



Maryland
Hospital Association

**Senate Bill 240- Office of Health Care Quality Stakeholder Advisory Council –
Establishment**

Position: *Oppose*

February 3, 2026

Senate Finance Committee

On behalf of the Maryland Hospital Association's (MHA) member hospitals and health systems, we appreciate the opportunity to comment in opposition of Senate Bill 240. This bill would establish a stakeholder advisory council to provide feedback to the Office of Health Care Quality (OHCQ) and notify the Secretary in cases of perceived negligence. Hospitals support efforts to foster stakeholder engagement and improve the delivery of high-quality care statewide. However, the proposed Council will not provide a meaningful platform to improve transparency, quality, or the regulatory process.

The proposed advisory council would include members who may not possess the relevant subject-matter expertise, training, or contextual understanding that is necessary to evaluate complex clinical regulatory processes and activities. Absent this knowledge or context, information presented to the council could be misinterpreted or oversimplified, potentially resulting in recommendations or conclusions that are infeasible, ineffective, or even harmful. Additionally, there appears to be considerable ambiguity in the standards that the council would use to assess OHCQ activities. This could result in conflicting recommendations that may not align with the agency's statutory or regulatory authority.

OHCQ's oversight often includes review of sensitive clinical information, protected health information, and quality assurance data that are subject to strict federal and state confidentiality requirements. We are concerned that presenting this information in the forum proposed by SB 240 could lead to the public disclosure of sensitive and protected information.

Hospitals operate under a robust regulatory environment where multiple federal and state agencies, including the OHCQ, Health Services Cost Review Commission, Joint Commission, Maryland Health Care Commission, Maryland Department of Health, and the Center for Medicare and Medicaid Services, oversee hospital operations and policies. Introducing another bureaucratic body lacking relevant subject matter expertise would only create confusion and lead to unintended negative consequences with minimal potential for public benefit. We respectfully suggest that the state's extensive existing regulatory authority provides ample opportunity to continue to drive improvement and achieve the bills intended purpose.

For these reasons, we request an unfavorable report on SB 240.

For more information, please contact:

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