

THE OFFICE OF HEALTH CARE QUALITY

INTEREST MEETING FOR
APPLICANTS TO SUPPORT
INDIVIDUALS WITH
DEVELOPMENTAL DISABILITIES

Purpose of today's training

- ▣ Ensure new providers are prepared to assist individuals in leading fulfilled lives
- ▣ Instill the core philosophy of person-directed services
- ▣ Describe the regulatory framework surrounding the implementation of community services
- ▣ Provide sufficient information to assist providers in navigating the application and service delivery systems

Where We Have Been and Where We Are Going

- ▣ MPT PRESENTS
- ▣ Departing Rosewood
- ▣ <http://video.mpt.tv/video/1861668308/>

Who are we and Where are we today?

The Office of Health Care Quality (OHCQ): is the state regulatory agency responsible for oversight of health facilities in Maryland including facilities for individual's with intellectual and developmental disabilities receiving services through the Developmental Disabilities Administration.

The Office of Health Care Quality (OHCQ)

- ▣ MISSION:
- ▣ To protect the health and safety of Maryland's citizens and to ensure that there is public confidence in the health care and community service delivery systems through regulatory, enforcement, and educational activities

The Office of Health Care Quality (OHCQ)

- ▣ Responsibility:
- ▣ OHCQ is responsible for ensuring that DD providers are in compliance with state regulations.
- ▣ OHCQ staff review and approve licenses for DD providers.
- ▣ OHCQ surveyors conduct initial and on-going surveys for compliance.
- ▣ OHCQ surveyors investigate complaints including allegations of abuse and neglect.

The Developmental Disabilities Administration (DDA)

MISSION:

The DDA *partners* with people with developmental disabilities to provide leadership and resources to live fulfilling lives.

The Developmental Disabilities Administration provides a coordinated service delivery system so that people with developmental disabilities receive appropriate services oriented toward the goal of community integration. These services are provided through a combination of state residential centers (providing services to individuals with intellectual disability) and a wide array of community based services delivered primarily through a network of non-profit providers.

Define Developmental Disability:

A **developmental disability** is a severe, chronic disability of an individual that:

- (a) Is attributable to a physical or mental impairment, other than the sole diagnosis of mental illness, or to a combination of mental and physical impairments;
- (b) Is likely to continue indefinitely;
- (c) Is manifested in an individual younger than 22 years old;
- (d) Results in an inability to live independently without external support or continuing and regular assistance;
- (e) Reflects the need for a combination and sequence of special, interdisciplinary, or generic care, treatment, or other services that are individually planned and coordinated for the individual.

Goals and Vision

- ▣ All Marylanders lead personally defined and fulfilling lives.
- ▣ People with developmental disabilities...
 - direct their lives;
 - have viable support options; and,
 - have information to make decisions.

Centers for Medicaid and Medicare Services (CMS), and the State Medicaid Administration (SMA)

- ▣ CMS: The newly named federal agency, formerly the Health Care Financing Administration, that administers the Medicare, Medicaid and Child Health Insurance programs.
- ▣ SMA: is the state agency responsible for administering the Medicaid program.

INTERACTIVE TEST

Hand Outs

The seal of the State of Maryland is a circular emblem. It features a central shield with a red cross on a white background, set against a blue and white background. Above the shield is a crown. Two figures, a man in a hat and a man in a red cap, stand on either side of the shield, holding a banner. The banner is red and white with a cross. The entire seal is surrounded by a gold border with the Latin motto "BONÆ VOLUNTATIS TVÆ CORONASTI" in blue letters.

The Maryland
Medicaid Fraud Control Unit
“MFCU”

Stephen Roscher
Assistant Attorney General



History of the MFCU

- ▣ Congress initially failed to provide safeguards in the Medicaid program.
- ▣ There was no specific state or federal law enforcement agency to monitor the Medicaid program.
- ▣ Until 1995, the MFCU program was voluntary. Federal law now requires each state to have a MFCU or submit a waiver to the Secretary of HHS.



MFCU Jurisdiction

- ▣ Investigate and prosecute health care provider fraud in the Medicaid program
- ▣ Prosecute resident abuse and neglect in health care facilities receiving Medicaid funding or other long-term care facilities such as Assisted Living
- ▣ May review and prosecute complaints of the misappropriation of resident's private funds in facilities receiving Medicaid funding



MFCU Prosecution

1. Direct MFCU prosecution
2. Local prosecution (referrals)
3. Federal prosecution
 - Cross-designation of MFCU attorneys or referral



Criminal Prosecution

- **General Maryland criminal statutes:**

Theft § 7-101 et. seq.

Identity Fraud § 8-301

Assault § 3-202, 203

- **Specific Maryland criminal statutes:**

Medicaid Fraud § 8-508

Abuse or Neglect of a Vulnerable Adult § 3-604,605

Exploitation of Vulnerable Adults Prohibited § 8-801



Civil Prosecution

- **Federal False Claims Act**

31 U.S.C. § 3729-3733

Those who knowingly submit, or cause another person or entity to submit, false claims for payment of government funds are liable for three times the government's damages plus civil penalties of \$5,500 to \$11,000 per false claim.

- **Maryland False Claims Act (New)**

Health General § 2-601 et. seq.

To recover damages and penalties from individuals who defraud the state by filing false claims against state health plans and programs, including Medicaid.



Provider Exclusions

42 USC 1320a-7 and 42 CFR 1001 et. seq.

- ▣ **Mandatory**: Criminal conviction related to health care delivery . . . or . . . Conviction related to the neglect or abuse of a patient in connection with the delivery of health care services.

MINIMUM FIVE YEARS

- ▣ **Permissive**: Results from actions by a court, licensing board or agency. May also be based on excessive charges, unnecessary services, kickbacks, failure to disclose or supply information.



Health Integrity and Protection Data Bank (HIPDB)

- ▣ National Health Care Fraud database for the reporting of specific final adverse actions against health care practitioners, providers and suppliers

- ▣ All federal/state agencies (including MFCUs) must report certain final adverse actions to HIPDB, including:
 - civil judgments
 - criminal convictions
 - licensing actions
 - exclusions
 - any other adjudicated actions

Resource:

The mission of the Office of Inspector General (OIG) is to protect the integrity of Department of Health and Human Services (HHS) programs, as well as the health and welfare of the beneficiaries of those programs. The OIG maintains a list of all currently excluded parties called the *List of Excluded Individuals/Entities*. A search of this list of Excluded Individuals/Entities can be conducted on line.

<http://exclusions.oig.hhs.gov/search.aspx>



Thank You

Components of a Successful Agency

- ▣ Well-Defined Purpose and Plan
- ▣ Involved and Informed Governing Body
- ▣ Empowered Individuals
- ▣ Well-trained and Empowered Direct Support Staff
- ▣ Adequate Funding
- ▣ A Responsive Quality Enhancement System
- ▣ Responsive Management
- ▣ Cooperative Relationships with State Entities
- ▣ Willingness to be Responsible for Decisions Made

The Application Process

The Application process is comprised of the following:

1. The Program Service Plan
2. The Business Plan
3. The Application
4. The Quality Assurance Template
5. Policies and Procedures
6. Licensing Reports (up to 10 years)

1. Program Service Plan



Program Service Plan (PSP)

- Blueprint for the delivery of services and supports by your agency
- Answers the following questions: Who, What, Where, and Why
- Consist of the four required components
- Should be short and to the point — a “brochure” for your agency



COMPONENTS OF THE PROGRAM SERVICE PLAN

- ▣ RATIONALE
- ▣ SCOPE
- ▣ STAFFING AND TRAINING
- ▣ SETTING AND LOCATION

Component I

Rationale

Why do you want to do this?

Include:

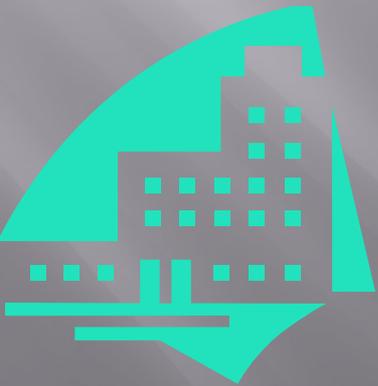
- Your agency's mission and philosophy for the provision of service
- A summary of your agency personnel's demonstrated experience in the field of developmental disabilities. Be specific – some experience must be professional

COMPONENT II

SCOPE

What you are going to do?

- ▣ Discuss the specific services your agency will provide. 
- ▣ Options include:
 - ✦ Community Residential Services (ALU, GH, IFC, CSLA)
 - ✦ Non-residential services (DH, VOC/SE)
 - ✦ Support Services (F/ISS)



DON'T BITE OFF MORE THEN YOU CAN CHEW

- ▣ Limit your initial application request to no more than 2 service models
- ▣ Ensure that your focus is on the individuals
- ▣ Ensure that members of the governing body and employees of the licensee may not own property that is leased back to the licensee.

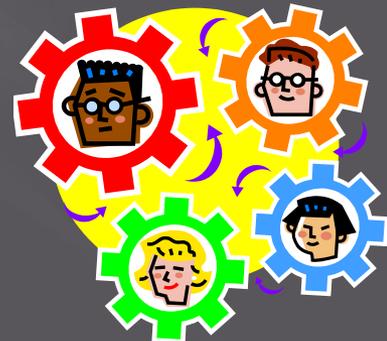


COMPONENT III

STAFFING AND TRAINING

Who will provide the service?

- ▣ Describe the staff your agency will utilize to provide the services
- ▣ Include what positions are minimally necessary to operate the program, to provide basic coverage and the proposed services.
- ▣ Provide proposed staffing ratios

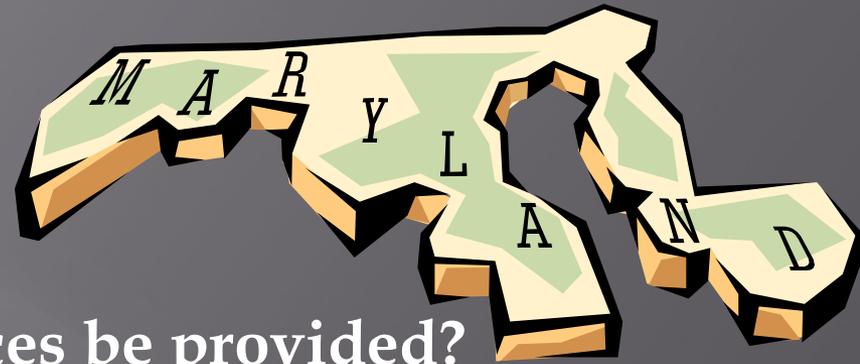


STAFFING AND TRAINING CONTINUED

- ▣ Staff trainings
 - ◆ Include minimally required DDA-mandated trainings
 - ◆ If your agency will focus on individuals with specific needs, indicate what specific trainings would be necessary for staff to appropriately support the individuals.
 - ◆ What is your training schedule for new hires?
 - ◆ How is your agency documenting training that has occurred.
 - ◆ How is your agency documenting who has taken the training.



COMPONENT IV SETTING AND LOCATION



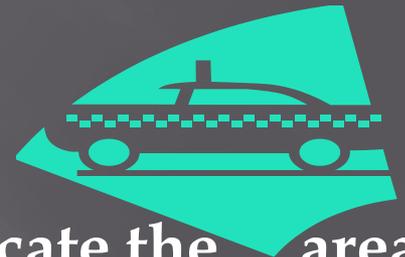
Where will these services be provided?

- ▣ Residential-
 - Indicate counties, municipalities, localities where homes will be located
 - Indicate the type of home(s) the agency plans to operate (single family, detached, apartment, etc.)
 - Indicate if homes will be accessible
 - Indicate initial number of homes planned
- ▣ Include the number of individuals you plan to serve.



SETTING AND LOCATION CONTINUE

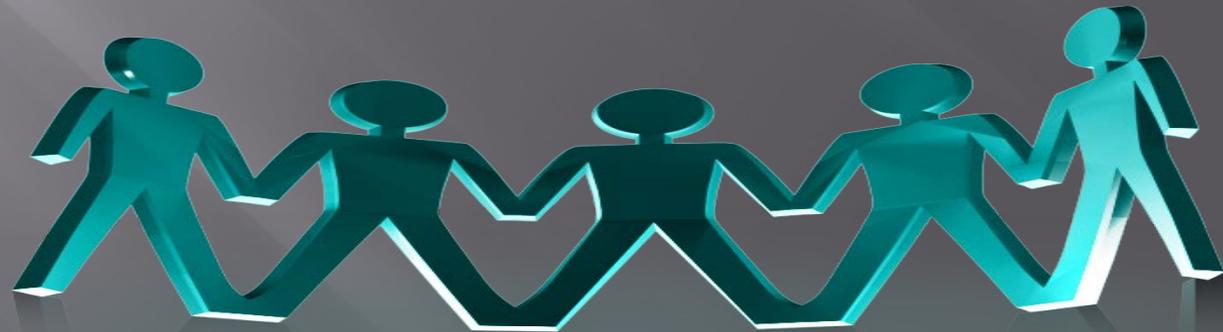
- ▣ Vocational/Supported Employment and Day Habilitation Services
 - Indicate the catchment area the agency intends to serve.
 - Indicate proposed transportation to be utilized.



- For Supported Employment, indicate the areas in which community jobs will be sought
- Include the number of individuals you plan to serve.

SETTING AND LOCATION CONTINUE

- ▣ Support Services
 - Indicate the catchment area the agency intends to serve.
 - Indicate proposed transportation to be utilized.
 - Include the number of individuals you plan to serve.



Where does the money come from???

All providers who receive DDA funding are required to enter into a Provider Agreement for Participation in Maryland's Medical Assistance Program. This agreement is made between a representative of the agency and the Department of Health and Mental Hygiene (DHMH). This agreement allows the agency to provide covered services to Medical Assistance recipients.

U.S. Department of Health and Human Services (DHHS)

Medicaid law authorizes The Secretary of DHHS to waive certain Medicaid statutory requirements. These waivers enable states to cover a broad array of home and community-based services (HCBS) for targeted populations as an alternative to institutionalization. **DDA** administers two waivers: Community Pathways & New Directions. The availability of federal funds to match state revenues has fueled rapid expansion of community services in Maryland.

Participation in Maryland's Medical Assistance Program

COMAR 10.22.17.04 Licensure Requirements.

To receive reimbursement under this chapter,
a provider shall:

- A. Be licensed in accordance with Health-General Article, Title 7, Annotated Code of Maryland, and COMAR 10.22.08 or 10.22.07;
and...

B. Comply with COMAR 10.09.26* and all other applicable regulations under COMAR 10.09.

(*Title 10 DEPARTMENT OF HEALTH AND MENTAL HYGIENE; Subtitle 09 MEDICAL CARE PROGRAMS; Chapter 26 Community Based Services for Developmentally Disabled Individuals Pursuant to a 1915(c) Waiver)

Compliance...

When an agency enters into a Provider Agreement for participation in Maryland's Medical Assistance Program, the agency agrees to comply with all of the requirements of the Maryland Medical Assistance Program as well as any other applicable regulations, transmittals, and guidelines issued by DHMH. By entering into this agreement, the agency representative acknowledges his or her responsibility to become familiar with those requirements.

What are those requirements?

There
are
many
requirements...

Here's an example:

The provider agrees to **not** employ, or contract with a person, partnership, or corporation which has been disqualified from providing or supplying services to Medical Assistance recipients unless the Provider receives prior written approval from DHMH. [In addition to jeopardizing the agency's future as a provider that receives Federal health care funding, civil monetary penalties may be imposed against the agency (Section 1128A(a)(6) of the Act; and 42 CFR section 1003.102(a)(2)).]

2. BUSINESS PLANS

DDA Financial Operation/ Business Plan

Applicant must provide written documentation that the organization:

- Is solvent;
- Has access to financial resources to operate for a minimum of six months based on the prospective financials within the business plan.
- Your plan must include alternate sources of revenue, e.g. fundraising

DDA's Payment System

New providers receive **no payment for 6 months**. This is because payment is based upon historical attendance and new agencies do not have historical attendance.

DDA Financial Operations / Business Plan

- Business plans shall be based on DDA's current regulations (COMAR 10.22.17 and 10.22.18 are rate based payment system)
- Entities shall be incorporated in Maryland before your business plan will be reviewed. Sole proprietorships and LLCs are not considered corporations.

TIP

- Throughout the application process, entities must **REMAIN** in good standing with the Maryland State Department of Assessments and Taxation. The applicant is required to attach a certificate of good standing to the business plan.

- Articles of Incorporation include a statement that describes the nature of your business.

It is suggested that the nature of business documented on your Articles of Incorporation relates to the service description described in your application to become a DDA Licensed Provider.

Financial Solvency

The business plan submission must include evidence of financial solvency: financial statements indicating expenditures for one month, one year, two years, and 3 years.

Questions?

3. THE APPLICATION

BOARD OF DIRECTORS

The Governing Body

The Board of Directors document shall include:

- **Name and address of each member;**
- **Title or position on the Board;**
- **Contact telephone number of each member;**
- **Identification of a member who is a family member of an individual with a developmental disability;**



BOARD OF DIRECTORS

The Governing Body

- Identification of a member with a developmental disability;
- Identification of a member with experience in the field of developmental disabilities

BOARD OF DIRECTORS

The Governing Body

Written by-laws which require the governing body to be legally responsible for:

- Overseeing the management and operation of the licensee;
- Ensuring that the licensee operates in compliance with all of the requirements of COMAR10.22.02;
- Approving the applicant/licensee's mission statement, long range goals, policies, procedures and budget;

BOARD OF DIRECTORS

The Governing Body

- Defining and prohibiting those circumstances which would create a financial or personal conflict of interest for members of the governing body, staff, care providers, volunteers and members of the standing committee;
- Ensuring that the licensee responds to all plans of correction in a timely manner; and
- Approving Program Services Plan and ensuring that services are provided in accordance with such plan.

BOARD OF DIRECTORS

The Governing Body

No employee of a licensee or immediate family member of an employee of a licensee may serve as a voting member of the governing body unless:

- The employee receives services from the licensee

or

- The administration explicitly approves the composition of the governing body through an innovative program service plan in accordance with COMAR10.22.02.09F - Innovative Program Services Plan Variance.

BOARD OF DIRECTORS

The Governing Body

Ensure that members of the governing body and employees of the licensee may not own property that is leased back to the licensee.

Components of the Application

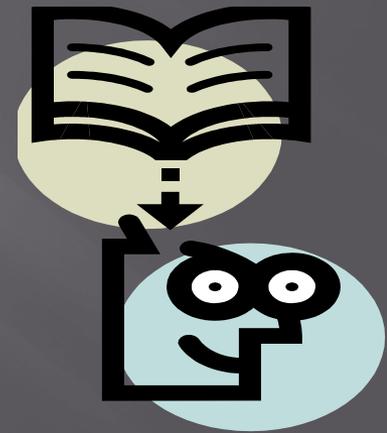
- ▣ Principal Incorporated Name
 - The Name You Registered With the Maryland Department of Assessment and Taxation; **May Not be an LLC, LLP, Or SP** Resident Agent
- ▣ Indicate if Agency is Certified as a Minority Business Enterprise (MBE)
[Completed Through MD Department of Transportation]
- ▣ Type of Corporation
- ▣ Incorporation Date

Components of the Application

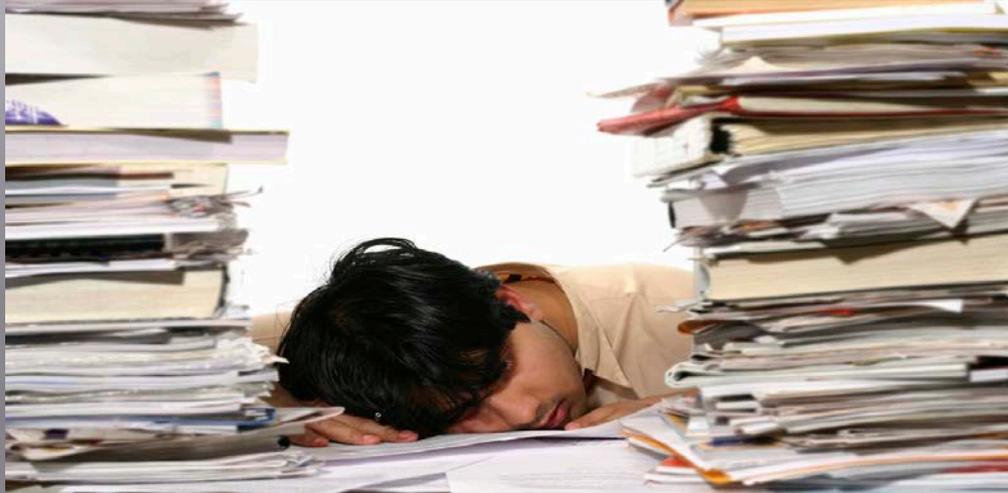
- ▣ Trade Name (If Applicable)
- ▣ Executive Director's Name
- ▣ Employer Identification Number
- ▣ Administrative Office Address
- ▣ Mailing Address (If Different From Administrative Office)
- ▣ Email Address
- ▣ Telephone And Fax Numbers

Components of the Application

- ▣ Name of Person (If Different From The Executive Director) to Contact Regarding the Application
 - Name
 - Title
 - Address
 - E-mail address
 - Telephone and fax numbers



Attachments to Submit with Application



- ▣ MASTER CHECKLIST
- ▣ ARTICLES OF INCORPORATION
- ▣ TABLE OF ORGANIZATION

Attachments to Submit with Application

- ▣ Program Service Plan
- ▣ Quality Assurance Template
- ▣ Policies and Procedures
- ▣ Business Plan (include Proof of Financial Solvency for 6 Months and Letter of Good Standing from MDAT)
- ▣ Licensing Reports (10 years)
- ▣ IRS 990 Form
- ▣ Proof of Insurance

Template Web site: www.dhmf.state.md.us/ohcq/ click on DD Unit

Application Process

- ▣ It is the applicant's responsibility to ensure OHCQ has the current mailing address for the agency. If an applicant changes locations without notification to OHCQ and does not receive mail in a timely manner, there is no recourse for the applicant. Changes in address should be mailed to the Licensing Specialist at the address noted earlier.

Application must be postmarked by Date on Application



Office of Health Care Quality

www.dhmf.state.md.us/ohcq

ATTN: DDA Licensing Specialist

Spring Grove Hospital Center,

Bland Bryant Building

Wade Avenue

Catonsville, Maryland 21228

Telephone Number: (410) 402-8048

Fax Number: (410) 402-8056

4. QUALITY ASSURANCE AND THE QUALITY ASSURANCE TEMPLATE

The Quality Assurance Template

- ▣ Is a standard document to use to develop the framework for your Quality Assurance Plan (QA). The Quality Assurance Template is required as part of the initial application process.
- ▣ Providers will develop their QA plan on an on-going basis using the framework set forth in the QA template.
- ▣ The updated QA plan shall be submitted annually to OHCQ as part of the provider Renewal Application.

The Development of a Quality Assurance (QA) Plan

Defines how you measure the successful delivery of services within your program:

- ▣ What is important to your program?
- ▣ Does your plan reflect the interests and goals of the people you serve?
- ▣ Has your plan been updated to reflect changes in your program?

The Licensee's Q.A. Plan Must at a **Minimum** Include:

- Focus on Individual's Choices, Preferences and Satisfaction
- Have Outcomes that are Measurable
 - Outcomes may be Incorporated into Individual's Plans or Systemic Changes in the Licensee's Operation



The Q.A. System Must put in
Place Proactive Measures to
Improve the Quality of
Services Including Health and
Safety

- Implement Changes Based on the Results Of Q.A. and Other Data Collected
- The Licensee Will Be Held Accountable by the Administration for Accomplishing the Goals and Standards Established in the Q.A. Plan.
- The Administration May Request Documentation to Verify That the Licensee is Accomplishing the Goals and Standards of the Q.A. Plan



Standing Committee

The Licensee Shall Establish 1 Or More Committees to Perform the Following Functions:

- Q.A. Functions of the Regulations
- Review the Agency's Protocol for Identifying, Reporting, Documenting and Investigating Reportable Incidents
- Monitor the Implementing of the Incident Policy And Review All Incidents to Identify Deficient Practices and Recommend Corrections

Standing Committee (cont'd)



- Approve all Behavior Plans (BPs) That Utilize a Restrictive Technique to Ensure that they Comply with D.D.A. Regulations
- Review Approve and Establish a Time Frame for all Restrictions of Rights Not Related to Challenging Behavior
- Review Agency Policies and Procedures to Ensure Adequate Protection of the Legal and Human Rights of Individuals Served

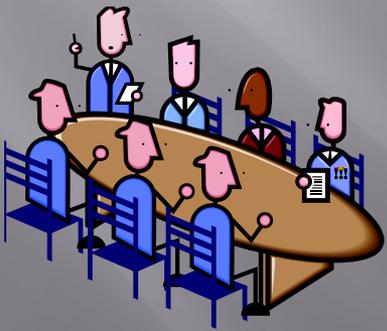
Standing Committee (cont'd)

- The Committee(s) Shall Include an Equal Number of Agency, Individual and/or their Proponent and Community Representatives
- May Consult with Licensed Health Professionals as Needed
- A Committee Member may not Participate in any Decision Involving an Incident in which the Member was Involved or a BP that the Member Has Developed

Standing Committee (cont'd)

- The Committee(s) Shall Meet as Needed, but at least quarterly, per the Policy on Reportable Incidents and Investigations (PORII)
- The Committee(s) Shall Ensure Confidentiality for Individuals Whose Information is Reviewed

Please Note That The
Standing Committee And
The Board Of Directors Are
Two Separate And Distinct
Entities And One Should
Not Be Confused For The
Other



QA thought to remember...

A Bad Licensure Survey is
a Reflection of an
Ineffective QA System



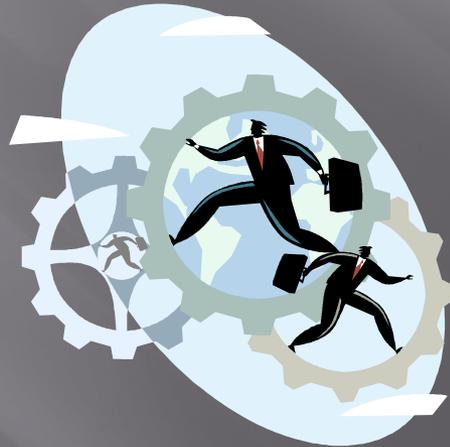
Now-----
The Real Story on Quality

What People Say
or
How To Stay In Business

Myths to Consider

Myth #1

There is a Lack of Providers in the DDA System



Myth #2

There are Loads of People
with DDA Funding Just
Waiting for a Provider to
Come Along

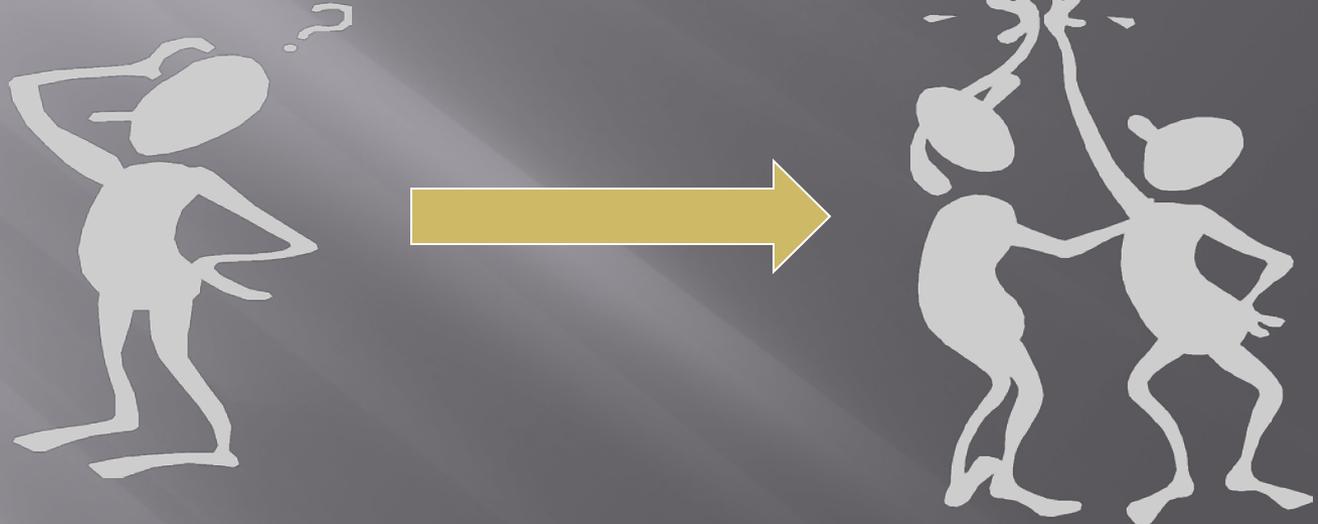


Today in the Field of Developmental Disabilities We:



- View Quality as Responding Proactively to People's Choices, Preferences and Desires
- See Quality As Supporting the Person In Leading A Self-determined Life

The Agency That is Values Driven
and Proactively Supports Self-
determination Says:



**“HOW CAN WE MAKE THIS HAPPEN
FOR THIS PERSON?”**

Remember

- All individuals receiving services in your program have the Right and Freedom to change providers if they are not satisfied with the services they receive.

So How Do You Get Individuals to choose your program?

- Individuals choose their provider based on what is important to them: location, appearance, access to community activities...
- Delivering quality services is a must to compete and to stay in business



Things to Avoid



Cloned Plans

- Your Business Plan,
- QA Plan,
- Individual Plans
- Any Other Type Of Plan Required By DDA



It Should Reflect Your Agency and its Values and Should Not Just be a Template From a Consultant's Computer

Business Failure

- Most Agency Failures in Recent Years Have Been by New Providers
- This is Not an Easy, Get Rich Quick Endeavor
- Failure in the Quality Department will be Certain to Lead to Overall Failure of the Agency

Things to Do

Best Practices

- Learn About Best Practices in the field of Intellectual and Developmental Disabilities
- Understand Individual Rights, Choice, and Decision-Making.

Know Our History

- If You Repeat the Ills of the Past, Your Agency Will Not Fare Well

Understand Regulations

Have a Vision Based on Quality and Build Services That Support Quality

The Best Agencies are Values Driven

The Worst Agencies are Driven by \$\$\$\$



Common Deficiencies Cited by OHCQ Surveyors

POLICIES AND PROCEDURES

Policies and Procedures

Prior to receiving a license each applicant must develop and adopt written policies and procedures as specified in COMAR 10.22.02.10



Policies and Procedures

- A policy is your agency's guiding principle designed to make your position on an issue clear to your stakeholders. A policy defines the course of action your agency will take in upholding specific criteria and/or principles.

Policies and Procedures

- ▣ Each policy adopted by your agency's Governing Body must have a procedure that delineates how the policy will be implemented *by your agency*.
- ▣ Procedure is defined as a method or means of doing or accomplishing something.

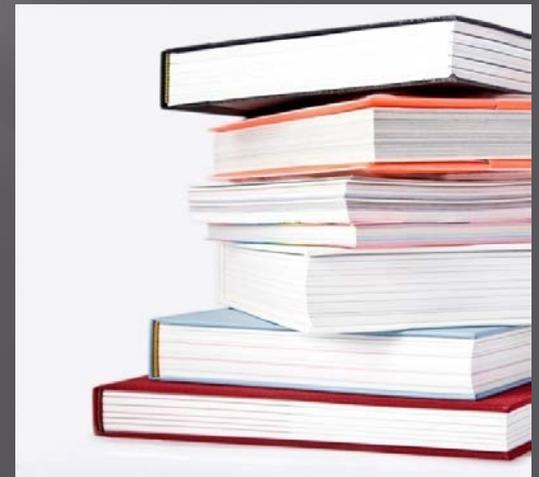
Purpose of Policies and Procedures

- ▣ Provides the framework and structure for your agency
- ▣ Is a “working operations manual” as opposed to a “binder on a shelf”
- ▣ Should reflect DDA’s mission as well as the intent of the regulations
- ▣ Protects individuals served, staff and the licensee

Policies and Procedures

Written policies and procedures are required for:

- ❑ COMAR 10.22.02.10A(1-19)
- ❑ COMAR 10.22.02.12 (A-D) Health and safety requirements
- ❑ COMAR 10.22.02.13 (A-D) Records
- ❑ COMAR 10.27.11 Delegation
of Nursing
- ❑ COMAR 14.31.06 Residential Child
Care Programs



Policies and Procedures

As relevant to the services you will be providing policies and procedures must be developed to address:

10.22.04 Values, outcomes and fundamental rights

10.22.05 Individual plans

10.22.10 Behavior support services

TEMPLATE

Providers must submit their policies and procedures in the same chronological order as set forth in the DD Unit Policy and Procedure Template available on the OHCQ website at

<http://dhmh.maryland.gov/ohcq/DD/default.aspx>

Failure to do so may result in your packet being rejected or delayed.

Policies and Procedures

Disaster and emergency evacuation
plan policy guidelines can be
accessed by going to
dda.dhmfh.maryland.gov

Click on **Disaster Readiness** and then
Emergency plan

POLICY ON REPORTABLE INCIDENTS (PORII)

DDA Incident reporting policy requirements can be accessed by going to dda.dhmh.maryland.gov

Policies and Procedures

Medication Administration policy guidelines can be accessed by going to the Board of Nursing website:

<http://www.mbon.org>

Fundamental Rights

Health General Article 7-1002-1004

It is the policy of this State that, in addition to any other rights, each individual who receives any services provided by the Administration or by a licensee has the following basic rights:

1. Treatment with courtesy, respect, and full recognition of human dignity and individuality;
2. The right to receive treatment, services, and habilitation in the most integrated setting
3. The right to be free from mental and physical abuse;
4. The right to be free from chemical restraints
5. The right to be free from physical restraints
6. The right to privacy;
7. The right to worship as the individual chooses;
8. The right to an accounting of any funds of the individual
9. The right to be informed of all of the most integrated setting service options licensed through the Administration.

Criminal Background Checks



The applicant/licensee may not employ or contract with any individual who has a criminal history which would indicate behaviors potentially harmful to individuals.

Please visit the OHCQ website and review the alerts. An Alert release on 9/8/2009 reviews the requirements of employee background checks

www.dhmf.state.md.us/ohcq/ click "Developmental Disabilities"

Background Checks

Applicant shall provide documentation of application to a company that does criminal background checks or be registered with CJIS (Criminal Justice Information System) for criminal history record check or a criminal background check to complete these checks when the applicant has employees , pursuant to Health-General Article, § 19-1901 et seq., Family Law § 5-560 et seq, if serving a minor, Annotated code of Maryland, and COMAR 12.15.03.

Questions?

Resources

The following websites contain helpful information about starting and maintaining a business. Please visit these websites as they have information you may need:

Small Business Development Center

www.bsos.umd.edu/sbdc

Maryland Department of Business and Economic
Development, Small Business License
Information System

www.blis.state.md.us/main.asp

Resources (continued)

Maryland Department of Transportation,
Minority Business Enterprise/Disadvantaged
Business Enterprise

www.marylandtransportation.com

State Department of Assessments and Taxation

www.dat.state.md.us/sdatweb/checklist.html

Resources (continued)

Office of the Secretary of State - How to Start
a Non-Profit Organization in Maryland

www.sos.state.md.us

Internal Revenue Service Employer
Identification Number – How to Apply

www.irs.ustreas.gov

Resources (continued)

U.S. Small Business Administration

www.sba.gov

The Workers Compensation Commission

www.wcc.state.md.us

Resources (continued)

Websites for COMAR Regulations (Title 10, *Department of Health and Mental Hygiene; Subtitle 22, Developmental Disabilities*) - Please visit the following websites to obtain the regulations that you need:

Maryland Division of State Documents:

<http://www.dsd.state.md.us/comar/comar.aspx>

or

The Developmental Disabilities Administration:

dda.dhmh.maryland.gov

Employee Rights and Protection

Please refer to Maryland Department of Labor, Licensing and Regulation regarding employee rights and protections.

www.dllr.state.md.us

Additional resources:

Office of the Inspector General (OIG)-List of Excluded Individuals/Entities Search:

<http://exclusions.oig.hhs.gov/>

Centers for Medicare and Medicaid Services (CMS):

<http://www.cms.gov/>