

HB1143_The Arc Maryland_Support- in Senate.pdf

Uploaded by: Ande Kolp

Position: FAV



Senate Finance Committee

HB1143: Emergency Medical Services – Maryland Emergency Department Wait Time Reduction
Commission and Standardized Protocols – Establishment

March 28, 2024

Position: Support

The Arc Maryland is a statewide organization that works to protect and advance the rights and quality of life of people with developmental disabilities. This bill would establish the Maryland Emergency Department Wait Time Reduction Commission in the Maryland Institute for Emergency Medical Services Systems to enhance the overall effectiveness and responsiveness of emergency medical services; and require the Maryland Institute for Emergency Medical Services Systems, with the advice of the Commission, and in consultation with certain entities, to develop certain standardized operational protocols and establish a system for monitoring certain emergency department performance.

We believe this bill is an excellent alternative to HB 784 that was offered this session. We do not believe HB784 will get us to the desired outcome of developing a plan to resolve our ER Wait Time crisis, but HB 1143 will.

- The Commission offered through HB1143 has nimble, limited and representative membership.
- The Commission established under HB 1143 would focus clearly on Reductions of Emergency Department Wait Times as well as the hospital environment and capacity issues to contribute to extended ER Wait times.

For these reasons, we encourage a favorable report on HB 1143. For more information, please contact: Ande Kolp, Executive Director, The Arc Maryland akolp@thearcmd.org

MaCCRA Testimony 2024 - Support - House Bill 1143

Uploaded by: Bruce Hartung

Position: FAV



Maryland Continuing Care Residents Association

The Voice of Continuing Care Residents

Bruce Hartung, President
1615 C Piccard Drive #1701 Rockville, MD 20850
brucehartung@sbcglobal.net 301-605-7505

SUBJECT: House Bill 1143 - Emergency Medical Services - Maryland Emergency Department Wait Time Reduction Commission - Establishment

COMMITTEES: Finance Committee
The Honorable Pam Beidle, Chair

DATE: Thursday, March 28, 2024

POSITION: **FAVORABLE**

The **Maryland Continuing Care Residents Association (MaCCRA)** is a not-for-profit organization representing the residents in continuing care retirement communities (CCRCs). Maryland has over 18,000 older adults living in CCRCs. The principal purpose of MaCCRA is to protect and enhance the rights and financial security of current and future residents while maintaining the viability of the providers whose interests are frequently the same as their residents. MaCCRA SUPPORTS efforts to enhance transparency, accountability, financial security, and preserve existing protections in law and regulation for current and future CCRC residents statewide.

On behalf of the Maryland Continuing Care Residents Association, we support House Bill 1143 which establishes a Maryland Emergency Department Wait Time Reduction Commission. Older adults living in CCRC's are among the state's citizens most susceptible to health emergencies requiring the use of emergency room facilities. They are also unusually vulnerable to delays caused by extended wait times.

The number of seniors using emergency department facilities—both those residing in CCRCs and those living in other parts of our communities—will rise as baby boomers age throughout the state. At the same time, the state's disadvantaged populations—those living at or below the poverty line in urban and rural areas, plus the homeless population in all settings—will remain heavily dependent on emergency room care, due to lower access to preventative health programs. All these populations, as well as others, would especially benefit from measures to improve department responsiveness by reducing wait times.

We support House Bill 1143 and its chief object—a representative Commission to find workable and cost-effective solutions to the issue—because it would be a major step towards the reduction of excessive emergency department wait times and would also involve all stakeholders in crafting solutions.

For these reasons we ask for a FAVORABLE report on House Bill 1143.

For further information please contact: Bruce Hartung, President
Maryland Continuing Care Residents Association c/o brucehartung@sbcglobal.net

HB1143_Emergency_Department_Wait_Times_MLC_FAV.pdf

Uploaded by: Cecilia Plante

Position: FAV



TESTIMONY FOR HB1143

Emergency Medical Services - Maryland Emergency Department Wait Time Reduction Commission and Standardized Protocols - Establishment

Bill Sponsor: Delegate Bhandari

Committee: Finance

Organization Submitting: Maryland Legislative Coalition

Person Submitting: Cecilia Plante, co-chair

Position: FAVORABLE

I am submitting this testimony in favor of HB1143 on behalf of the Maryland Legislative Coalition. The Maryland Legislative Coalition is an association of activists - individuals and grassroots groups in every district in the state. We are unpaid citizen lobbyists and our Coalition supports well over 30,000 members.

Maryland has the worst emergency room wait times in the nation. It is a disgrace that we make patients wait 8 hours or more just to see an emergency room doctor. Even people who come in by ambulance can often wait hours. Clearly, we are not efficient and have not even learned the lessons that our neighbor states have learned.

This bill, if enacted, would create the Maryland Emergency Department Wait Time Reduction Commission in the Maryland Institute for Emergency Medical Services Systems to review the problem and develop strategies to correct it. They would determine best practices and work on development and implementation of standardized protocols and operational efficiencies in hospital emergency departments.

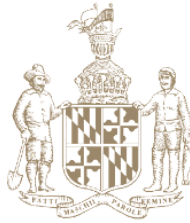
We need this! We should not be proud that we are number one for the worst wait times of any hospital emergency room in the country. We should be embarrassed and try to fix the problem.

Our members support this bill and recommend a **FAVORABLE** report in committee.

HB1143 Testimony.docx.pdf

Uploaded by: Harry Bhandari

Position: FAV



THE MARYLAND HOUSE OF DELEGATES
ANNAPOLIS, MARYLAND 21401

Madam Chair Biedle, Vice Chair Klausmeier, Members of the esteemed Finance Committee,

I stand before you today, grateful for our shared dedication to improving ER wait time in Maryland, particularly addressing our state's pressing challenge of the longest emergency department wait times in the nation.

Quick Context to this bill: Last year, we collaboratively initiated a legislative initiative by sponsoring a task force bill, which led to the formation of an informal work group under the guidance of Senator Melony G. Griffith, Chair of the Senate Finance Committee, and Chair Joseline A. Pena-Melnyk, Chair of our committee. We extend sincere thanks to the Maryland Hospital Association for their leadership in this critical initiative. This initiative was in response to the critical challenge of prolonged emergency department wait times in Maryland, the longest in the nation according to the Centers for Medicare and Medicaid Services (CMS).

Our aim was to assemble a diverse coalition of stakeholders, including healthcare professionals, patient advocates, and representatives from both the Maryland Health Department and the Maryland Health Services Cost Review Commission. This collaboration focused on identifying the root causes of the delays and formulating effective strategies to address them. The insights gained have informed our legislative efforts this session, including the introduction of bills HB1143.

This bill aims to establish the Maryland Emergency Department Wait Time Reduction Commission. This commission, recommended to this committee on January 17th, 2024, and further developed through my participation in the workgroup, is tasked with developing strategies to improve emergency department efficiencies and patient care across Maryland.

HB1143 represents a critical step in our collective efforts to address prolonged wait times through standardized operational protocols, advanced technology solutions, and collaborative healthcare practices. The ongoing support from the Maryland Health

Department, the Maryland Health Services Cost Review Commission, and the Maryland Hospital Association, whose contributions will be instrumental in successful policy outcome.

As we propose the establishment of the Maryland Emergency Department Wait Time Reduction Commission, we are not just addressing a current need but laying the groundwork for a future where all Marylanders have access to timely and high-quality emergency care.

Thank you for your dedication and commitment to improving ER wait time for the people of Maryland. I look forward to working alongside all stakeholders to bring the positive changes envisioned by HB1143. I would like to request a favorable amendment.

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HB1143_MoCo_Frey_FAV.pdf

Uploaded by: Leslie Frey

Position: FAV



Montgomery County

Office of Intergovernmental Relations

ROCKVILLE: 240-777-6550

ANNAPOLIS: 240-777-8270

HB 1143

DATE: March 28, 2024

SPONSOR: Delegates Bhandari, *et al.*

ASSIGNED TO: Finance

CONTACT PERSON: Leslie Frey

(leslie.frey@montgomerycountymd.gov)

POSITION: FAVORABLE (Montgomery County Fire & Rescue Service)

Emergency Medical Services - Maryland Emergency Department Wait Time Reduction Commission and Standardized Protocols – Establishment

House Bill 1143 establishes the Maryland Emergency Department Wait Time Reduction Commission to enhance the overall effectiveness and responsiveness of emergency medical services. The Commission will be comprised the Secretary of Health; the Executive Director of the Maryland Institute for Emergency Medical Services Systems; the Executive Director of the Health Services Cost Review Commission; the Executive Director of the Maryland Health Care Commission; and the following members, appointed by the Secretary of Health: two individuals who have operations leadership responsibilities over a hospital emergency department in the State; one individual with professional experience in an emergency department who is not a physician or an advanced practice provider; one representative of a local emergency medical service; one representative of a managed care plan with experience in care management or care coordination; one representative of the Maryland Hospital Association; one representative of a patient advocacy organization; and one representative of a behavioral health provider. By January 1 of each year, the Commission must report its findings and recommendations, including an update on the implementation of standardized protocols and operations efficiencies in hospital emergency departments. Montgomery County Fire Rescue Service (MCFRS) supports this much needed bill as it includes a representative of a local emergency medical service on the Commission. Battalion Chief Ben Kaufman from the MCFRS Emergency Medical and Integrated Healthcare Services Section has participated on the Maryland Hospital Association's associated task force over the past year. MCFRS would welcome continued participation in working on this issue as a member of the Commission as this representative.

Emergency Department (ED) crowding is a complex issue that results in multiple downstream and adverse effects on Emergency Medical Systems (EMS), such as rendering our transport units unavailable to respond to other 911 calls while waiting at an ED for a bed to become available for a patient. Hospital delays also increase costs: Montgomery County has proactively dedicated an EMS supervisor to oversee the distribution of ambulances so that no hospital gets overwhelmed by the volume of ED patients. This comes at a direct cost to the County which is not reimbursed by the State or hospitals. Montgomery County also incurs costs from EMS personnel whose shifts extend into overtime due to prolonged waiting times to admit patients into the ED. If the problem of emergency department overcrowding throughout the State is not addressed, we will ultimately need more EMS units and personnel. Additionally, hospital delays impact our volunteer EMS personnel: being detained at the ED beyond the end of a volunteer shift makes it difficult for volunteers to get to their primary jobs on time. Local volunteer fire chiefs cite this problem as a bona fide recruitment and retention barrier.

MCFRS has been an innovator at exploring solutions to these issues. In addition to the transport supervisor, MCFRS has implemented an alternative destination program and added telehealth services for treatment-in-place. However, there has been little success diverting a meaningful volume or the appropriate acuity of patients away from the emergency department. MCFRS strongly agrees with the need for the Commission proposed by House Bill 1143 and urges the committee to issue a favorable report.

HB 1143 - FIN - HSCRC - LOS.docx.pdf

Uploaded by: State of Maryland (MD)

Position: FAV

March 28, 2024

The Honorable Pamela Beidle
Chair, Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401

**RE: House Bill 1143 - Emergency Medical Services - Maryland
Emergency Department Wait Time Reduction Commission and
Standardized Protocols - Establishment – Letter of Support**

Dear Chair Beidle and Committee Members:

The Health Services Cost Review Commission (HSCRC) respectfully submits this Letter of Support on House Bill 1143, “Emergency Medical Services - Maryland Emergency Department Wait Time Reduction Commission and Standardized Protocols - Establishment” as amended in the House. HSCRC is committed to improving emergency department wait times in the State of Maryland.

HB 1143 complements work already underway at HSCRC to address emergency department wait times, including the following initiatives.

- **Emergency Department Dramatic Improvement Effort (EDDIE).** EDDIE includes monthly public reporting of three hospital ED wait time measures and hospital rapid-cycle quality improvement initiatives.
- **Development of a proposed ED Potentially Avoidable Utilization Policy.** HSCRC is considering a policy that provides an incentive to hospitals for reduction in the percentage of ED visits accounted for by patients with 4 or more visits per year.
- **Quality Pay-for-Performance Program:** HSCRC staff are developing an ED wait time measure to include in HSCRC’s hospital pay-for-performance quality program. CY 2024 data will be used for rate year 2026 adjustments.

Joshua Sharfstein, MD
Chairman

Joseph Antos, PhD
Vice-Chairman

James N. Elliott, MD

Ricardo R. Johnson

Maulik Joshi, DrPH

Adam Kane, Esq

Nicki McCann, JD

Jonathan Kromm, PhD *****
Executive Director

William Henderson
Director
Medical Economics & Data Analytics

Allan Pack
Director
Population-Based Methodologies

Gerard J. Schmith
Director
Revenue & Regulation Compliance

Claudine Williams
Director
Healthcare Data Management & Integrity

I appreciate the strong interest and support of the General Assembly for improving the experience of Maryland residents in the State's emergency departments. We are happy to discuss our work on this important issue with any member of the Committee.

If you have any questions or if I may provide you with any further information, please do not hesitate to contact me at 202-251-4211 or jon.kromm@maryland.gov, or Deb Rivkin, Director of Government Affairs, at 410-991-7422 or deborah.rivkin@maryland.gov.

Sincerely,

A handwritten signature in black ink, appearing to read 'Jon Kromm', with a stylized flourish at the end.

Jon Kromm
Executive Director



HB1143.EDwait.24.pdf

Uploaded by: Virginia Crespo

Position: FAV



Maryland Retired School Personnel Association

8379 Piney Orchard Parkway, Suite A • Odenton, Maryland 21113
Phone: 410.551.1517 • Email: mrspa@mrspa.org
www.mrspa.org

House Bill 1143

In Support Of

Emergency Medical Services - Maryland Emergency Department Wait Time Reduction Commission and Standardized Protocols - Establishment **Health and Government Operations Committee** **Hearing: February 28, 2024, at 1:00 p.m.**

Dear Honorable Delegate Joseline Pena-Melnyk, Chair, and Honorable Delegate Bonnie Cullison, Vice Chair, and distinguished Health and Government Operations Committee members,

Maryland Retired School Personnel Association (MRSPA) strongly supports House Bill 1143 **Emergency Medical Services - Maryland Emergency Department Wait Time Reduction Commission and Standardized Protocols - Establishment**

We strongly support this legislation as we believe it will benefit all seeking care in our state's emergency rooms as well as the personnel working in emergency rooms and hospitals. With the average wait time in Maryland emergency rooms reaching almost four hours, something must be done. Setting up a Commission that includes many of the stakeholders, specifically medical staff in an emergency room, patient advocacy organizations and a member of the Maryland Hospital Association, in addition to the Secretary of Health, is the first step to reducing wait times in emergency rooms. As has been publicized in the press, wait time in Maryland emergency rooms is untenable. Swift action is needed. We had hoped that HB 274 in 2023 would accomplish this but the bill was co-opted and produced a very different work group that has not accomplished the goal we had wanted to achieve.

Very recently one of our members had to deal with the ED in Annapolis. His son and 11-year-old grandson were in an auto accident. They spent 12 hours in the ED. As you would expect, they were both exhausted, sore, and very upset by the time they were seen. This is inexcusable. Patients who come to the ED are often in desperate need of immediate help, sometimes with life threatening conditions. We need to reduce the risk to vulnerable patients of all ages and help the overburdened ED staff. Understanding the underlying causes of the long wait times and seeking best practices from other states will be crucial to finding solutions.

On behalf of the 12,000 members of the Maryland Retired School Personnel Association, we strongly urge a favorable report on HB 1143.

Sincerely,

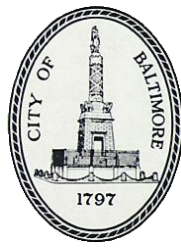
Carla J. Duls
President

Virginia G. Crespo
Legislative Aide

HB1143-FIN-FWA.pdf

Uploaded by: Nina Themelis

Position: FWA



BRANDON M. SCOTT
MAYOR

Office of Government Relations
88 State Circle
Annapolis, Maryland 21401

HB1143

March 28, 2024

TO: Members of the Senate Finance Committee
FROM: Nina Themelis, Director of Mayor's Office of Government Relations
RE: House Bill 1143 – Emergency Medical Services - Maryland Emergency Department Wait Time Reduction Commission - Establishment
POSITION: FAVORABLE WITH AMENDMENTS

Chair Beidle, Vice Chair Klausmeier, and Members of the Committee, please be advised that the Baltimore City Administration (BCA) **supports** House Bill (HB) 1143 **with amendments**.

HB 1143 establishes a “Maryland Emergency Department Wait Time Reduction Commission” within the Maryland Institute for Emergency Medical Services Systems. Maryland has the longest average ED wait times in the country.ⁱ Delays in care, especially involving hospital admissions from emergency departments, may increase a patient’s risk of death within the following 30 days.ⁱⁱ In 2023, the Maryland Health Services Cost Review Commission and the Maryland Hospital Association convened a workgroup to discuss ED wait times.ⁱ The workgroup identified the issue of persons with disabilities in need of guardians, not able to be discharged to alternative settings as one of the top drivers of long ED wait times.ⁱⁱⁱ This led to the introduction of bills this session that aimed to expedite the guardianship process.ⁱⁱⁱ While the BCA appreciates the need to reduce ED wait times, we also know that approaching the guardianship process with the utmost care is incredibly important for the rights of persons with disabilities. **We recommend that the task force include a representative from the disability justice community.**

Baltimore City Health Department (BCHD) serves as the city’s Area Agency on Aging (AAA). The AAA serves as the court-appointed “guardian of the person” for City residents ages 65 and older who have been legally adjudicated disabled when the individual has no family members or friends who can serve as their guardian. BCHD’s AAA operates the largest public guardianship program in the State for persons 65 and over, acting as the guardian for over 180 persons with disabilities at any given time.

Guardianship responsibilities require the AAA to seek alternatives to public guardianship prior to the court hearing on a petition. To protect the rights of the person with disabilities, the AAA tries to find a family member or a friend willing to serve as guardian, or to implement a less restrictive option, such as a health care surrogate, to allow the person with disabilities to maintain some autonomy over their decision making. Effectuating these alternatives takes time; it may involve locating a family member in another state or negotiating with potential guardians. In addition, if a “guardian of the property” has not been appointed for the person with disabilities, managing the financial aspects of placing the person in an alternate setting is difficult.

Due to the workgroup’s findings that hospitalized individuals with disabilities waiting for guardianship proceedings are a top driver of ED wait times, **it is critically important that the Task Force created by this bill include an advocate from the disability justice community.** It is essential that the workgroup consider disability rights when formulating their recommendations. We recommend that the bill be amended such that the list of members include “a representative from the disability justice community.”

The BCA respectfully request a **favorable** report on HB 1143 **with the inclusion of our recommended amendment.**

ⁱ Maryland Health Services Cost Review Commission. (2023). 612th Meeting of the Health Services Cost Review Commission October 11, 2023. Retrieved from <https://hscrc.maryland.gov/Documents/October%202023%20HSCRC%20Post-Meeting%20Materials%20-%20FINAL.pdf>.

ⁱⁱ Jones S, Moulton C, Swift S, et al. (2022). Association between delays to patient admission from the emergency department and all-cause 30-day mortality. *Emergency Medicine Journal*; 39:168-173. Retrieved from <https://emj.bmj.com/content/39/3/168>

HB 1143_EMS_Maryland Emergency Dept Wait Time Redu

Uploaded by: Theodore Delbridge

Position: FWA



HB 1143 – Emergency Medical Services – Maryland Emergency Department Wait Time Reduction Commission and Standardized Protocols – Establishment

Bill Summary: HB 1143 establishes the Maryland Emergency Department Wait Time Reduction Commission to address issues in the Maryland health care system that contribute to increased Emergency Department wait times. HB 1143 requires the Emergency Department Wait Time Reduction Commission to develop strategies and initiatives to ensure that patients are seen in the most appropriate setting; reduce Emergency Department wait times, improve hospital efficiency, enhance patient care; facilitate sharing of best practices; and collect and monitor needed data.

MIEMSS Position: Support

Rationale:

- Elevated emergency department (ED) wait times have been a long-standing challenge for Maryland hospitals and the Maryland healthcare system for many years. Maryland ED wait times have consistently ranked among the worst in the nation for many years.
- Elevated ED wait times are a multi-faceted problem that can be affected by a variety of aspects of the entire health care system – not only by factors existing within the ED or the hospital. Because of this, efforts to reduce ED wait times must consider the spectrum of health care needs and available health care resources, including, for example, the availability of outpatient and inpatient behavioral health care; skilled nursing facility bed availability and resources; alternative health care access points within a community; as well as factors within the ED and hospital itself, such as ED and hospital staffing, bed availability, and patient care requirements.
- HB 1143 accounts for the complexity of the effort needed to identify workable solutions across the health care system to address elevated ED wait times in Maryland by creating an ED Wait Time Reduction Commission, staffed by the Health Services Cost Reduction Commission. ED Wait Time Reduction Commission members will include the health regulatory agencies, including MIEMSS, as well as representatives with operations leadership responsibilities at a Maryland hospital ED, and a representative of a behavioral health provider; an advanced primary care practice; a managed care representative; a patient advocacy representative and others. The Commission will have the authority to collect and analyze necessary data and will be appropriately-resourced to permit the development and implementation of policies and programs to reduce ED wait times in Maryland.

MIEMSS Supports HB 1143 and Asks for a Favorable Report