (MAADS), we **support** Senate Bill 28. Senate Bill 28 modifies the cap on home- and community-based services from a flat 7,500 to no fewer than 7,500 participants. The bill also states that if the Maryland Department of Health (MDH) maintains a waiting list or registry, each month it must send a waiver application:

1. If there are fewer than 600 individuals on the waiting list or registry, to all individuals on the waiting list or registry; and
2. If there are 600 or more individuals on the waiting list or registry, to at least 600 individuals on the waiting list or registry.

Lastly, the bill states that a waiver application that is sent by MDH must clearly state that the applicant must submit the application within six weeks after receiving the application and that the applicant is required to meet the eligibility criteria for participation in the waiver within six months after submitting the application.

It is our understanding that Maryland's current waiting list (Services Registry) contains approximately 22,000 individuals and that Maryland currently only has enrolled or budgeted for approximately 4,500 individuals, far fewer than the 7,500 allowable cap. Often, individuals on the waiting list either end up in a more costly nursing home or pass away before receiving waiver services.

Since inception, Maryland has never funded waiver services to the extent permitted by law. As Maryland's aging population increases, Maryland must ensure adequate availability to

affordable services and housing. As is evident by the size of the waiting list, demand for services remains extremely high. Therefore, we strongly support Senate Bill 28 which seeks to eliminate the waitlist to ensure that individuals have adequate options to “age-in-place.”

However, it is important to note that this is a two-part issue. The first part is ensuring that individuals have access to services and the opportunity to apply for the waiver program. However, the second part is ensuring that, after an application is submitted, it is processed in a timely manner to receive services. Currently, many applicants (and providers) are experiencing a backlog in having service plans approved by MDH. An individual cannot begin to receive services until that plan is approved. Too often, many are now waiting months for those plans to be approved and cannot access services, placing a strain on both the individual and the provider. Another issue affecting the ability to receive waiver services is provider availability. Low reimbursement and high administrative demands make the program unaffordable for many providers to be able to participate. The State needs to address both sides of the equation.

**For more information call:**

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