NURSING FACILITY, INCLUDING INDIVIDUALS WHO, BECAUSE OF SEVERE COGNITIVE IMPAIRMENT, MENTAL ILLNESS, OR OTHER CONDITIONS:

- (1) (I) ARE CURRENTLY UNABLE TO PERFORM AT LEAST TWO ACTIVITIES OF DAILY LIVING WITHOUT HANDS ON ASSISTANCE OR STANDBY ASSISTANCE FROM ANOTHER INDIVIDUAL: AND
- (II) HAVE BEEN OR WILL BE UNABLE TO PERFORM AT LEAST TWO ACTIVITIES OF DAILY LIVING FOR A PERIOD OF AT LEAST 90 DAYS DUE TO A LOSS OF FUNCTIONAL CAPACITY; OR
- (2) NEED-SUBSTANTIAL SUPERVISION FOR PROTECTION AGAINST THREATS TO HEALTH AND SAFETY DUE TO SEVERE COGNITIVE IMPAIRMENT OR MENTAL-H-LNESS.
- (C) THE INDIVIDUAL'S PHYSICIAN, TO THE EXTENT FEASIBLE, SHALL CERTIFY THAT THE INDIVIDUAL REQUIRES THE SERVICES DESCRIBED IN SUBSECTION (B) OF THIS SECTION.
- (a) (1) The Department of Health and Mental Hygiene, in consultation with interested stakeholders, shall conduct a study and a comprehensive analysis of the options that may be available to the State to increase access to long-term services, including home—and community—based services such as adult medical day care, for individuals at high risk of institutionalization because of cognitive impairments, mental illness, traumatic brain injury, or other conditions, who meet financial eligibility criteria in effect as of June 1, 2007.
 - (2) The study and analysis shall include:
- (i) a review of the practices of other states regarding the provision of long-term care services;
- (ii) a determination of the feasibility of developing criteria for an alternative level of care;
- (iii) a determination of the feasibility of increasing access to long-term care services through the Federal Deficit Reduction Act, the State Plan Amendments, the Older Adults Waiver, and other options available to the State; and
- (iv) a cost-benefit analysis of the options examined, including the projected long-term savings to the State realized by the delay or reduction in need for the provision of care in hospitals or other institutional settings.