



Maryland
Hospital Association

February 18, 2020

To: The Honorable Delores Kelley, Chairman
Senate Finance Committee

From: Brian Frazee, Vice President, Government Affairs, Maryland Hospital Association

Re: Letter of Support- Senate Bill 453- Behavioral Health Administration- Children with Mental Disorders- List of Available Services

Dear Chairman Kelley:

On behalf of Maryland's 61 nonprofit hospitals and health systems, we thank you for the opportunity to submit support for House Bill 374- Behavioral Health Administration- Children with Mental Disorders- List of Available Services. Maryland's hospitals care for millions of people each year, treating an estimated 2.3 million in emergency departments alone. However, hospital care is only necessary for the most acute conditions, and maintaining health requires a robust system of community care, particularly for children who need community support to grow and thrive.

Over the past two years, hospitals, under the leadership of MHA, participated in two studies focused on discharge delays from hospital inpatient departments and emergency departments for patients with a behavioral health condition. For years, hospitals shared stories of patients stuck in an inpatient bed for months, and emergency departments for weeks past when it is medically necessary. One study found, on average, patients delayed in inpatient psychiatric units spend three additional weeks in a hospital past when they can be safely discharged to community care. The study of emergency departments found delays hit children particularly hard. Patients under 18 tended to have delays twice as long as those over 18.

Hospitals are committed to ensuring individuals can access the right level of care for their condition. In order to properly move patients through the system of care it is vital to have a "source of truth" for services available in the community, which HB 374 would provide. Since last year, MHA has engaged in a state led process spearheaded by the Maryland Department of Health Secretary Robert Neall to study hard to place patients. The work group recommended supporting the infrastructure necessary to enable real-time capacity tracking of services available throughout the care continuum—specifically for children. This bill is the first step in developing that resource and improving health care for children with mental health needs.

For these reasons, we urge a *favorable* report.

For more information, please contact:

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