



Maryland
Hospital Association

February 28, 2024

To: The Honorable Joseline Peña-Melnyk, Chair, House Health & Government Operations Committee

Re: Letter of Information- House Bill 1143 - Emergency Medical Services - Maryland Emergency Department Wait Time Reduction Commission and Standardized Protocols - Establishment

Dear Chair Peña-Melnyk:

On behalf of the Maryland Hospital Association's (MHA) member hospitals and health systems, we appreciate the opportunity to submit this letter of information on House Bill 1143. HB 1143 would establish the Maryland Emergency Department Wait Time Reduction Commission within the Maryland Institute for Emergency Medical Services Systems. The Commission, comprised of state leaders, hospital representatives, and policy experts would develop strategies to improve hospital emergency department efficiencies and oversee the establishment of operational protocols to enhance EDs including patient triage, patient treatment and care, and discharge procedures.

While we appreciate the intent of the legislation and the focus on this important issue, the proposed Task Force would duplicate ongoing work by Maryland hospitals, state agencies, MHA, policy and health experts, and other stakeholders to improve hospital throughput and emergency department length of stay.

Maryland hospitals remain committed to addressing these challenges. Multiple efforts have been underway since the 2023 legislative session, including the Emergency Department Dramatic Improvement Effort (EDDIE) and Hospital Throughput Performance Improvement Initiative. The EDDIE project is a collaboration between Maryland hospitals and the Health Services Cost Review Commission (HSCRC) that combines public reporting of certain ED quality measures and performance-based reimbursement incentives. The Hospital Throughput Performance Improvement Initiative is a multidisciplinary group of hospital experts intended to assess internal ED operations and develop and implement plans to improve hospital throughput and align with HSCRC's EDDIE initiative.

At the request of the chairs of the House Health & Government Operations and Senate Finance committees, MHA convened the General Assembly Hospital Throughput Work Group. The Work Group's efforts culminated in two early session briefings and a final report, which is being submitted to the General Assembly. The Work Group's recommendations reflect that hospital throughput and ED length of stay challenges are the result of systemic issues affecting Maryland's entire health care system. The Work Group recommendations to improve hospital throughput can be categorized into four basic areas:



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- **Infrastructure and Systems:** Modify Maryland health care infrastructure and systems to improve ED throughput, including sustainable funding for specialized behavioral health services for individuals with serious mental illnesses and improve Maryland's managed care authorization process.
- **Access to Care for Patients in the Community:** Members identified five key services to be expanded in Maryland, including home and community-based services, dialysis services, hospital-at-home, urgent care, and end of life care.
- **Hospital Capacity:** The Work Group identified a broad range of solutions to improve bed capacity including evaluating Maryland's Global Budget Revenue Model, eliminating the Medicare skilled nursing facility three-day rule, and modifying Maryland's Certificate of Need process.
- **Workforce and Guardianship:** Members developed several solutions to leverage existing efforts to improve Maryland's health care workforce, like the Maryland Commission to Study the Health Care Workforce Crisis. Members recommended eliminating barriers to licensure and improving the workforce pipeline for nurses, physicians, social workers, and nonclinical professionals. Additionally, this theme includes improving Maryland's patient guardianship process.

We would like to thank Chair Peña-Melnyk for her leadership on this issue and the members of the Health & Government Operations Committee who served on the General Assembly Hospital Throughput Work Group. However, we ask that the Committee consider pausing any additional legislation establishing ED work groups, task forces, or commissions until current ED efforts are complete.

For more information, please contact:
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