

THE MARYLAND MODEL

UNIQUELY MARYLAND, UNIQUELY SUCCESSFUL

Getting right what other states are getting wrong.

Why Marylanders can't afford to lose the Maryland Model

LOWERS COST OF CARE WHILE MAINTAINING HIGH-QUALITY CARE

1

Maryland's total cost of care spending growth rate is **3.8%** below the nation. Maryland hospitals receive high marks for quality care, while also ensuring costs are kept at a minimum.



\$350-\$400
MARYLAND

Bill for an appointment to a top neurologist at Johns Hopkins



\$1,775
NEW YORK

Bill for a neurologist visit in New York¹

INVESTS IN COMMUNITIES

2

Our hospitals are held accountable for improving the health of their community and partner to support Marylanders' social needs, including access to food, housing, employment and transportation.

SUPPORTS EQUAL ACCESS TO HOSPITAL CARE

3

Everyone is charged the same regardless of insurance; there is no cost shifting. No matter where you live, no matter who you are, no matter what your income—your Maryland hospital is here for you.

UTILIZES SET BUDGETS TO KEEP BOTH THE HOSPITAL AND THE COMMUNITY WELL

4

Hospitals receive a set budget, giving them choices on how to invest their funds to address community needs.

SAFEGUARDS RURAL AND URBAN HOSPITALS

5

Since 2010, **138** rural hospitals have closed across the United States, reducing access to local services. Maryland's Model adequately funds hospitals in underserved communities, or allows hospitals to retain critical emergency and other outpatient services even if inpatient services are no longer needed.



138

Rural hospital closures across the U.S.

1

Rural hospital conversion in Maryland



Maryland
Hospital Association

www.mhaonline.org

1. Rosenthal, Elisabeth. Analysis: A Procedure That Cost \$1,775 in New York Was \$350 in Maryland. KHN. October 26, 2021.
2. 180 Rural Hospital Closures since January 2005. UNC. Cecil G. Sheps Center for Health Services Research.