



Wes Moore, Governor · Aruna Miller, Lt. Governor · Meena Seshamani, M.D., Ph.D., Secretary

MARYLAND MEDICAL ASSISTANCE PROGRAM

Waiver for Children with Autism Spectrum Disorder Transmittal No. 36

Waiver for Adults with Brain Injury (TBI) Transmittal No. 17

Community First Choice Transmittal No. 24

Community Personal Assistance Services Transmittal No. 24

Home and Community-Based Options Waiver Transmittal No. 26

Increased Community Services Transmittal No. 13

Model Waiver Transmittal No. 65

Home Health Transmittal No. 82

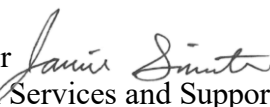
Medical Day Care Transmittal No. 107

EPSDT Nursing Services Transmittal No. 54

Personal Assistance/Care Services Transmittal No. 59

August 10, 2026

TO: Autism Waiver Providers
Brain Injury Waiver Providers
Community First Choice Providers
Community Personal Assistance Services Providers
Home and Community-Based Options Waiver Providers
Increased Community Services Providers
Model Waiver Providers
Home Health Agency Administrators
Medical Day Care Providers
EPSDT Nursing Services Providers
Personal Assistance/Care Service Providers

FROM: Jamie Smith, Director 
Office of Long Term Services and Support

RE: Updates for the Home and Community-Based Services Cost Survey

NOTE: Please ensure that appropriate staff members in your organization are informed of the contents of this transmittal.

This transmittal contains updates regarding the Home and Community-Based Services (HCBS) Cost Survey including the submission deadline, HCBS providers required to complete the survey, and implications for failure to submit the survey. This transmittal supersedes [PT 95-26 Implementation of Home and Community-Based Services Cost Survey](#).

The HCBS Cost Survey was implemented on July 1, 2026, to align with the Payment Adequacy provision of the Centers for Medicare & Medicaid Services Ensuring Access to Medicaid Services Final Rule (CMS-2442-F). The rule requires reporting on the percentage of payments for homemaker, home health aide, personal care, and habilitation services that are spent on direct care worker compensation.

To comply with the rule, Maryland Medicaid developed the HCBS Cost Survey in partnership with Myers and Stauffer LC and the Hilltop Institute to establish an annual process for collecting the required data, including provider costs, utilization, workforce data, and applicable direct care worker compensation for HCBS.

In addition to meeting federal reporting requirements, the HCBS Cost Survey will provide comprehensive cost data to support the development of a data-driven HCBS rate-setting methodology and promote the long-term sustainability of HCBS programs.

The survey is required for all Medicaid-enrolled HCBS providers that delivered non-Developmental Disabilities Administration (DDA) HCBS during Fiscal Year 2026. This requirement applies regardless of whether the services furnished are among the specific service categories subject to the Payment Adequacy reporting requirements.

Providers enrolled with DDA are not required to complete the HCBS Cost Survey unless they also furnish one or more of the services identified on the Services tab of the HCBS Cost Survey tool. DDA-enrolled providers that are not required to complete the HCBS Cost Survey should instead follow the DDA General Ledger (GL) Data Collection process and instructions available on the [DDA GL Data Collection Tool website](#).

Updated Submission Deadline

The submission deadline for the HCBS Cost Survey has been extended from September 30, 2026, to December 31, 2026. All Medicaid-enrolled providers who billed for HCBS delivered during the reporting period of July 1, 2025, through June 30, 2026, are required to:

- (1) Complete the HCBS Cost Survey in its entirety;
- (2) Submit accurate and complete financial and operational data for all HCBS billed during the reporting period of July 1, 2025, through June 30, 2026; and
- (3) Submit the completed survey no later than December 31, 2026.

Failure to Submit

Providers that do not submit a completed HCBS Cost Survey by December 31, 2026, will be subject to a Medicaid payment suspension beginning January 1, 2027. The payment suspension will remain in effect until Maryland Medicaid receives a completed HCBS Cost Survey that satisfies all reporting requirements.

Maryland Medicaid strongly encourages providers to submit their surveys as early as possible and to utilize the available training materials and technical assistance to ensure timely and accurate completion.

Training and Live Q&A

To support providers successfully completing the survey, recorded training modules for each section of the survey are available on the Myers and Stauffer, LC [HCBS Providers Cost Survey website](#). Additionally, live Q&A sessions will be hosted on the following dates, with specific meeting information to be announced on the website:

- (1) August 5, 2026;
- (2) August 20, 2026;
- (3) September 2, 2026; and
- (4) September 15, 2026.

Each Q&A session will be recorded and posted on the website. Additional guidance will be sent by email or mail to the individual designated by each provider agency to receive provider revalidation communications. Recipients are responsible for sharing this information with the appropriate internal staff to ensure timely completion of the survey requirements.

For more information, please visit the Myers and Stauffer, LC [Annual HCBS Providers Cost Survey website](#) the Maryland Medicaid [Annual HCBS Providers Cost Survey](#) website. Providers do not need to wait for a live Q&A session to ask questions. Questions regarding this transmittal or the general Cost Survey process may be directed to mdhcostsurvey@mslc.com or wajiha.farooqi@maryland.gov.