Washington, D.C. 20510; and Representatives Wayne T. Gilchrest, Robert L. Ehrlich, Jr., Benjamin L. Cardin, Albert R. Wynn, Steny Hamilton Hoyer, Roscoe G. Bartlett, Elijah E. Cummings, and Constance A. Morella, House Office Building, Washington, D.C. 20515.

Signed April 8, 1997.

## Joint Resolution No. 6

(House Joint Resolution No. 19)

A House Joint Resolution concerning

## Flexibility in the Provision of Long-Term Care

FOR the purpose of expressing the intent of the General Assembly of Maryland regarding the provision of long-term care in the State; and directing the Health Care Financing Administration to be less restrictive in imposing conditions on the receipt of federal funds for the provision of long-term care in the State and to allow the State greater flexibility in deciding how to best utilize the funds available for the provision of long-term care.

WHEREAS, Long-term care is utilized by persons over 65 years old, persons with functional disabilities under 65 years old, persons with developmental disabilities, and persons with mental illness in this State; and

WHEREAS, Demographic trends indicate that expenditures for long-term care will continue to grow and populations in need of long term care will continue to require long-term care; and

WHEREAS, The individual needs of a person in need of long-term care differ depending on the nature of the person's disability; and

WHEREAS, The purpose of long-term care is to provide assistance in allowing the individual to function at maximum ability, which may include habilitative services, rehabilitation, and maintenance of function at optimum levels possible as health status changes; and

WHEREAS, Long-torm-care recipients often are best served in home and community-based settings instead-of institutional settings; and

WHEREAS, While institutional long-term care may be appropriate under some circumstances, long-term care recipients often are best served in home-, community-, and assisted living-based settings; and

WHEREAS, Persons in need of long-term care desire accessible home—and community-based home—, community—, and assisted living-based services to assist them in preserving their independence and preventing institutionalization; and