



Maryland hospitals are on the front lines of the COVID-19 pandemic. Since the first case was reported in Maryland in March 2020, Maryland hospitals have cared for nearly 35,000 COVID patients.

# Maryland's First Line of Defense

COVID-19 IMPACT REPORT

*March 2021*



Maryland  
Hospital Association

## OUR REQUEST TO POLICYMAKERS

As Maryland hospitals continue to fight on the front lines, the 117,000 caregivers and health professionals who work there need the support of policymakers in our state. We recognize the coronavirus has upended everyone's lives, shuttered businesses, and led to an unfortunate economic downturn. And the state's nonprofit hospitals have been there to save lives and provide comfort along the way.

We ask the General Assembly and other policymakers not to hinder hospitals' ability to respond and recover from the crisis. Legislation and regulations that place additional financial and operational burdens on hospitals undermine the health care system in Maryland.



## MARYLAND HOSPITALS CARING FOR MARYLAND THROUGH COVID-19

**ADDING CAPACITY:** The University of Maryland Medical System (UMMS) reopened its former Laurel hospital to add **135 beds**. Adventist HealthCare added **200 beds** by reopening their closed Takoma Park hospital in hard-hit Prince George's and Montgomery counties. LifeBridge Health, Mercy Medical Center, Meritus Health, Atlantic General, MedStar Health and many others created or converted spaces to add to surge capacity of more than 6,000 beds.

**ENSURING ACCESS:** Maryland hospitals acted quickly to **boost telehealth** capabilities. This **helps thousands** of patients gain access to care remotely.

**SUPPORTING COMMUNITY:** Maryland hospitals are leaders in testing. Hospitals tested more than **1.2 million** community members, patients, and staff for COVID-19 in the first six months of the pandemic. The number grows each day. Johns Hopkins Health System (JHHS) **created its own test** and Frederick Health scrambled to launch **in-house testing** of coronavirus samples—drastically reducing wait times for results. UPMC Western Maryland also expanded the use of its system's own diagnostic test.

**PROCURING SUPPLIES & EQUIPMENT:** Holy Cross Health and Adventist HealthCare, among the first to see high numbers of COVID-19 cases, were early testers of the state's ability to backstop hospitals on **ventilators, PPE, and supports** for vulnerable populations.

**PARTNERING:** Hospitals **advise** Gov. Hogan and the Maryland Department of Health; UMMS and Johns Hopkins joined together to stand up and staff a field hospital in the Baltimore Convention Center to **address a potential surge** of patients, conduct COVID-19 testing, and run a mass vaccination site.

**RESEARCH & INNOVATION:** Several Maryland hospitals, systems, and affiliates **conducted vaccine research**. Hospital workers were among the first Marylanders to be vaccinated.

# Answering the Call

Maryland hospitals and their dedicated caregivers have been on the front lines of the battle against COVID-19. They answered the call quickly and with full force to save lives and care for their communities.

Adding roughly 6,000 beds in just the first months of the pandemic, hospitals created much-needed space for surge capacity. They tested hundreds of thousands of community members, patients, and staff. They shored up supplies of scarce protective gear, to keep patients and their workforce safe. And to help maintain social distancing while caring for patients, hospitals quickly expanded telehealth services.

When vaccines were made available in late 2020, hospitals efficiently and effectively rolled out one of the most ambitious vaccination efforts in our country's history.

This report examines the impact of the pandemic on Maryland hospitals and how they stepped up to save lives and care for Maryland.

## HOSPITALS' TOP ACCOMPLISHMENTS

### TESTING



Hospitals quickly mobilized to expand access to COVID-19 testing, through drive-up services and other sites. They also engaged underserved and diverse communities to ensure equal access to testing.

### PERSONAL PROTECTIVE EQUIPMENT



Maryland hospitals quickly mobilized, deploying new strategies. Hospitals worked with local vendors who could pivot production to these vital items, partnered with other hospitals to increase purchasing power, sought overseas vendors, and even produced their own PPE.

### STAFFING



Hospital staff adapted quickly to changing needs. Dedicated teams shared resources and unique support mechanisms, including paid quarantine, at virtually all hospitals.

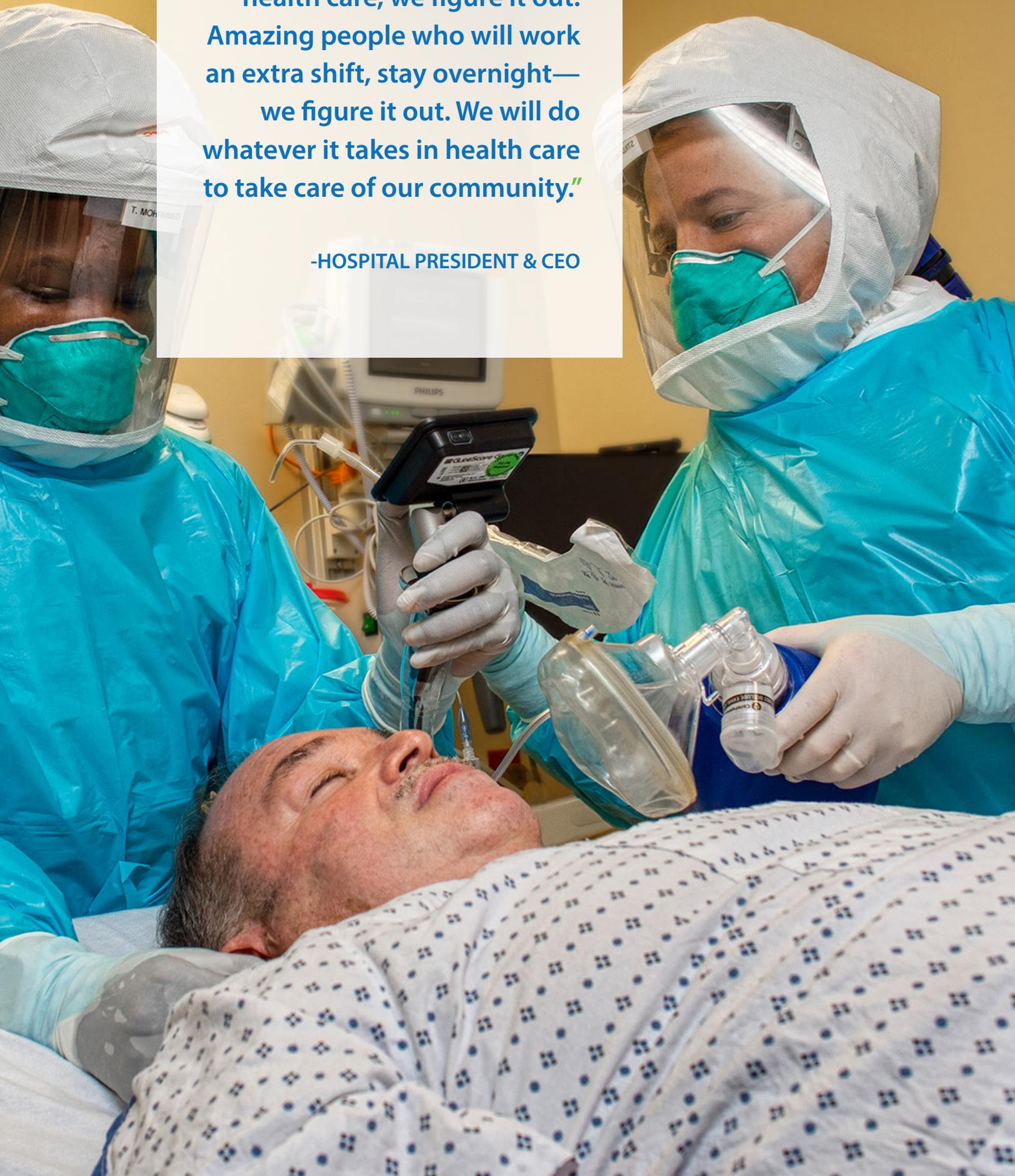
“Thank you so much for everything you’ve done during this pandemic to save lives and spread joy during this difficult time. You are all true heroes and angels and I am so grateful for all that you all have done.”

– Matea T.



“ That’s the beauty of being in health care, we figure it out. Amazing people who will work an extra shift, stay overnight—we figure it out. We will do whatever it takes in health care to take care of our community.”

-HOSPITAL PRESIDENT & CEO



# The Financial Cost of COVID-19

Rapidly creating new patient rooms and intensive care space, paying 14 times more for personal protective equipment and using record-setting amounts of it, hiring additional staff members and paying more for them, and developing testing programs all come with high price tags. COVID-19 has a significant financial impact on hospitals.

When the governor ordered hospitals to cancel elective procedures, they complied. Unfortunately, many of those service lines have yet to recover.

The cost of the pandemic on Maryland's hospitals and health systems is staggering. Operating margins declined by more than **\$200 million**, or 50% for just April

*On top of this, hospitals laid out more than*

## **\$70 million**

**capital in direct response to the pandemic.**

Early in the pandemic, the supply chain and distribution challenges drove up the cost of protective gear.

Hospitals also invested more in cleaning and screening to prevent the spread of the virus. And, they faced added costs, such as ultra-cold freezers and other equipment to ensure safe and efficient vaccine administration.

Maryland's nonprofit hospitals already have thin margins, and these unanticipated and unplanned costs place unnecessary stress on a system already under siege.



**1/3**  
of all hospitals' cardiology, orthopedic surgery, and radiology service lines have not returned to pre-pandemic volume

**90%** of Maryland hospital emergency departments have not recovered to pre-COVID-19 levels

## TOP CHALLENGES HOSPITALS OVERCAME



### STAFFING

To bolster their workforce, hospitals redeployed staff from other units or ambulatory settings, cross-trained staff on promising techniques and treatments, and found temporary staffing solutions to fill critical voids.

In March 2020 alone, over **\$4.6 million** was paid for additional staffing by just 18 hospitals and health systems.

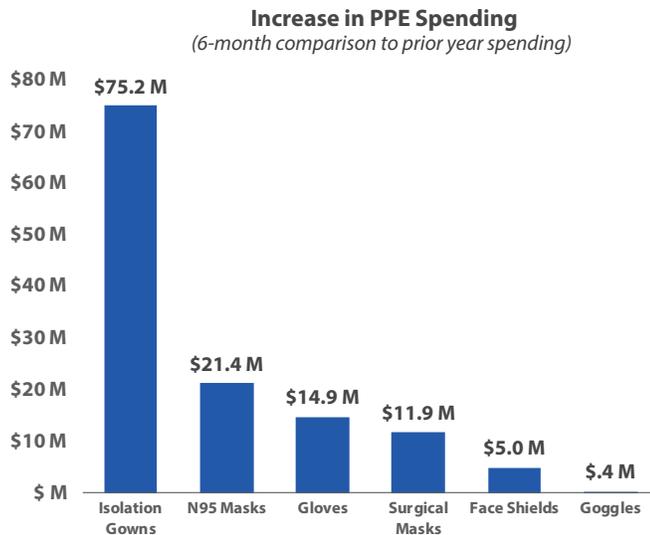
Nurses, respiratory therapists, and intensivists were needed to staff the emergency departments, ICUs, operating rooms, and medical surgical units to accommodate the COVID-19 patient surge.

**From March to December 2020, those same hospitals spent another \$103 million on additional staffing**



### PERSONAL PROTECTIVE EQUIPMENT

Like hospitals worldwide, Maryland hospitals had to quickly procure large quantities of PPE. They faced price gouging, limited supply, and many other barriers.



### TESTING



Hospitals tested more than **1.2 million** community members, patients, and staff members for COVID-19 in just the first six months of the pandemic

SOURCE: MHA Member Survey on COVID-19

# Going Above & Beyond

The COVID-19 health emergency has upended daily life, including how we work and go to school. It also, unfortunately, has had wide-ranging economic impacts that have worsened problems such as food insecurity in Maryland. Hospitals care for their communities every day, and this time of crisis has been no exception. In addition to delivering high-quality care for COVID and non-COVID patients throughout the pandemic, hospitals also supported Marylanders outside their four walls.

- **FOOD DONATIONS**
- **TRANSPORTATION**
- **SCHOOL SUPPLY DRIVES**
- **NON-CLINICAL PPE COMMUNITY DONATIONS**

One hospital alone distributed over **49,000 pounds** of produce to those in need



## TELEHEALTH



To ensure Marylanders continued access health care services, telehealth appointments were a necessity.

### TOP 3 SERVICE LINES WITH INCREASED TELEHEALTH USE



**PRIMARY CARE**



**BEHAVIORAL HEALTH**

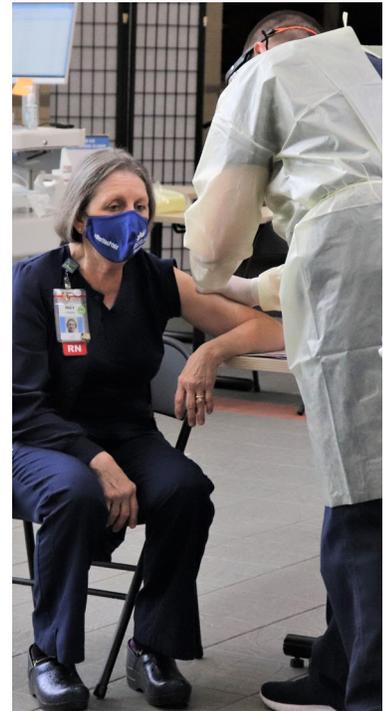


**OTHER SPECIALTY CARE**

SOURCE: MHA Member Survey on COVID-19

# COVID-19 Timeline

- March**
- 4** **1st COVID-19 Patients in Maryland Hospitals**
  - 12 Maryland Gov. Larry Hogan bans all large gatherings of people and activates the National Guard. All public schools in the state are closed for two weeks.
  - 18 1st COVID-19 death in Maryland: A man in his 60s with an underlying medical condition
  - 23** **Gov. Hogan orders hospitals to halt all elective and non-urgent procedures**
  - 30 Maryland, D.C., and Virginia leaders issue formal “stay-at-home orders”
- April**
- 28** **Maryland hospitals add over 6,000 beds**  
*First time Maryland exceeded 10,000 physical beds*
- May**
- 5** **1,707 COVID-19 patients in Maryland hospitals**
  - 6 Gov. Hogan lifts ban on hospital elective procedures
  - 15 Gov. Hogan lifts stay-at-home order; Maryland moves to Phase 1 of its coronavirus recovery plan
- June**
- 5 Maryland moves to Phase 2 of its coronavirus recovery plan
  - 15** **Maryland hospitals cared for over 10,222 COVID-19 patients**
- Sept**
- 1 Maryland hospitals treated and released 14,600 COVID-19 patients; Maryland moves to Phase 3 of its coronavirus recovery plan
  - 20** **281 COVID-19 patients in Maryland hospitals (lowest since beginning of pandemic)**
  - 21** **State Positivity Rate – 2.75% (lowest since beginning of pandemic)**
- Oct**
- 15 Maryland surpasses 3 million COVID-19 tests
- Dec**
- 1** **1,583 COVID-19 patients in Maryland hospitals, Maryland hospitals treated and released 21,200 COVID-19 patients**
  - 8 Hospitals surpass the spring surge with 1,709 COVID-19 inpatients
  - 4 3,792 positive confirmed cases, largest 1-day high
  - 14** **1st Maryland hospital employees vaccinated against COVID-19**
- Jan**
- 11 Hospitals reach an all-time peak with 1,952 patients



# COVID Fast Facts

## DEDICATED

*More than 117,000 caregivers in Maryland hospitals are on the front lines of the coronavirus pandemic—working tirelessly since the first positive patients were seen in March 2020.*

## VACCINATION FOREFRONT

*Hospitals delivered more than 450,000 vaccines by mid-February 2021.*

## BUILDING CAPACITY

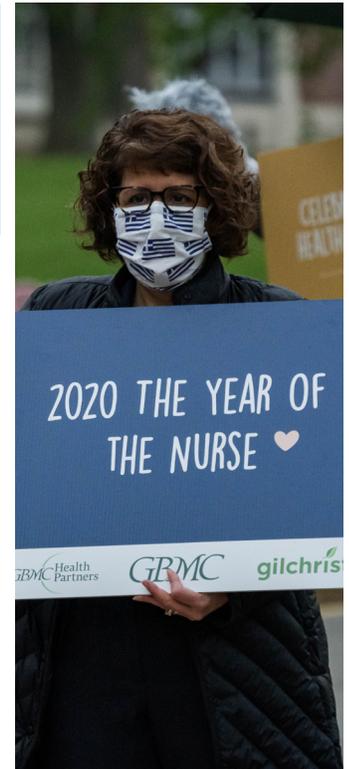
*Maryland hospitals added capacity for roughly 6,000 beds to add space to care for their community.*

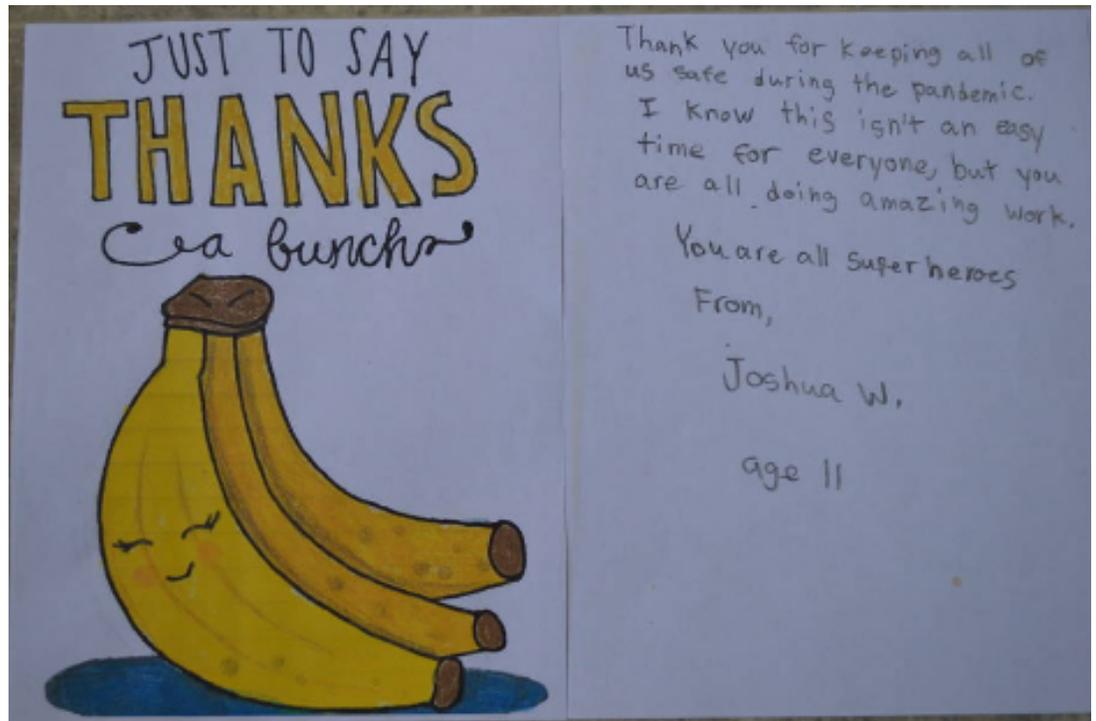
## LEADERS IN TESTING

*Hospitals tested 1,200,000+ community members, patients, and staff members for COVID-19 by July 2020.*

## MISSION DRIVEN

*In the first six months of the pandemic, nonprofit hospitals and health systems—which already operate on thin margins—absorbed more than \$200 million or 50% incremental losses, over the prior year. By late 2020, hospitals spent more than \$70 million in capital in direct response to COVID-19.*





#Caring4Md



Maryland Hospital Association

*Advancing health care and the health of all Marylanders*

MHA COVID-19 Impact Report © 2021 Maryland Hospital Association

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