

# HOUSE BILL 1615

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CF SB 1231

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By: **Delegates Valentino-Smith, Reznik, Gutierrez, Haynes, Hettleman, Jones, Krimm, Lam, Lierman, and McIntosh**

Introduced and read first time: February 9, 2018

Assigned to: Appropriations

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Committee Report: Favorable with amendments

House action: Adopted

Read second time: March 12, 2018

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## CHAPTER \_\_\_\_\_

1 AN ACT concerning

2 **Human Services – Temporary Disability Assistance Program**

3 FOR the purpose of establishing the Temporary Disability Assistance Program in the  
4 Department of Human Services; requiring the Family Investment Administration to  
5 be the central coordinating and directing agency of the Program; establishing the  
6 primary purpose of the Program; requiring the Program to be administered by the  
7 local departments of social services in a certain manner; specifying the requirements  
8 for ~~eligibility for~~ entitlement to assistance under the Program; requiring an  
9 application for assistance under the Program to be made in a certain manner and  
10 include a certain medical ~~report form~~; requiring a local department to verify that  
11 certain requirements are met, and notify applicants of certain determinations, ~~and~~  
12 ~~record certain information~~; requiring local departments to determine eligibility  
13 periods for recipients based on certain information; establishing certain restrictions  
14 on the length of eligibility periods under certain circumstances; authorizing a local  
15 department to establish certain additional eligibility periods under certain  
16 circumstances; requiring a local department to adjust the eligibility period under  
17 certain circumstances; providing for the automatic end of a recipient's eligibility for  
18 assistance; ~~requiring local departments to determine the amount and timing of~~  
19 ~~assistance in accordance with certain regulations~~; requiring assistance to be paid to  
20 an applicant in a certain manner; requiring the monthly allowable assistance under  
21 the Program to equal a certain amount in a certain fiscal year; requiring the monthly  
22 allowable assistance under the Program to equal at least certain percentages of a  
23 certain benefit in certain fiscal years; ~~authorizing an applicant or recipient to appeal~~  
24 ~~certain actions of local departments to the Administration in certain circumstances~~;

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EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.

Underlining indicates amendments to bill.

~~Strike out~~ indicates matter stricken from the bill by amendment or deleted from the law by amendment.



~~requiring the Administration to provide certain notice and an opportunity for a hearing in certain circumstances; authorizing the Administration to initiate certain reviews and make certain investigations; requiring the Administration to make certain decisions; requiring a local department to comply with a certain decision; requiring the Administration to supervise the administration of the Program; and adopt certain regulations, prescribe certain forms, and take certain other actions; stating the intent of the General Assembly; defining certain terms; and generally relating to the Temporary Disability Assistance Program.~~

BY repealing and reenacting, without amendments,

Article – Human Services

Section 5–201

Annotated Code of Maryland

(2007 Volume and 2017 Supplement)

BY repealing and reenacting, with amendments,

Article – Human Services

Section 5–205(a)

Annotated Code of Maryland

(2007 Volume and 2017 Supplement)

BY adding to

Article – Human Services

Section 5–5B–01 through ~~5–5B–12~~ 5–5B–09 to be under the new subtitle “Subtitle 5B. Temporary Disability Assistance Program”

Annotated Code of Maryland

(2007 Volume and 2017 Supplement)

SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,

That the Laws of Maryland read as follows:

### Article – Human Services

5–201.

There is a Family Investment Administration in the Department.

5–205.

(a) The Administration shall be the central coordinating and directing agency of all public assistance programs in the State, including:

(1) the Family Investment Program and related cash benefit programs;

(2) public assistance to adults;

(3) emergency assistance;

1 (4) food stamps;

2 (5) medical assistance eligibility determinations;

3 (6) the Energy Assistance Program; [and]

4 (7) **THE TEMPORARY DISABILITY ASSISTANCE PROGRAM; AND**

5 [(7)] (8) any other public assistance activities financed wholly or partly  
6 by the Administration.

7 **SUBTITLE 5B. TEMPORARY DISABILITY ASSISTANCE PROGRAM.**

8 **5-5B-01.**

9 (A) **IN THIS SUBTITLE THE FOLLOWING WORDS HAVE THE MEANINGS**  
10 **INDICATED.**

11 (B) **“APPLICANT” MEANS AN INDIVIDUAL WHO APPLIES FOR ASSISTANCE**  
12 **UNDER THIS SUBTITLE.**

13 (C) **“ASSISTANCE” MEANS CASH PAYMENTS MADE TO A RECIPIENT.**

14 (D) **“ELIGIBILITY PERIOD” MEANS THE PERIOD OF TIME AN INDIVIDUAL IS**  
15 **ELIGIBLE FOR ASSISTANCE UNDER THIS SUBTITLE.**

16 (E) **“IMPAIRMENT” MEANS A MEDICALLY VERIFIED MENTAL OR PHYSICAL**  
17 **CONDITION THAT RENDERS AN INDIVIDUAL UNABLE TO WORK AT ANY OCCUPATION.**

18 (F) **“PROGRAM” MEANS THE TEMPORARY DISABILITY ASSISTANCE**  
19 **PROGRAM.**

20 (G) **“RECIPIENT” MEANS AN INDIVIDUAL WHO RECEIVES, OR HAS**  
21 **RECEIVED, ASSISTANCE UNDER THIS SUBTITLE.**

22 **5-5B-02.**

23 (A) **THERE IS A STATE-FUNDED TEMPORARY DISABILITY ASSISTANCE**  
24 **PROGRAM IN THE DEPARTMENT.**

25 (B) **THE PRIMARY PURPOSE OF THE PROGRAM IS TO PROVIDE ASSISTANCE**  
26 **TO LOW-INCOME DISABLED ADULTS WHO ARE INELIGIBLE FOR OTHER CATEGORIES**  
27 **OF ASSISTANCE.**

1 (C) THE PROGRAM SHALL BE:

2 (1) IN EFFECT IN EACH COUNTY; AND

3 (2) ADMINISTERED BY THE LOCAL DEPARTMENTS IN ACCORDANCE  
4 WITH REGULATIONS THAT THE ADMINISTRATION ADOPTS.

5 ~~5-5B-03.~~

6 ~~(A) SUBJECT TO § 5-5B-04 OF THIS SUBTITLE, AN APPLICANT IS ELIGIBLE~~  
7 ~~FOR ENTITLED TO ASSISTANCE UNDER THIS SUBTITLE IF THE APPLICANT IS:~~

8 (1) A CITIZEN OF THE UNITED STATES OR A QUALIFIED ALIEN AS  
9 DETERMINED BY THE ADMINISTRATION;

10 (2) A RESIDENT OF THE STATE AND THE JURISDICTION SERVED BY  
11 THE LOCAL DEPARTMENT AT THE TIME OF APPLICATION;

12 (3) UNEMPLOYED;

13 (4) NOT RECEIVING ANY OTHER MEANS-TESTED CASH ASSISTANCE;

14 AND

15 (5) DETERMINED, BASED ON THE MEDICAL FINDINGS FORM  
16 REQUIRED UNDER § 5-5B-05 OF THIS SUBTITLE, TO HAVE AN IMPAIRMENT ~~THAT~~  
17 ~~RENDERS THE APPLICANT UNABLE TO WORK FOR~~ THAT IS EXPECTED TO LAST AT  
18 LEAST 3 MONTHS.

19 ~~(B) AN APPLICANT MAY BE ELIGIBLE FOR ASSISTANCE UNDER THIS~~  
20 ~~SUBTITLE IF THE APPLICANT HAS APPLIED FOR SOCIAL SECURITY DISABILITY~~  
21 ~~INSURANCE OR SUPPLEMENTAL SECURITY INSURANCE DURING THE PERIOD WHEN~~  
22 ~~THE APPLICATION IS BEING PROCESSED.~~

23 ~~5-5B-04.~~

24 (A) IF AN APPLICANT HAS AN IMPAIRMENT THAT IS EXPECTED TO ~~RENDER~~  
25 ~~THE APPLICANT UNABLE TO WORK FOR~~ LAST AT LEAST 12 MONTHS, THE APPLICANT  
26 SHALL:

27 (1) PURSUE SUPPLEMENTAL SECURITY ~~INSURANCE~~ INCOME; AND

28 (2) SIGN AN INTERIM PAYMENT REIMBURSEMENT AUTHORIZATION  
29 THAT:

1           ~~1~~ (I) GIVES THE SOCIAL SECURITY ADMINISTRATION  
2 AUTHORITY TO MAIL THE APPLICANT'S PAYMENTS TO THE DEPARTMENT OR THE  
3 LOCAL DEPARTMENT; AND

4           ~~2~~ (II) AUTHORIZES THE DEPARTMENT OR LOCAL DEPARTMENT  
5 TO DEDUCT FROM THE PAYMENTS AN AMOUNT EQUAL TO THE ASSISTANCE GRANTED  
6 THE APPLICANT UNDER THIS SUBTITLE.

7           (B) A RECIPIENT WHO IS OTHERWISE ELIGIBLE UNDER THIS SUBTITLE MAY  
8 NOT RECEIVE ASSISTANCE FOR MORE THAN 9 MONTHS IN A 36-MONTH PERIOD,  
9 UNLESS THE RECIPIENT:

10           (1) HAS BEEN CERTIFIED AS MEDICALLY DISABLED BY A LICENSED  
11 HEALTH CARE PROVIDER ~~IN A MANNER PRESCRIBED BY THE ADMINISTRATION ON~~  
12 THE MEDICAL FORM REQUIRED UNDER § 5-5B-05 OF THIS SUBTITLE; AND

13           (2) HAS A PENDING APPLICATION FOR SUPPLEMENTAL SECURITY  
14 ~~INSURANCE~~ INCOME THAT HAS NOT BEEN WITHDRAWN OR FINALLY DENIED.

15 **5-5B-05.**

16           (A) AN APPLICATION FOR ASSISTANCE UNDER THIS SUBTITLE SHALL BE  
17 MADE:

18           (1) TO THE LOCAL DEPARTMENT OF THE COUNTY WHERE THE  
19 APPLICANT RESIDES; AND

20           (2) IN THE FORM AND MANNER THAT THE ADMINISTRATION  
21 REQUIRES.

22           (B) AN APPLICATION FOR ASSISTANCE UNDER THIS SUBTITLE SHALL  
23 INCLUDE A MEDICAL ~~REPORT~~ FORM THAT:

24           (1) CONTAINS ~~A STATEMENT ON THE NATURE~~ THE NAME AND  
25 ESTIMATED DURATION OF THE APPLICANT'S IMPAIRMENT; AND

26           (2) IS SIGNED BY ~~AN EXAMINING PHYSICIAN~~ A LICENSED HEALTH  
27 CARE PROVIDER.

28 **5-5B-06.**

29           (A) IN DETERMINING ~~THAT~~ WHETHER AN APPLICANT QUALIFIES FOR  
30 ASSISTANCE UNDER THIS SUBTITLE, THE LOCAL DEPARTMENT SHALL ~~VERIFY THAT~~

1           ~~(1) THE APPLICANT'S MEDICAL REPORT INDICATES THE APPLICANT~~  
 2 ~~HAS AN IMPAIRMENT PREVENTING THE APPLICANT FROM WORKING FOR AT LEAST~~  
 3 ~~3 MONTHS; AND~~

4           ~~(2) EVALUATE WHETHER THE APPLICANT MEETS THE OTHER~~  
 5 CRITERIA LISTED UNDER § 5-5B-03 OF THIS SUBTITLE.

6           (B) THE LOCAL DEPARTMENT SHALL NOTIFY THE APPLICANT OF ITS  
 7 DETERMINATION UNDER SUBSECTION (A) OF THIS SECTION.

8           ~~(C) ON RECEIPT OF AN APPLICATION FOR ASSISTANCE UNDER THIS~~  
 9 ~~SUBTITLE, THE LOCAL DEPARTMENT SHALL MAKE A RECORD OF:~~

10           ~~(1) THE CIRCUMSTANCES OF THE APPLICANT;~~

11           ~~(2) THE FACTS SUPPORTING THE APPLICATION; AND~~

12           ~~(3) ANY OTHER INFORMATION THAT THE ADMINISTRATION~~  
 13 ~~REQUIRES BY REGULATION.~~

14 5-5B-07.

15           (A) THE LOCAL DEPARTMENT SHALL DETERMINE AN ELIGIBILITY PERIOD  
 16 FOR A RECIPIENT BASED ON THE ESTIMATED DURATION OF THE IMPAIRMENT  
 17 INDICATED IN THE MEDICAL ~~REPORT PROVIDED~~ FORM REQUIRED UNDER §  
 18 5-5B-05 OF THIS SUBTITLE.

19           (B) THE ELIGIBILITY PERIOD DETERMINED BY THE LOCAL DEPARTMENT:

20           (1) MAY BE LESS THAN THE ESTIMATED RECOVERY TIME INDICATED  
 21 ~~IN~~ ON THE MEDICAL REPORT FORM; AND

22           (2) MAY NOT EXCEED THE ESTIMATED RECOVERY TIME INDICATED ~~IN~~  
 23 ON THE MEDICAL REPORT FORM.

24           (C) IF A LOCAL DEPARTMENT DETERMINES THAT A RECIPIENT'S  
 25 ELIGIBILITY PERIOD IS AT LEAST 3 MONTHS, BUT LESS THAN 12 MONTHS, THE  
 26 RECIPIENT SHALL BE ELIGIBLE FOR ASSISTANCE FOR NOT MORE THAN 9 MONTHS IN  
 27 A 36-MONTH PERIOD.

28           (D) (1) IF THE LOCAL DEPARTMENT DETERMINES THAT A RECIPIENT IS  
 29 UNLIKELY TO RECOVER IN LESS THAN 12 MONTHS, THE RECIPIENT SHALL BE  
 30 ELIGIBLE FOR ASSISTANCE FOR NOT MORE THAN 12 MONTHS IF THE RECIPIENT:

1 (I) PURSUES SUPPLEMENTAL SECURITY ~~INSURANCE~~ INCOME;  
2 AND

3 (II) OTHERWISE REMAINS ELIGIBLE FOR ASSISTANCE UNDER  
4 THIS SUBTITLE.

5 (2) THE LOCAL DEPARTMENT MAY ESTABLISH ADDITIONAL  
6 ELIGIBILITY PERIODS, EACH NOT EXCEEDING 12 MONTHS, IF THE RECIPIENT:

7 (I) REAPPLIES FOR ASSISTANCE UNDER THIS SUBTITLE;

8 (II) MAINTAINS ELIGIBILITY; AND

9 (III) CONTINUES TO PURSUE A SUPPLEMENTAL SECURITY  
10 INSURANCE INCOME CLAIM.

11 (3) THE LOCAL DEPARTMENT SHALL ADJUST THE ELIGIBILITY  
12 PERIOD FOR A RECIPIENT TO BE NOT MORE THAN 9 MONTHS IN A 36-MONTH PERIOD  
13 IF THE RECIPIENT:

14 (I) WITHDRAWS THE RECIPIENT'S APPLICATION FOR  
15 SUPPLEMENTAL SECURITY INSURANCE INCOME; OR

16 (II) IS DENIED THE SUPPLEMENTAL SECURITY INSURANCE  
17 INCOME CLAIM.

18 (E) UNLESS A RECIPIENT REAPPLIES FOR ASSISTANCE AND THE LOCAL  
19 DEPARTMENT ESTABLISHES AN ADDITIONAL ELIGIBILITY PERIOD, A RECIPIENT'S  
20 ELIGIBILITY FOR ASSISTANCE UNDER THIS SUBTITLE WILL AUTOMATICALLY END AT  
21 THE END OF THE ELIGIBILITY PERIOD ESTABLISHED BY THE LOCAL DEPARTMENT.

22 (F) IF A RECIPIENT IS ELIGIBLE FOR ANY PORTION OF A MONTH, THE  
23 RECIPIENT SHALL BE ELIGIBLE FOR THE ENTIRE MONTH.

24 ~~5-5B-08.~~

25 ~~(A) THE LOCAL DEPARTMENT SHALL, IN ACCORDANCE WITH REGULATIONS~~  
26 ~~THAT THE ADMINISTRATION ADOPTS, DETERMINE THE AMOUNT OF ASSISTANCE~~  
27 ~~AND THE DATE ON WHICH THE ASSISTANCE WILL BEGIN.~~

28 ~~(B) ASSISTANCE SHALL BE PAID TO THE APPLICANT MONTHLY OR AS THE~~  
29 ~~ADMINISTRATION OTHERWISE DETERMINES.~~

30 ~~5-5B-09.~~

1           **(A) THE GOVERNOR SHALL PROVIDE SUFFICIENT FUNDS IN THE BUDGET**  
2 **TO ENSURE THAT THE VALUE OF THE MAXIMUM MONTHLY ALLOWABLE ASSISTANCE**  
3 **UNDER THE PROGRAM IS EQUAL TO AT LEAST:**

4           **(1) FOR FISCAL YEAR 2020, ~~EQUAL TO 75% OF THE MONTHLY~~**  
5 **~~ALLOWABLE BENEFIT FOR A ONE-PERSON HOUSEHOLD RECEIVING TEMPORARY~~**  
6 **~~CASH ASSISTANCE THROUGH THE FAMILY INVESTMENT PROGRAM IN FISCAL YEAR~~**  
7 **~~2020~~ \$215;**

8           **(2) FOR FISCAL YEAR 2021, ~~EQUAL TO 85%~~ 72% OF THE MONTHLY**  
9 **ALLOWABLE BENEFIT FOR A ONE-PERSON HOUSEHOLD RECEIVING TEMPORARY**  
10 **CASH ASSISTANCE THROUGH THE FAMILY INVESTMENT PROGRAM IN FISCAL YEAR**  
11 **2021; ~~AND~~**

12           **(3) FOR FISCAL YEAR 2022 ~~AND EACH FISCAL YEAR THEREAFTER,~~**  
13 **~~EQUAL TO, 75% OF~~ THE MONTHLY ALLOWABLE BENEFIT FOR A ONE-PERSON**  
14 **HOUSEHOLD RECEIVING TEMPORARY CASH ASSISTANCE THROUGH THE FAMILY**  
15 **INVESTMENT PROGRAM IN ~~THAT FISCAL YEAR~~ FISCAL YEAR 2022;**

16           **(4) FOR FISCAL YEAR 2023, 78% OF THE MONTHLY ALLOWABLE**  
17 **BENEFIT FOR A ONE-PERSON HOUSEHOLD RECEIVING TEMPORARY CASH**  
18 **ASSISTANCE THROUGH THE FAMILY INVESTMENT PROGRAM IN FISCAL YEAR 2023;**

19           **(5) FOR FISCAL YEAR 2024, 81% OF THE MONTHLY ALLOWABLE**  
20 **BENEFIT FOR A ONE-PERSON HOUSEHOLD RECEIVING TEMPORARY CASH**  
21 **ASSISTANCE THROUGH THE FAMILY INVESTMENT PROGRAM IN FISCAL YEAR 2024;**

22           **(6) FOR FISCAL YEAR 2025, 84% OF THE MONTHLY ALLOWABLE**  
23 **BENEFIT FOR A ONE-PERSON HOUSEHOLD RECEIVING TEMPORARY CASH**  
24 **ASSISTANCE THROUGH THE FAMILY INVESTMENT PROGRAM IN FISCAL YEAR 2025;**

25           **(7) FOR FISCAL YEAR 2026, 87% OF THE MONTHLY ALLOWABLE**  
26 **BENEFIT FOR A ONE-PERSON HOUSEHOLD RECEIVING TEMPORARY CASH**  
27 **ASSISTANCE THROUGH THE FAMILY INVESTMENT PROGRAM IN FISCAL YEAR 2026;**

28           **(8) FOR FISCAL YEAR 2027, 90% OF THE MONTHLY ALLOWABLE**  
29 **BENEFIT FOR A ONE-PERSON HOUSEHOLD RECEIVING TEMPORARY CASH**  
30 **ASSISTANCE THROUGH THE FAMILY INVESTMENT PROGRAM IN FISCAL YEAR 2027;**

31           **(9) FOR FISCAL YEAR 2028, 93% OF THE MONTHLY ALLOWABLE**  
32 **BENEFIT FOR A ONE-PERSON HOUSEHOLD RECEIVING TEMPORARY CASH**  
33 **ASSISTANCE THROUGH THE FAMILY INVESTMENT PROGRAM IN FISCAL YEAR 2028;**



1           (10) FOR FISCAL YEAR 2029, 96% OF THE MONTHLY ALLOWABLE  
 2 BENEFIT FOR A ONE-PERSON HOUSEHOLD RECEIVING TEMPORARY CASH  
 3 ASSISTANCE THROUGH THE FAMILY INVESTMENT PROGRAM IN FISCAL YEAR 2029;  
 4 AND

5           (11) FOR FISCAL YEAR 2030 AND EACH YEAR THEREAFTER, 100% OF  
 6 THE MONTHLY ALLOWABLE BENEFIT FOR A ONE-PERSON HOUSEHOLD RECEIVING  
 7 TEMPORARY CASH ASSISTANCE THROUGH THE FAMILY INVESTMENT PROGRAM FOR  
 8 THAT FISCAL YEAR.

9           (B) ASSISTANCE SHALL BE PAID TO THE APPLICANT MONTHLY.

10 ~~5-5B-10.~~

11           ~~(A) AN APPLICANT OR A RECIPIENT MAY APPEAL TO THE ADMINISTRATION~~  
 12 ~~IF THE LOCAL DEPARTMENT:~~

13           ~~(1) DOES NOT ACT ON AN APPLICATION WITHIN A REASONABLE TIME;~~

14           ~~(2) DENIES AN APPLICATION WHOLLY OR PARTLY; OR~~

15           ~~(3) MODIFIES OR CANCELS A GRANT OF ASSISTANCE.~~

16           ~~(B) (1) THE APPEAL SHALL BE FILED IN THE MANNER AND FORM THAT~~  
 17 ~~THE ADMINISTRATION REQUIRES.~~

18           ~~(2) THE ADMINISTRATION SHALL GIVE THE APPLICANT OR~~  
 19 ~~RECIPIENT REASONABLE NOTICE AND AN OPPORTUNITY FOR A HEARING ON THE~~  
 20 ~~APPEAL.~~

21           ~~(C) (1) ON ITS OWN MOTION, THE ADMINISTRATION MAY:~~

22           ~~(I) REVIEW ANY DECISION OF A LOCAL DEPARTMENT; AND~~

23           ~~(II) CONSIDER AN APPLICATION ON WHICH THE LOCAL~~  
 24 ~~DEPARTMENT HAS NOT MADE A DECISION WITHIN A REASONABLE TIME.~~

25           ~~(2) THE ADMINISTRATION:~~

26           ~~(I) MAY MAKE ANY ADDITIONAL INVESTIGATION IT CONSIDERS~~  
 27 ~~NECESSARY; AND~~

~~(H) SHALL MAKE ANY DECISION ON THE GRANTING OF ASSISTANCE AND THE AMOUNT OF ASSISTANCE IT CONSIDERS JUSTIFIED IN ACCORDANCE WITH THIS SUBTITLE.~~

~~(3) ON REQUEST, THE ADMINISTRATION SHALL GIVE AN APPLICANT OR RECIPIENT AFFECTED BY A DECISION MADE UNDER PARAGRAPH (2) OF THIS SUBSECTION REASONABLE NOTICE AND AN OPPORTUNITY FOR A HEARING.~~

~~(D) (1) A DECISION OF THE ADMINISTRATION UNDER THIS SECTION IS FINAL AND BINDING ON THE LOCAL DEPARTMENT.~~

~~(2) THE LOCAL DEPARTMENT SHALL COMPLY WITH A DECISION OF THE ADMINISTRATION UNDER THIS SECTION.~~

~~5-5B-11, 5-5B-09.~~

**THE ADMINISTRATION SHALL:**

~~(1) SUPERVISE THE ADMINISTRATION OF THE PROGRAM UNDER THIS SUBTITLE BY THE LOCAL DEPARTMENTS; AND~~

~~(2) ADOPT REGULATIONS NECESSARY OR DESIRABLE TO CARRY OUT THIS SUBTITLE, INCLUDING REGULATIONS TO ESTABLISH ELIGIBILITY REQUIREMENTS AND ANY OTHER REQUIREMENTS NOT SET FORTH IN THIS SUBTITLE;~~

~~(3) PRESCRIBE THE FORM OF AND SUPPLY TO THE LOCAL DEPARTMENTS ANY FORMS THE ADMINISTRATION CONSIDERS NECESSARY OR DESIRABLE; AND~~

~~(4) TAKE ANY OTHER ACTION NECESSARY OR DESIRABLE TO CARRY OUT THIS SUBTITLE.~~

~~5-5B-12.~~

**EACH LOCAL DEPARTMENT SHALL:**

~~(1) ADMINISTER THIS SUBTITLE IN ITS COUNTY IN ACCORDANCE WITH THE REGULATIONS THE ADMINISTRATION ADOPTS; AND~~

~~(2) REPORT TO THE ADMINISTRATION AS THE ADMINISTRATION DIRECTS.~~

SECTION 2. AND BE IT FURTHER ENACTED, That it is the intent of the General Assembly that the eligibility requirements for the Temporary Disability Assistance

1 Program, codified under Section 1 of this Act and previously established under COMAR  
2 07.03.05, are not made more restrictive than at the time this Act is enacted.

3 SECTION 3. AND BE IT FURTHER ENACTED, That this Act shall take effect  
4 October 1, 2018.

Approved:

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Governor.

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Speaker of the House of Delegates.

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President of the Senate.