March 14, 2022

To: The Honorable Shane E. Pendergrass, Chair, House Health & Government Operations Committee


Dear Chair Pendergrass:

On behalf of the Maryland Hospital Association’s (MHA) 60 member hospitals and health systems, we appreciate the opportunity to support House Bill 1084. Last week marks the second year since Maryland hospitals saw their first COVID-19 patients. Last year, MHA supported House Bill 836 to establish COVID-19 testing, contact tracing, and vaccination protocols to combat the ongoing pandemic. However, as the recent delta and omicron surges have shown, we are not out of the woods. Additional measures are needed to ensure appropriate prevention and response in the future.

HB 1084’s response plan, vaccination, and treatment provisions are critical as hospitals continue to care for their communities. MHA appreciates the consideration of hospital-adjacent urgent care centers, as our experience demonstrates the importance of alternative sites to decant lower acuity patients from crowded hospital emergency departments.

If an urgent care center is adjacent to a hospital, we support clearly distinguishing the unregulated urgent care center from the regulated hospital. The Health Services Cost Review Commission (HSCRC) requires separate entrances and explicit signage to denote any unregulated building on a hospital campus, including an urgent care center. The bill language and the sponsor’s amendments reinforce the intent that these services are considered unregulated.

The COVID-19 pandemic continues to test the strength of our state’s public health system. The support offered in this legislation to shore up our state’s systems for response plans, vaccination, treatment, and alternate care sites will help to speed our recovery and see our way through this unprecedented public health emergency.

For these reasons, we urge a favorable report.

For more information, please contact:
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