



Maryland  
Hospital Association

March 29, 2022

To: The Honorable Paul Pinsky, Chair, Education, Health & Environmental Affairs Committee

Re: Letter of Support- House Bill 1327 - Education - Home and Hospital Teaching Program for Students - Report

Dear Chair Pinsky:

On behalf of the Maryland Hospital Association's (MHA) 60 member hospitals and health systems, we appreciate the opportunity to comment in support of House Bill 1327, which seeks to study the Home and Hospital Teaching Program for Students that ensures youth who are unable to attend school due to a physical or emotional condition can continue to receive an education.

Maryland hospitals care for everyone who comes through their doors, but too often patients are unable to access the level of care needed to transition back into the community. Prior to the COVID-19 pandemic, our hospitals began to study the myriad reasons a patient may face difficulties transitioning from the hospital. In 2019 hospitals participated in two studies of discharge delays among behavioral health patients in both inpatient settings and emergency departments. These studies found:

- During the 90-day study of behavioral health inpatients, 3% of patients experienced a discharge delay <sup>1</sup>
- During the 45-day study of emergency departments, 42% of behavioral health patients experienced a delay <sup>2</sup>

In both studies, children and adolescents were identified as at risk for a delay, especially children with involvement in one or more state agencies. Foster youth, especially children and teens with complex medical needs, face many barriers to appropriate care.

In the fall, hospitals joined the state Department of Health to better define the reasons behind discharge difficulties in this population. Hospitals reported the number of youths in an "overstay," defined as being in the emergency department for longer than 48 hours or in an inpatient unit beyond medical necessity. Over an eight-week span, an average of 39 hospitals reported weekly, with an average of 16 hospitals reporting at least one child meeting overstay

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<sup>1</sup> [www.mhaonline.org/docs/default-source/resources/mha-report-jan-2019.pdf](http://www.mhaonline.org/docs/default-source/resources/mha-report-jan-2019.pdf)

<sup>2</sup> [www.mhaonline.org/docs/default-source/resources/behavioral-health/behavioral-health-patient-delays-in-emergency-departments-study-2019.pdf](http://www.mhaonline.org/docs/default-source/resources/behavioral-health/behavioral-health-patient-delays-in-emergency-departments-study-2019.pdf)



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criteria. On average, there were 25 youth meeting overstay criteria in the emergency department and 25 youth meeting overstay criteria in inpatient units each week.

During this study, hospital staff were able to provide additional context to understand the reason behind a discharge delay. While capacity issues were most cited for the delay, hospital staff identified a state agency process as a primary or secondary cause of delays for the majority of the overstays. These include:

- Unable to place in a group home
- No foster care placement identified
- No available therapeutic foster care placement
- Parents abandoned patient or passed away
- Guardian wants to relinquish rights
- Waiting on interstate compact approval

The lives of these children and youth are often disrupted during their hospital stays, which means they are not always able to access appropriate education. Maryland hospitals support a comprehensive study of the Home and Hospital Teaching Program to ensure these children and youth are supported during their hospital stay and while they transition back to home, to the next level of care, to a permanent placement, and/or traditional educational settings.

For these reasons, we ask for a *favorable* report on HB 1327.

For more information, please contact:  
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