



Maryland  
Hospital Association

June 28, 2021

Chiquita Brooks-LaSure, Administrator  
Centers for Medicare & Medicaid Services  
Department of Health & Human Services  
Attention: CMS-1752-P, Mail Stop C4-26-05  
7500 Security Boulevard,  
Baltimore, Maryland 21244-1850

Dear Ms. Brooks-LaSure:

On behalf of the Maryland Hospital Association's 60 member hospitals and health systems, we appreciate the opportunity to comment on the Hospital Inpatient Prospective Payment System (IPPS) proposed rule for fiscal year 2022. We support the proposed removal of the Admit Decision Time to ED Departure Time for Admitted Patients (ED-2) from the Hospital Inpatient Quality Reporting (IQR) Program.

In Maryland, overall emergency department (ED) visits have decreased, particularly among low and medium complexity patients. For all payers, ED visits for behavioral health conditions continue to rise, while non-behavioral health related ED visits and admissions decline. While we recognize ED wait times are an important clinical measure, there are too many external factors affecting ED wait times to control for in a payment policy. We agree with the agency and believe it would be more beneficial to address access to behavioral health treatment, patterns of primary care delivery including non-emergent use of the emergency department, and nursing shortages.

Recognizing the importance to patient safety and shared responsibility for the Marylanders they care for, hospitals in recent years addressed wait times with hospital clinical leaders and ED physician leaders. Maryland hospitals aggressively reduced avoidable utilization and ensured patients receive the appropriate level of care in the right setting. EDs are at the center of this transformation. Increased screening and use of evidence-based practices to lower readmissions and unnecessary inpatient stays require hospitals to rebalance the needs of all hospital units and overall operations.

We recognize that, though Maryland hospitals are exempt from IPPS rules, our Total Cost of Care Model (the Model) relies on maintaining comparability to the nation. National reporting and policy trends often have implications for the Model.

We appreciate your consideration of our feedback on the fiscal year 2022 IPPS Proposed Rule. Please reach out to me with any questions.

Sincerely,

Brian Sims  
Director, Quality & Health Improvement