Maryland cuts to disability care could disrupt services for thousands

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March 28, 2026 at 7:00 AM EDT



Crowds of advocates, activists, families, and disabled individuals rallied in the Lawyers Mall outside of the State House in Annapolis to protest the cuts to the Developmental Disabilities Administration. The proposed cuts would harm the access to aid and assistance for many disabled individuals and their care givers, increasing stress and negatively influencing their quality of life. (Surya Vaidy/Staff)

Maryland lawmakers are poised to greenlight a state budget that cuts nearly $127 million in developmental disability services, including new policies that enforce wage caps and care hour policies. Officials say the move is necessary to keep over $1 billion in federal funding, but advocates warn it will weaken care for vulnerable residents.

“Let there be no mistake, these cuts will be painful,” said Laura Howell, the CEO of the Maryland Association of Community Services. The state and federal matching fund losses amount to

about a 7.5% reduction to the state Developmental Disabilities Administration's (DDA) budget.

The budget's reductions target the DDA through a cost containment strategy that includes wage caps for caregivers, limits on family-paid care hours, and rate cuts for service providers. These changes affect both traditional provider-run programs and self-directed care, where individuals can manage their own services, raising concerns about staff retention, service availability, and long-term stability.

What are the "cost containment actions"?

Caretakers, both familial and those who aren't family, in the self-directed model will face drastic wage cuts — a $30 per hour cap for most non-family caregivers and about a $23 cap for family caregivers.

Some staff members who help Carin Smith's daughter, who is non-verbal and has cerebral palsy, will receive a $7 hourly pay cut. Smith's daughter is in the self-directed model, living on her own with around-the-clock care. She warned that her daughter may lose some of her long-time caretakers as a result.

"This is going to completely dismantle the self-direction program that my daughter's been in for 18 years," Smith said.

The self-directed care model would also face a limit to the number of hours family members as staff could be paid to take care of their relatives. The policy would limit all members of a family collectively to 60 paid hours per week. Currently, there is a limit of 40 paid hours per week per family member.

The provider care model will be cut by 2% for community services, reducing the amount providers can spend on services like group home living, day programs and experiences. The rate includes costs like wages, transportation, supplies and administrative overhead.

“It can make it a lot harder for providers … to recruit and retain staff. Because of the rate cuts, there are services we just aren’t going to be able to provide anymore because of the rate cuts,” said Leslie Thompson, the Maryland division director for the care provider Chimes. “There’s just a lot of unknowns right now.”

The budget plan also more formally regulates the provider program’s dedicated hours policy, which requires people who share caregivers to use shared hours before using dedicated, one-on-one hours.

Howell said there are already concerns about the department limiting dedicated hours to people who need this individualized care.

Why lawmakers say the cuts are necessary for the state budget, and the future of care in Maryland

This is the second year in a row the DDA is subject to budget cuts.

Lawmakers defended this year’s reductions as a way to preserve the federal funds that match what the state government provides for community services. To receive these dollars, the state has to keep the funding restricted to an average of $217,000 per person, or the estimated cost of housing a person in an institution. If program costs increase by 18%, the state would exceed the threshold and lose federal funds, which lawmakers say could happen without the cost-containment measures.

“We think we’ve taken a measured approach to not take more than what would be needed, and we do hope that it would be enough to stay below that,” Democrat Del. Ben Barnes, the chair of the Appropriations Committee, said. “We didn’t want to go too far, because these are real programs in people’s lives.”

The Maryland General Assembly reduced the proposed DDA cuts in Gov. Wes Moore’s budget proposal by about $27 million. The General Assembly budget plan also removed a $500,000 cap on an individual’s care, which was highly criticized as harming people with the most complex care needs.

“Everyone is going to feel pain from these budget cuts,” Howell said. “We do believe that the House and Senate Budget Committees really still care about this issue and really tried to restore some funding, and they also changed some of the nature of the ways that the cost containment or the budget cuts would occur to have them not have as big an impact on people with the most significant disabilities.”

Funding for community service models, which include provider and self-directed services, has nearly doubled in the past five years, according to the Department of Legislative Services.

In the current fiscal year, the program spent more money than was budgeted for the program. Moore announced Friday a supplemental budget with $36 million for the program to fill this funding gap. Also included in the supplemental budget was $2.6 million to help address financial management concerns within the program.

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