

STATE OF MARYLAND DHMH

Maryland Department of Health and Mental Hygiene

201 W. Preston Street • Baltimore, Maryland 21201

Martin O'Malley, Governor - Anthony G. Brown, Lt. Governor - Joshua M. Sharfstein, M.D., Secretary

April 4, 2014

The Honorable Edward J. Kasemeyer Chairman Senate Budget and Taxation Committee 3 West Miller Senate Office Bldg. Annapolis, MD 21401-1991 The Honorable Norman H. Conway Chairman House Appropriations Committee 121 House Office Bldg. Annapolis, MD 21401-1991

Re: 2013 Joint Chairmen's Report (p. 58), M00B01.03 – October 2013 Report on Mandated Inspection Levels

Dear Chairmen Kasemeyer and Conway:

Pursuant to the 2013 Joint Chairmen's Report (p. 58), the Department of Health and Mental Hygiene (the Department) is required to report, on a quarterly basis, the Office of Health Care Quality's (OHCQ) inspection levels for entities under the Department's purview.

The budget committees requested, that for each type of health care facility including forensic laboratories licensed by OHCQ, the Department should provide: (1) the number of licensees; (2) the number of initial and renewal surveys completed by OHCQ; (3) the number of complaints received by the agency; and (4) the number of complaints investigated. The Department is completing its fiscal year 2013 Annual Report and Staffing Analysis. Therefore, we report on our progress in meeting performance measures that are discussed in OHCQ's Annual Report and Staffing Analysis in a subsequent report. Lastly, the report discusses programmatic changes made within OHCQ to improve inspection levels.

I hope this information is helpful. If you have any questions or need additional information on this subject, please do not hesitate to contact Ms. Allison Taylor, Director of Governmental Affairs, at (410) 767-6480.

Sincerely,

Joshua M. Sharfstein, M.D.

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Secretary

Enclosure

cc: Patricia Tomsko Nay, M.D.

Patrick Dooley, M.A. Allison Taylor, M.P.P., J.D.

Department of Health and Mental Hygiene Office Of Health Care Quality 2013 Joint Chairmen's Report Page 58 State Fiscal Year 2014

Introduction

The Office of Health Care Quality (OHCQ) is the agency within the Department of Health and Mental Hygiene (Department) charged with monitoring the quality of care in Maryland's 14,452 health care facilities and community-based programs. The OHCQ licenses and certifies health care facilities; conducts surveys to determine compliance with state and federal regulations; and educates providers, consumers, and other stakeholders through written materials, websites, and presentations.

In an effort to address the agency's inability to fulfill its regulatory requirements as mandated by the Maryland General Assembly, in January 2013 the OHCQ implemented a strategic planning process that included an evidence-based review of the survey protocols in the context of the statutory and regulatory requirements. One of the broad organizational goals is regulatory efficiency, that is, how to best use limited resources to fulfill OHCQ's mission. Interventions for regulatory efficiency throughout the agency have included reviewing regulatory and statutory requirements; considering accreditation with oversight, where appropriate; revising survey processes, where appropriate; revising initial and on-going employee training; streamlining the hiring process; improving recruitment efforts; simplifying the provider application process; sustaining an internal quality improvement process; interacting proactively with stakeholders and providers; utilizing social marketing; and maximizing information management. OHCQ continually strives to protect the health and safety of vulnerable populations while efficiently and effectively utilizing limited resources.

Agency-wide Changes

Regulatory Changes

The OHCQ has engaged in a comprehensive review of regulations for assisted living, nursing homes, and adult medical day care providers. These revised regulations are the culmination of an extensive stakeholder process over several years. These proposed regulations were posted for informal public comment on June 11, 2013, and will subsequently be published in the Maryland Register as part of the formal regulatory process. After receiving extensive comments on the nursing home and assisted living regulations, OHCQ is currently working with stakeholder organizations, providers, and other state agencies to finalize them. In the coming months OHCQ will post these regulations for informal comments on the Department's website.

This regulatory review also involves an evidence-based comparison of the federal and State requirements for renewal survey frequency for each provider type. For example, the federal requirement for surveying home health agencies is every three years, but the State regulations require annual surveys. Based on the history of the industry, current trends, the number of complaints, the scope and severity of deficiencies, and the overall quality of care, there is no evidence that the State requirements should be more stringent than the federal requirements for this provider type. The end result of this analysis will be a list of revised State regulations regarding the frequency of mandated renewal surveys. OHCQ anticipates these proposed regulations by June 2014.

Staffing Changes

Like other state agencies, the OHCQ is facing the challenge of fifty percent of employees being eligible for retirement now or in five years. OHCQ has proactively taken steps to lessen the impact of these retirements including increasing staff retention, streamlining hiring processes, revising new staff orientation and training, and improving recruitment efforts. These interventions have allowed OHCQ to fill twice the usual numbers of open positions over the past six months.

An intervention that will serve OHCQ well moving forward is the implementation of systems and processes that are not dependent on a specific employee. When OHCQ loses an employee's institutional memory and knowledge of processes, the remaining structure will allow a new individual to step in and maintain the system.

Information Management

For many years the OHCQ utilized existing federal software to manage survey activities for all federal programs and selected state programs. When data is needed for any of these programs, it is simply a matter of running a standard report or querying the system to get the information. For those state programs that are not in the system, duplicative databases, spreadsheets, or paper records are maintained and statistics are manually calculated. Over the past year, OHCQ has been adding the remaining state programs into the federal software to more efficiently manage large volumes of information. OHCQ anticipates the transition to the existing federal software will be completed by March 2014.

Program-Specific Initiatives

All units within OHCQ are implementing the above interventions as they pertain to each program. Some of the program-specific initiatives in the assisted living and developmental disabilities units are highlighted below.

Assisted Living Facilities

In addition to completing different types of surveys concurrently and cross-training assisted living surveyors and professional staff, a significant improvement in the survey process was the development of the targeted survey for assisted living programs. Neither the statute nor the regulations describe the content and requirements of the annual survey. Over the years many tasks had been added to the annual survey process. Through an evidence-based review of the process and analysis of the deficiencies, OHCQ identified six main tasks that are included in the annual survey. These include (1) review of the delegating nurse contract; (2) review of the delegating nurse's function; (3) review of the staffing plan and staff credentials; (4) complete observation and interviews to ensure no residents are at risk; (5) conduct a physical site inspection; and (6) review the service plans.

The steps that were deleted from the survey process did not routinely yield significant deficiencies; furthermore, if a program triggers in any of these six areas, these other steps are still taken. Focusing the survey on these six tasks ensures that the main processes are in place to maintain the health and safety of the residents while decreasing the number of hours required for each annual survey.

The OHCQ sought provider and stakeholder input while developing the targeted survey. A pilot program with selected providers yielded valuable information that was used to refine the process. OHCQ will continue to educate providers and stakeholders about this new process and anticipates full implementation of the targeted survey by April 2014.

Developmental Disabilities Unit

The Developmental Disabilities (DD) Unit has undergone extensive process improvement in the past year to more effectively and efficiently protect the health and safety of individuals receiving services. Starting January 1, 2014, OHCQ assumed responsibility for the licensure of DD providers. This streamlines the licensure processes, improves communication with providers, facilitates the completion of surveys, and establishes the OHCQ as the agency responsible for these tasks.

As in the assisted living unit, the DD unit developed a more focused and efficient survey process. OHCQ has written internal policies and procedures, trained the staff, coordinated with other state agencies, and prepared the providers for implementation in January 2014. The tasks include: (1) contacting the governing body president; (2) verifying the approved quality assurance plan; (3) verifying the delegating nurse contract; (4) verifying the incident reporting process; (5) verifying a contract with an approved professional to develop and monitor behavior plans; (6) reviewing standing committee membership and function; (7) reviewing individual plans, 45-day reviews, behavior plans, and personal finances; (8) visiting multiple sites for each provider; and (9) interviewing individuals to verify satisfaction with the services provided.

Survey and Licensure Data by Unit

The charts below provide data for FY 2013 and for the first quarter of FY 2014 for the various types of health care facilities that OHCQ licenses or certifies.

Long-Term Care Unit

The Long-Term Care Unit ensures that legally-established State licensure and Medicare and Medicaid standards are maintained for nursing homes through unannounced on-site surveys, follow-up visits, and complaint investigations. Additionally, the unit ensures that the Intermediate Care Facilities for individuals with intellectual disabilities and the Forensic Residential Centers comply with all applicable State and local laws and regulations through unannounced on-site surveys, follow-up visits, and complaint investigations.

Nursing Homes (233 licensees)	1 st Qtr FY 13	2 nd Qtr FY 13	3 rd Qtr FY 13	4 th Qtr FY 13	Total FY 13	1 st Qtr FY 14
Initial Surveys	1	1	0	1	3	1
Renewal Surveys	57	46	49	64	216	63
Complaints Received	765	672	731	784	2952	807
Complaints Investigated	467	576	799	773	2615	644
Comments: Federal surveys are required annually and as of 10/01/2000, State surveys are required twice a year						

Intermediate Care Facilities for Individuals with Intellectual Disabilities (2 licensees)	1 st Qtr FY 13	2 nd Qtr FY 13	3 rd Qtr FY 13	4 th Qtr FY 13	Total FY 13	1 st Qtr FY 14
Initial Surveys	0	0	0	0	0	0
Renewal Surveys	0	1	0	1	2	0
Complaints Received	6	9	8	15	38	10
Complaints Investigated	11	10	9	5	35	14
Comments: Federal surveys are required every year and State surveys are required every year						
Forensic Residential Centers (2 licensees)	1 st Qtr FY 13	2 nd Qtr FY 13	3 rd Qtr FY 13	4 th Qtr FY 13	Total FY 13	1 st Qtr FY 14
Initial Surveys	0	0	0	0	0	0
Renewal Surveys	0	1	0	1	2	0
Complaints Received	1	1	0	0	2	0
Complaints Investigated	1	1	0	0	2	0
Comments: No federal survey requirements; State surveys are required every year, COMAR 10.07.13.04 and 10.22.02.04(c)						

Assisted Living Program Unit

The Assisted Living Unit is responsible for the licensure and regulation of all assisted living facilities in the state of Maryland. In accordance with interagency agreements, the Assisted Living Unit has delegated certain aspects of its monitoring and inspections to the Maryland Department of Aging, the Department of Veterans Affairs, and local health departments.

Assisted Living (1406 licensees)	1 st Qtr FY 13	2 nd Qtr FY 13	3 rd Qtr FY 13	4 th Qtr FY 13	Total FY 13	1 st Qtr FY 14
Initial Surveys	37	21	49	51	158	24
Renewal Surveys	92	53	133	118	396	88
Complaints Received	166	121	181	222	690	197
Complaints Investigated	207	123	196	211	737	145
Comments: No federal survey requirements; State surveys are required every year, COMAR 10.07.14.12(d)						

Adult Medical Day Care Unit

The Adult Medical Day Care (AMDC) Unit ensures that legally established State licensure standards are maintained for Adult Medical Day Care Centers for the Elderly and Medically Handicapped Adults. This unit provides regulatory oversight via unannounced on-site surveys, follow-up visits, and complaint investigations.

Adult Medical Day Care (114 licensees)	1 st Qtr FY 13	2 nd Qtr FY 13	3 rd Qtr FY 13	4 th Qtr FY 13	Total FY 13	1 st Qtr FY 14
Initial Surveys	1	8	2	0	11	3
Renewal Surveys	3	3	3	21	30	11
Complaints Received	2	4	0	0	6	1
Complaints Investigated	0	1	2	2	5	1
Comments: No federal survey requirements; State surveys are required every two years, COMAR 10.12.04.07(a)						

Developmental Disabilities Unit

The Developmental Disabilities Licensure Unit is the licensing and monitoring agent for the Developmental Disabilities Administration (DDA). Through periodic surveys, the unit ensures regulatory compliance with community-based providers operated for the benefit of individuals with developmental disabilities receiving services in the State. The community of providers for the developmentally disabled population in the State continues to grow to meet an expanding need for services. Those programs that include services offered to children that require oversight are coordinated with the Governor's Office for Children. The unit completes on-site and internal investigations of reported deaths of individuals funded for community-based services through DDA to review and ensure the adequacy of care at the time of death. The DD Unit completes both on-site and administrative complaint investigations, though the latter have historically not been tracked or reported. Beginning January 1, 2014, the DD unit will track administrative complaint investigations to more accurately reflect the work that is being completed.

Developmental Disabilities (218 agencies with 3,134 sites)	1 st Qtr FY 13	2 nd Qtr FY 13	3 rd Qtr FY 13	4 th Qtr FY 13	Total FY 13	1 st Qtr FY 14
Initial Surveys	0	1	0	3	4	0
Renewal Surveys	7	9	9	27	52	9
Complaints Received	815	916	913	962	3606	1407
Complaints Investigated On-site	62	64	74	95	295	65
Comments: No federal survey requirements; State surveys of all sites are required every year, HG 7-909(b)						

Hospitals, HMOs & Patient Safety Unit

The Hospitals, HMOs, and Patient Safety Unit provides oversight for the regulation of acute care and specialty (i.e., psychiatric, chronic, special rehabilitation) hospitals, residential treatment centers, health maintenance organizations (HMOs), and hospitals within correctional facilities. The unit began surveying transplant centers in Maryland on behalf of the Center for Medicare and Medicaid Services (CMS) in 2009.

Responsibilities of the unit include the investigation of complaints filed against these providers; the annual survey and revisit surveys of health maintenance organizations; hospitals within correctional facilities; federally-mandated validation surveys, and complaint investigations of hospitals and residential treatment centers; investigation of all deaths that occur in State-operated residential treatment centers and psychiatric hospitals; review of all self-reported incidents that occur at these providers; investigation of complaints against HMOs; triennial surveys and revisit surveys of transplant programs; and all associated activity required for licensure including on-site inspection and review of documentation from the providers, other governmental agencies, and external accreditation organizations.

Hospitals (64 licensees)	1 st Qtr FY 13	2 nd Qtr FY 13	3 rd Qtr FY 13	4 th Qtr FY 13	Total FY 13	1 st Qtr FY 14
Initial Surveys	0	1	1	0	2	0
Renewal Surveys	0	0	0	0	0	0
Complaints Received	115	111	112	123	461	89
Complaints Investigated	80	90	69	77	316	122
Comments: Accredited hospitals are deemed for licensure and are not subject to renewal surveys by the State; State surveys are required periodically, HG §19-308(b)(1)(ii)						
Transplant Centers (2 licensees)	1 st Qtr FY 13	2 nd Qtr FY 13	3 rd Qtr FY 13	4 th Qtr FY 13	Total FY 13	1 st Qtr FY 14
Initial Surveys	0	0	0	0	0	0
Renewal Surveys	0	0	0	0	0	0
Complaints Received	0	0	0	1	1	0
Complaints Investigated	0	0	0	1	1	0
Comments: Federal surveys are required every three years; no State survey requirements						

Freestanding Medical Facilities (3 licensees)	1 st Qtr FY 13	2 nd Qtr FY 13	3 rd Qtr FY 13	4 th Qtr FY 13	Total FY 13	1 st Qtr FY 14
Initial Surveys	0	0	0	0	0	0
Renewal Surveys	1	0	1	0	2	0
Complaints Received	0	0	0	1	1	0
Complaints Investigated	0	0	0	1	1	1
Comments: No federal survey requirements; State surveys are required every year, COMAR 10.07.08.06 A						
Health Maintenance Organizations (7 licensees)	1 st Qtr FY 13	2 nd Qtr FY 13	3 rd Qtr FY 13	4 th Qtr FY 13	Total FY 13	1 st Qtr FY 14
Initial Surveys	0	0	1	1	2	1
Renewal Surveys	0	1	1	1	3	0
Complaints Received	0	2	3	1	6	2
Complaints Investigated	0	2	3	1	6	0
Comments: No federal survey requirements; State surveys are required periodically, COMAR 10.07.11.12 B (1) and COMAR 10.07.11.04 B (1)						
Correctional Health Facilities (10 licensees)	1 st Qtr FY 13	2 nd Qtr FY 13	3 rd Qtr FY 13	4 th Qtr FY 13	Total FY 13	1 st Qtr FY 14
Initial Surveys	0	0	0	0	0	0
Renewal Surveys	0	0	0	0	0	0
Complaints Received	0	0	0	0	0	0
Complaints Investigated	0	0	0	0	0	0
Comments: No federal survey requirements; State surveys are required every year, COMAR 10.07.12.06 B						

Residential Treatment Centers (10 licensees)	1 st Qtr FY 13	2 nd Qtr FY 13	3 rd Qtr FY 13	4 th Qtr FY 13	Total FY 13	1 st Qtr FY 14
Initial Surveys	0	0	0	0	0	0
Renewal Surveys	0	0	0	0	0	0
Complaints Received	6	2	13	3	24	9
Complaints Investigated	2	4	10	7	23	6
Comments: Accredited RTCs are deemed for licensure and are not subject to renewal surveys by the State; State surveys are required periodically, HG §19-308(b)(1)(ii)						

Clinical Laboratory Licensing and Certification Unit

The Clinical Laboratory Licensing and Certification Unit is responsible for State licensure of all laboratories that perform tests on specimens obtained from Maryland citizens and for federal certification of all laboratories located in Maryland. The State and federal licensing programs include those for tissue banks, blood banks, and hospitals, independent reference, physician office and point-of-care laboratories, public cholesterol test (Health Awareness) screening, employment related toxicology testing for controlled dangerous substances, and Public Health Testing Programs that offer rapid HIV-1 antibody testing to the public. This unit conducts both State and federal surveys to ensure compliance with applicable regulations. This project is the agent for federal certification in the Clinical Laboratory Improvement Amendments of 1988 program (CLIA), which is required for all clinical laboratory testing sites.

Physician Office Laboratories (2950 licensees)	1 st Qtr FY 13	2 nd Qtr FY 13	3 rd Qtr FY 13	4 th Qtr FY 13	Total FY 13	1 st Qtr FY 14
Initial Surveys	3	5	4	2	14	6
Renewal Surveys	42	39	38	37	156	77
Complaints Received	0	0	0	0	0	0
Complaints Investigated	0	0	0	0	0	0
Comments: > 85% have a Certificate of Waiver for CLIA and a Letter of Permit Exception under COMAR 10.10.03.02 and are not subject to routine survey by the State; if no Certificate of Waiver, CLIA and State surveys are required every two years, COMAR 10.10.02.03C(2)						

Point-of-Care Laboratories (756 licensees)	1 st Qtr FY 13	2 nd Qtr FY 13	3 rd Qtr FY 13	4 th Qtr FY 13	Total FY 13	1 st Qtr FY 14
Initial Surveys	2	1	2	0	5	0
Renewal Surveys	20	19	22	20	81	0
Complaints Received	0	0	0	0	0	0
Complaints Investigated	0	0	0	0	0	0
Comments: > 85% have a Certificate of Waiver for CLIA and a Letter of Permit Exception under COMAR 10.10.03.02 and are not subject to routine survey by the State; if no Certificate of Waiver, CLIA and State surveys are required every two years, COMAR 10.10.02.03C(2)						
Federal Waived Laboratories (2300 licensees)	1 st Qtr FY 13	2 nd Qtr FY 13	3 rd Qtr FY 13	4 th Qtr FY 13	Total FY 13	1 st Qtr FY 14
Initial Surveys	0	0	0	10	10	0
Renewal Surveys	8	11	7	21	47	3
Complaints Received	0	0	0	0	0	0
Complaints Investigated	0	0	0	0	0	0
Comments: Federal surveys are required for 2% of the total number of waived laboratories (54 labs in FFY 13); no state survey requirements						
Independent Reference Laboratories (631 licensees)	1 st Qtr FY 13	2 nd Qtr FY 13	3 rd Qtr FY 13	4 th Qtr FY 13	Total FY 13	1 st Qtr FY 14
Initial Surveys	1	0	1	0	2	0
Renewal Surveys	22	21	26	16	85	0
Complaints Received	0	0	5	0	5	2
Complaints Investigated	0	0	5	0	5	2
Comments: > 85% are accredited and surveyed by the accrediting organization for State licensure and CLIA; state surveys are required periodically for non-accredited labs, COMAR 10.10.02.03C(2)						

Hospital Laboratories (81 licensees)	1 st Qtr FY 13	2 nd Qtr FY 13	3 rd Qtr FY 13	4 th Qtr FY 13	Total FY 13	1 st Qtr FY 14
Initial Surveys	0	0	0	0	0	0
Renewal Surveys	2	0	0	0	2	5
Complaints Received	1	0	0	1	2	1
Complaints Investigated	1	0	0	1	2	1
Comments: Currently all laboratories are accredited; if not accredited, CLIA and State surveys are required every two years, COMAR 10.10.02.03C(2)						
Cholesterol Testing Sites (2 licensees)	1 st Qtr FY 13	2 nd Qtr FY 13	3 rd Qtr FY 13	4 th Qtr FY 13	Total FY 13	1 st Qtr FY 14
Initial Surveys	0	0	0	0	0	0
Renewal Surveys	0	0	1	1	2	0
Complaints Received	0	0	0	0	0	0
Complaints Investigated	0	0	0	0	0	0
Comments: State surveys are required at testing sites when testing events take place; only one event has been scheduled since 7/1/2012, COMAR 10.10.02.03 E						
Tissue Banks (268 licensees)	1 st Qtr FY 13	2 nd Qtr FY 13	3 rd Qtr FY 13	4 th Qtr FY 13	Total FY 13	1 st Qtr FY 14
Initial Surveys	0	0	0	0	0	0
Renewal Surveys	0	0	3	3	6	0
Complaints Received	1	0	0	0	1	0
Complaints Investigated	1	0	0	0	1	0
Comments: 90% are accredited; State surveys are required annually for non-accredited providers, COMAR 10.50.01.09B(2)						

Cytology Proficiency Sites (31 licensees)	1 st Qtr FY 13	2 nd Qtr FY 13	3 rd Qtr FY 13	4 th Qtr FY 13	Total FY 13	1 st Qtr FY 14
Initial Surveys	0	0	0	0	0	0
Renewal Surveys	8	6	7	10	31	0
Complaints Received	0	0	0	0	0	0
Complaints Investigated	0	0	0	0	0	0
Comments: Each individual must be tested annually and retested when a failure occurs, COMAR 10.10.05.04B						
Employer Drug Testing (158 licensees)	1 st Qtr FY 13	2 nd Qtr FY 13	3 rd Qtr FY 13	4 th Qtr FY 13	Total FY 13	1 st Qtr FY 14
Initial Surveys	0	0	0	0	0	0
Renewal Surveys	0	0	2	2	4	2
Complaints Received	0	0	0	0	0	1
Complaints Investigated	0	0	0	0	0	1
Comments: State surveys are required every year, COMAR 10.10.10.04B(2)(a)						
Public Health Testing (122 licensees)	1 st Qtr FY 13	2 nd Qtr FY 13	3 rd Qtr FY 13	4 th Qtr FY 13	Total FY 13	1 st Qtr FY 14
Initial Surveys	0	0	0	0	0	0
Renewal Surveys	4	0	5	15	24	0
Complaints Received	0	0	0	0	0	0
Complaints Investigated	0	0	0	0	0	0
Comments: State surveys are required periodically, COMAR 10.10.12.04F; currently the AIDS Administration conducts these surveys for OHCQ						

Forensic Laboratory Unit

The Forensic Laboratories Unit provides oversight for the regulation of accredited and non-accredited laboratories that perform forensic analyses. Responsibilities of the unit include the investigation of complaints filed against these laboratories, plus all associated activity required for licensure including on-site inspection and review of documentation from the forensic laboratories

and external accreditation organizations. This unit conducts annual surveys and revisit surveys of non-accredited forensic laboratories. The unit is in charge of reviewing of all self-reported incidents that occur at both accredited and non-accredited forensic laboratories.

Forensic Laboratories (40 licensees)	1 st Qtr FY 13	2 nd Qtr FY 13	3 rd Qtr FY 13	4 th Qtr FY 13	Total FY 13	1 st Qtr FY 14
Initial Surveys	2	2	0	0	4	2
Renewal Surveys	0	0	0	0	0	2
Complaints Received	0	0	3	1	4	2
Complaints Investigated	0	0	3	1	4	2
Comments: State surveys are required of the non-accredited labs every three years, COMAR 10.51.02.03 B (2) and (3)						

Ambulatory Care Program Unit

The Ambulatory Care Unit is responsible for the State licensure and/or federal certification (Medicare) of all non-long term care facilities that include: home health agencies, residential service agencies, hospice care providers, free standing ambulatory care facilities (ambulatory surgery, endoscopy, kidney dialysis, and birthing centers and facilities that use major medical equipment), out-patient physical therapy providers, comprehensive out-patient rehabilitation facilities, portable X-ray providers, nurse staffing agencies, and nursing referral services agencies. This program receives complaints alleged against all ambulatory care providers and maintains a federal (Medicare) twenty-four hour complaint hotline for home health agencies.

Birthing Centers (2 licensees)	1 st Qtr FY 13	2 nd Qtr FY 13	3 rd Qtr FY 13	4 th Qtr FY 13	Total FY 13	1 st Qtr FY 14
Initial Surveys	0	0	0	0	0	0
Renewal Surveys	2	0	0	0	2	0
Complaints Received	0	0	0	0	0	0
Complaints Investigated	0	0	0	0	0	0
Comments: No federal or State renewal surveys are required						

Comprehensive Outpatient Rehabilitation Facilities CORF (1 licensee)	1 st Qtr FY 13	2 nd Qtr FY 13	3 rd Qtr FY 13	4 th Qtr FY 13	Total FY 13	1 st Qtr FY 14
Initial Surveys	1	0	0	0	1	0
Renewal Surveys	0	0	0	0	0	0
Complaints Received	1	0	0	0	1	0
Complaints Investigated	1	0	0	0	1	0
Comments: Federal surveys are required once every six years; CMS requires 5% are done annually or one facility annually if the total number of facilities is less than 10; State surveys are not required						
Freestanding Ambulatory Surgical Centers (325 licensees)	1 st Qtr FY 13	2 nd Qtr FY 13	3 rd Qtr FY 13	4 th Qtr FY 13	Total FY 13	1 st Qtr FY 14
Initial Surveys	3	4	3	7	17	3
Renewal Surveys	16	25	3	5	49	22
Complaints Received	0	5	5	2	12	3
Complaints Investigated	0	5	5	2	12	1
Comments: Federal surveys are required every six years with at least 25 percent of ASCs required to be surveyed each year; State surveys are not required						
Freestanding Renal Dialysis Centers (127 licensees)	1 st Qtr FY 13	2 nd Qtr FY 13	3 rd Qtr FY 13	4 th Qtr FY 13	Total FY 13	1 st Qtr FY 14
Initial Surveys	7	0	0	2	9	0
Renewal Surveys	9	9	9	6	33	5
Complaints Received	37	11	12	5	65	12
Complaints Investigated	37	11	12	4	64	12
Comments: Federal surveys are required once every three years; State renewal surveys are not required						

Home Health Agencies (57 licensees)	1 st Qtr FY 13	2 nd Qtr FY 13	3 rd Qtr FY 13	4 th Qtr FY 13	Total FY 13	1 st Qtr FY 14
Initial Surveys	1	0	0	0	1	0
Renewal Surveys	4	4	5	4	17	4
Complaints Received	2	2	10	6	20	6
Complaints Investigated	2	2	10	6	20	5
Comments: Federal surveys are required at least once every three years; State surveys are required every year, COMAR 10.07.10.04E(3)						
Hospice (27 licensees)	1 st Qtr FY 13	2 nd Qtr FY 13	3 rd Qtr FY 13	4 th Qtr FY 13	Total FY 13	1 st Qtr FY 14
Initial Surveys	0	0	0	0	0	0
Renewal Surveys	0	0	0	2	2	0
Complaints Received	5	4	10	0	19	4
Complaints Investigated	5	4	10	0	19	4
Comments: Federal surveys are required at least once every six years; State renewal surveys are not required						
Major Medical Equipment (250 licensees)	1 st Qtr FY 13	2 nd Qtr FY 13	3 rd Qtr FY 13	4 th Qtr FY 13	Total FY 13	1 st Qtr FY 14
Initial Surveys	0	0	0	0	0	0
Renewal Surveys	0	0	0	0	0	0
Complaints Received	0	1	0	0	1	0
Complaints Investigated	0	1	0	0	1	0
Comments: No federal or State renewal surveys are required						

Nurse Referral Agencies (131 licensees)	1 st Qtr FY 13	2 nd Qtr FY 13	3 rd Qtr FY 13	4 th Qtr FY 13	Total FY 13	1 st Qtr FY 14
Initial Surveys	4	4	4	3	15	0
Renewal Surveys	5	5	5	6	21	0
Complaints Received	0	0	2	0	2	1
Complaints Investigated	0	0	2	0	2	1
Comments: State renewal surveys are not required						
Nurse Staff Agencies (581 licensees)	1 st Qtr FY 13	2 nd Qtr FY 13	3 rd Qtr FY 13	4 th Qtr FY 13	Total FY 13	1 st Qtr FY 14
Initial Surveys	10	10	10	10	40	0
Renewal Surveys	62	62	62	61	247	0
Complaints Received	0	0	3	0	3	0
Complaints Investigated	0	0	3	0	3	0
Comments: State renewal surveys are not required						
Outpatient Physical Therapy (69 licensees)	1 st Qtr FY 13	2 nd Qtr FY 13	3 rd Qtr FY 13	4 th Qtr FY 13	Total FY 13	1 st Qtr FY 14
Initial Surveys	1	0	0	0	1	1
Renewal Surveys	1	1	1	2	5	1
Complaints Received	0	0	0	0	0	0
Complaints Investigated	0	0	0	0	0	0
Comments: Federal surveys are required once every six years; CMS requires 5% annually or one facility annually if total number of facilities is less than 10; State surveys for renewal are not required						

Portable X-Ray (7 licensees)	1 st Qtr FY 13	2 nd Qtr FY 13	3 rd Qtr FY 13	4 th Qtr FY 13	Total FY 13	1 st Qtr FY 14
Initial Surveys	0	0	0	0	0	0
Renewal Surveys	0	0	0	0	0	1
Complaints Received	0	0	0	0	0	0
Complaints Investigated	0	0	0	0	0	0
Comments: Federal surveys are required every six years; CMS requires 5% are surveyed annually or one facility annually if total number of facilities is less than 10; State surveys are not required						
Residential Service Agencies (1090 licensees)	1 st Qtr FY 13	2 nd Qtr FY 13	3 rd Qtr FY 13	4 th Qtr FY 13	Total FY 13	1 st Qtr FY 14
Initial Surveys	22	25	14	17	78	25
Renewal Surveys	7	5	3	3	18	2
Complaints Received	20	7	15	20	62	12
Complaints Investigated	20	7	15	20	62	6
Comments: State renewal surveys are not required						
Surgical Abortion Facilities (12 licensees)	1 st Qtr FY 13	2 nd Qtr FY 13	3 rd Qtr FY 13	4 th Qtr FY 13	Total FY 13	1 st Qtr FY 14
Initial Surveys	0	0	16	0	16	0
Renewal Surveys	0	0	0	0	0	0
Complaints Received	0	0	6	16	22	1
Complaints Investigated	0	0	6	14	20	1
Comments: State renewal surveys are not required						

Behavioral Health Unit

In the summer of 2013, the OHCQ merged community mental health and substance use disorder programs into the behavioral health unit (BHU). This unit is responsible for the evaluation of all Community Mental Health programs prior to expiration of the programs approval/license and prior to the relocation or expansion of a program. It issues temporary approvals, 1, 2 or 3 year approvals with or without conditions, and two-year licenses depending

on the program type and/or status. Program monitoring consists of onsite review of personnel and client records, observations, and interviews.

The BHU is the agent of the Alcohol and Drug Abuse Administration (ADAA) responsible for conducting biennial surveys and complaint investigations of substance abuse treatment providers to ensure compliance with applicable State and federal regulations. It recommends to ADAA the initial, provisional, or general certification for substance abuse treatment providers throughout the State. The unit investigates complaints that are received from patients, providers, and members of the community. Complaints may result in deficiencies related to non-compliance with regulations or referrals to other agencies including, including the Maryland Attorney General's Office. The unit interacts with other State and federal agencies involved with drug control issues. Programs evaluated by the unit include levels of service such as early Intervention, outpatient treatment, residential treatment, and opioid maintenance therapy (OMT).

Early Intervention programs often work with the court system to provide DUI/DWI Education. Outpatient clinics provide community-based drug and alcohol education and counseling. Residential programs provide inpatient treatment for individuals requiring thorough evaluation, detoxification and counseling. OMT programs typically administer Methadone to substance abusers in a community-based setting.

Group Homes for Adults with Mental Illness (153 licensees)	1 st Qtr FY 13	2 nd Qtr FY 13	3 rd Qtr FY 13	4 th Qtr FY 13	Total FY 13	1 st Qtr FY 14
Initial Surveys	0	0	0	3	3	3
Renewal Surveys	2	5	0	0	7	0
Complaints Received	0	1	2	0	3	0
Complaints Investigated	0	1	0	0	1	0
Comments: Federal renewal surveys are not required; State renewal surveys are required every two years, COMAR 10.21.16						
Mental Health Vocational Programs (55 licensees)	1 st Qtr FY 13	2 nd Qtr FY 13	3 rd Qtr FY 13	4 th Qtr FY 13	Total FY 13	1 st Qtr FY 14
Initial Surveys	0	0	0	0	0	0
Renewal Surveys	0	4	0	0	4	0
Complaints Received	0	0	0	0	0	0
Complaints Investigated	0	0	0	0	0	0
Comments: Federal renewal surveys are not required; State renewal surveys are required every three years or within 6 months of initial approval, COMAR 10.21.16						

Mobile Treatment Services (25 licensees)	1 st Qtr FY 13	2 nd Qtr FY 13	3 rd Qtr FY 13	4 th Qtr FY 13	Total FY 13	1 st Qtr FY 14
Initial Surveys	0	0	0	0	0	0
Renewal Surveys	0	0	0	0	0	0
Complaints Received	0	0	0	0	0	0
Complaints Investigated	0	0	0	0	0	0
Comments: Federal renewal surveys are not required; State renewal surveys are required every three years or within 6 months of initial approval, COMAR 10.21.16						
Outpatient Mental Health Centers (208 licensees)	1 st Qtr FY 13	2 nd Qtr FY 13	3 rd Qtr FY 13	4 th Qtr FY 13	Total FY 13	1 st Qtr FY 14
Initial Surveys	0	0	0	0	0	0
Renewal Surveys	4	0	3	6	13	0
Complaints Received	2	1	1	0	4	0
Complaints Investigated	0	0	0	0	0	0
Comments: Federal renewal surveys are not required; State renewal surveys are required every three years or within 6 months of initial approval, COMAR 10.21.16						
Psychiatric Rehabilitation Programs for Adults (22 licensees)	1 st Qtr FY 13	2 nd Qtr FY 13	3 rd Qtr FY 13	4 th Qtr FY 13	Total FY 13	1 st Qtr FY 14
Initial Surveys	0	2	2	0	4	0
Renewal Surveys	6	5	2	6	19	1
Complaints Received	2	1	1	0	4	0
Complaints Investigated	0	0	0	0	0	0
Comments: Federal renewal surveys are not required; State renewal surveys are required every three years or within 6 months of initial approval, COMAR 10.21.16						

Psychiatric Rehabilitation Services for Minors (122 licensees)	1 st Qtr FY 13	2 nd Qtr FY 13	3 rd Qtr FY 13	4 th Qtr FY 13	Total FY 13	1 st Qtr FY 14
Initial Surveys	0	2	2	0	4	0
Renewal Surveys	4	2	1	6	13	1
Complaints Received	0	0	0	0	0	0
Complaints Investigated	0	0	0	0	0	0
Comments: Federal renewal surveys are not required; State renewal surveys are required every three years or within 6 months of initial approval, COMAR 10.21.16						
Psychiatric Day Treatment Services, Partial Hospitalization Program (13 licensees)	1 st Qtr FY 13	2 nd Qtr FY 13	3 rd Qtr FY 13	4 th Qtr FY 13	Total FY 13	1 st Qtr FY 14
Initial Surveys	0	0	0	0	0	0
Renewal Surveys	0	0	0	0	0	0
Complaints Received	0	0	0	0	0	0
Complaints Investigated	0	0	0	0	0	0
Comments: Federal renewal surveys are not required; State renewal surveys are required every three years, COMAR 10.21.16						
Residential Rehabilitation Programs (772 licensees)	1 st Qtr FY 13	2 nd Qtr FY 13	3 rd Qtr FY 13	4 th Qtr FY 13	Total FY 13	1 st Qtr FY 14
Initial Surveys	0	0	0	0	0	0
Renewal Surveys	2	1	0	3	6	3
Complaints Received	0	1	2	4	7	0
Complaints Investigated	0	0	0	0	0	0
Comments: Federal renewal surveys are not required; State renewal surveys are required every three years or within 6 months of initial approval, COMAR 10.21.16 and 10.21.17						

Residential Crisis Services (18 licensees)	1 st Qtr FY 13	2 nd Qtr FY 13	3 rd Qtr FY 13	4 th Qtr FY 13	Total FY 13	1 st Qtr FY 14
Initial Surveys	0	0	0	0	0	0
Renewal Surveys	1	0	0	2	3	0
Complaints Received	0	0	1	1	2	0
Complaints Investigated	0	0	1	0	1	0
Comments: Federal renewal surveys are not required; Out-of-Home Residential Rehabilitation Programs and Treatment Foster Care setting: Surveys required every three years or within 6 months of initial approval Out-of-Home Group Homes (Adult): Surveys every two years Out-of-Home Group Homes (Children or Adult): Every year COMAR 10.21.16 and 10.21.17						
Respite Care Services (17 licensees)	1 st Qtr FY 13	2 nd Qtr FY 13	3 rd Qtr FY 13	4 th Qtr FY 13	Total FY 13	1 st Qtr FY 14
Initial Surveys	0	0	0	0	0	0
Renewal Surveys	1	0	0	0	1	0
Complaints Received	0	0	0	0	0	0
Complaints Investigated	0	0	0	0	0	0
Comments: Federal renewal surveys are not required; State surveys are required once every three years						
Therapeutic Group Homes (18 licensees)	1 st Qtr FY 13	2 nd Qtr FY 13	3 rd Qtr FY 13	4 th Qtr FY 13	Total FY 13	1 st Qtr FY 14
Initial Surveys	0	0	0	0	0	0
Renewal Surveys	3	1	3	2	9	0
Complaints Received	0	0	0	0	0	0
Complaints Investigated	0	0	0	0	0	0
Comments: Federal renewal surveys are not required; State surveys are required once every three years						

Therapeutic Nursery Programs (1 licensee)	1 st Qtr	2 nd Qtr	3 rd Qtr	4 th Qtr	Total	1 st Qtr
	FY 13	FY 13	FY 13	FY 13	FY 13	FY 14
Initial Surveys	0	0	0	0	0	0
Renewal Surveys	0	0	0	0	0	0
Complaints Received	0	0	0	0	0	0
Complaints Investigated	0	0	0	0	0	0
Comments: Federal surveys are not required; State surveys are required once every three years or within 6 months of initial approval, 10.21.16.01.08A(2)						

Opioid Maintenance Therapy Programs (55 licensees)	1 st Qtr FY 13	2 nd Qtr FY 13	3 rd Qtr FY 13	4 th Qtr FY 13	Total FY 13	1 st Qtr FY 14
Initial Surveys	0	0	0	0	0	0
Renewal Surveys	5	6	1	0	12	0
Complaints Received	0	0	0	0	0	0
Complaints Investigated	0	0	0	0	0	0
Comments: Federal surveys are not required; State surveys are required every two years, HG 38-401(a)(3)(iii)						
Outpatient Treatment Programs (252 licensees)	1 st Qtr FY 13	2 nd Qtr FY 13	3 rd Qtr FY 13	4 th Qtr FY 13	Total FY 13	1 st Qtr FY 14
Initial Surveys	6	5	3	0	14	0
Renewal Surveys	13	14	14	0	41	0
Complaints Received	0	0	2	0	2	0
Complaints Investigated	0	0	2	0	2	0
Comments: Federal surveys are not required; State surveys are required every two years, HG 38-401(a)(3)(iii)						

Residential Programs (80 licensees)	1 st Qtr FY 13	2 nd Qtr FY 13	3 rd Qtr FY 13	4 th Qtr FY 13	Total FY 13	1 st Qtr FY 14
Initial Surveys	2	3	0	0	5	0
Renewal Surveys	6	5	2	0	13	0
Complaints Received	2	2	0	0	4	0
Complaints Investigated	2	2	0	0	4	0
Comments: Federal surveys are not required; State surveys are required every two years, HG 38-401(a)(3)(iii)						
Education (15 licensees)	1 st Qtr FY 13	2 nd Qtr FY 13	3 rd Qtr FY 13	4 th Qtr FY 13	Total FY 13	1 st Qtr FY 14
Initial Surveys	1	0	0	0	1	0
Renewal Surveys	0	0	0	0	0	0
Complaints Received	0	0	0	0	0	0
Complaints Investigated	0	0	0	0	0	0
Comments: Federal surveys are not required; State surveys are required every two years, HG 38-401(a)(3)(iii)						
Residential Detoxification Treatment Programs (1 licensees)	1 st Qtr FY 13	2 nd Qtr FY 13	3 rd Qtr FY 13	4 th Qtr FY 13	Total FY 13	1 st Qtr FY 14
Initial Surveys	0	0	0	0	0	0
Renewal Surveys	0	0	0	0	0	0
Complaints Received	0	0	0	0	0	0
Complaints Investigated	0	0	0	0	0	0
Comments: Federal surveys are not required; State surveys are required every two years, HG 38-401(a)(3)(iii)						

Correctional Substance Abuse Program (27 licensees)	1 st Qtr FY 13	2 nd Qtr FY 13	3 rd Qtr FY 13	4 th Qtr FY 13	Total FY 13	1 st Qtr FY 14
Initial Surveys	0	0	0	0	0	0
Renewal Surveys	2	2	0	0	4	0
Complaints Received	0	0	0	0	0	0
Complaints Investigated	0	0	0	0	0	0
Comments: Federal surveys are not required; State surveys are required every two years, HG 38-401(a)(3)(iii)						
Ambulatory Detoxification (11 licensees)	1 st Qtr FY 13	2 nd Qtr FY 13	3 rd Qtr FY 13	4 th Qtr FY 13	Total FY 13	1 st Qtr FY 14
Initial Surveys	0	0	0	0	0	0
Renewal Surveys	0	0	0	0	0	0
Complaints Received	0	0	0	0	0	0
Complaints Investigated	0	0	0	0	0	0
Comments: Federal surveys are not required; State surveys are required every two years, HG 38-401(a)(3)(iii)						

Summary

The interventions that are described above have allowed the OHCQ to better fulfill the mission to protect the health and safety of Maryland's citizens throughout the health care system. The OHCQ can now and in the future more fully comply with the regulatory requirements as mandated by the legislature. While progress has been made, there is a need for an on-going strategic planning and quality improvement process that continually examines the agency's regulatory efficiency. The OHCQ will continue to look for evidence-based efficient and cost-effective methods to meet mandated goals, while working to ensure there is public confidence in the health care and community service delivery systems in the State. OHCQ will continue to update the legislature on the progress implementing these initiatives.