Maryland
Hospital Association

August 26, 2026

William Henderson
Interim Executive Director
Health Services Cost Review Commission
4160 Patterson Avenue
Baltimore, MD 21215

Dear Mr. Henderson:

On behalf of the Maryland Hospital Association (MHA) and its member hospitals and health systems, thank you for the opportunity to comment on the future direction of the Emergency Department Hospital Throughput Best Practice Policy for rate year 2029. Maryland hospitals share HSCRC's commitment to improve patient flow and reduce emergency department (ED) and inpatient length of stay (LOS). Timely patient transitions are essential to delivering quality care, ensuring patient safety, and maintaining operational efficiency across the continuum of care.

Support for Development of a Learning Collaborative

MHA appreciates HSCRC's thoughtful consideration of potential future approaches that would build upon the current efforts of hospitals across the state. We support **Option 3: Development of a Learning Collaborative with the Sunset of the Best Practice Policy**. This option will create a deeper understanding of the operational, clinical, and community factors contributing to performance variation, which will be critical to the sustained improvement in ED and inpatient LOS. We particularly commend HSCRC for recognizing the value of engaging frontline stakeholders to better understand the complex and multifactorial drivers of ED and inpatient LOS performance.

Maryland hospitals are enhancing throughput, optimizing capacity management, and addressing bottlenecks that contribute to prolonged ED boarding and inpatient delays. However, there are factors beyond hospitals' control. Workforce shortages, behavioral health capacity challenges, post-acute care availability, social determinants of health, inpatient capacity limitations, and increasing patient acuity all contribute to delays throughout the care continuum that affect hospital throughput performance and can result in prolonged ED boarding and longer patient wait times.

Given the complexity of these challenges, we believe that a collaborative learning model offers the most effective path forward. A statewide learning collaborative would create a structured forum for hospitals to share operational strategies, data-driven insights, implementation

experiences, and lessons learned.[1] Such an approach would allow HSCRC and hospitals to collectively identify challenges, evaluate promising practices, accelerate the dissemination of evidence-informed practices and better understand the contextual factors that influence performance across diverse hospital settings.

MHA also supports HSCRC's proposal to use the collaborative as a vehicle to share performance data, operational insights, and best practices following the sunset of the current policy. Sunsetting the Best Practice Policy while transitioning to a continuous learning and improvement model will create greater flexibility for hospitals to innovate, learn from peers, and adapt locally appropriate, successful solutions while maintaining focus on statewide improvement goals.

Future Policy Development

Stakeholder engagement and collaborative learning should serve as the foundation and gold standard for future policy development. Policies are most effective when they are informed by real-world operational experience, are designed in partnership with those responsible for implementation, and are grounded in a shared understanding of both challenges and opportunities. Through direct engagement with frontline clinical and operational leaders, HSCRC will be better positioned to identify actionable solutions, including interventions producing measurable improvements, and determine where future policy actions may be warranted.

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As HSCRC moves forward, MHA encourages the Commission to establish a structured framework for stakeholder participation, data sharing, and continuous feedback to ensure the learning collaborative produces actionable insights and measurable progress in reducing ED and inpatient LOS across the state. By adopting **Option 3: Development of a Learning Collaborative and Sunset of the Best Practice Policy**, HSCRC can bolster current hospital efforts by establishing a forum for collaboration, partnership, and shared learning that empowers hospitals and policymakers to collectively identify, test, and scale effective strategies to improve patient flow and strengthen care delivery. MHA appreciates HSCRC's continued partnership and commitment to advancing high-quality, accessible care for Marylanders and looks forward to working with the Commission and hospital stakeholders to support the collaborative's development and long-term success.

Sincerely,

Tequila Terry
SVP, Care Transformation & Finance

[1] Institute for Healthcare Improvement, The Breakthrough Series: IHI's Collaborative Model for Achieving Breakthrough Improvement (Boston: Institute for Healthcare Improvement, 2003).

Maryland
Hospital Association

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