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Legislative District 41
Baltimore City

Health and Government Operations
Committee

Chair

Health Occupations and
Long-Term Care Subcommittee

House Chair

Joint Committee on Administrative,
Executive, and Legislative Review



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Testimony of Delegate Samuel I. Rosenberg
Before the Health and Government Operations Committee

In Support of

House Bill 1376

**Maryland Medical Assistance Program, Maryland Children's Health Program,
and Health Insurance - Special Pediatric Hospitals**

Madame Chair and Members of the Committee:

We are fortunate to have two pediatric specialty hospitals serving patients throughout our State, one of which is Mt. Washington Pediatric Hospital, in my district. Mt. Washington treats children with serious, chronic and/or complex medical conditions.

- Tiny infants who survive the first weeks of life in a NICU but still can't eat, breathe, or regulate body temperature well enough to safely go home;
- The young babies, born with multiple birth defects, who are on ventilators or need complicated heart surgeries;
- The child who has been in a car accident and needs intensive physical rehabilitation to relearn to walk and play;
- The teenager injured by gun shots who needs to learn to navigate life in a wheelchair

The hospital is co-owned and operated by Johns Hopkins Medical System and University of Maryland Medical System. It has additional locations in Prince George's County, Harford County, and in the community.

House Bill 1376 would facilitate access to care for these medically complex children in the most appropriate level of care. Instead of spending their entire stay in an acute care hospital, these children spend weeks at MWPH, where they receive state-of-the-art care at a lower cost to the state than in an acute care hospital. This also reduces the need for more expensive NICU and PICU beds around the State, further reducing health care costs.

But beyond that, they receive care in a kid- and family-friendly environment where there are people to not only help them heal, but also learn to be – or return to be - their best selves. At MWPH they participate in activities, whether it is a baby going to a playroom so their young brains can develop similarly to babies in their homes, or whether it is the teenager going out into the community for sports, movies, or other “normal” activities.

At MWPH, parents/families are trained to care for their child at home, learning the complexities of respirators, feeding tubes, and other technologies to allow them to care for these fragile children for the moment they are all waiting for: taking them home.

Mt. Washington Pediatric Hospital has come to us today to help support its work. State payment regulations are a barrier to this work in three ways, and we’re asking for your support in fixing these regulations. The new regulations would:

- Allow transfers from acute care to a pediatric specialty hospital without an MA-MCO requiring a prior authorization, so that these transfers are not delayed. The need for the prior authorization was suspended during the Covid surges, and transfers happened more quickly and efficiently. Several MCOs have already eliminated this barrier with no adverse effect. HB 1376 would require all MCOs to do so. Even brief delays add up to hundreds of patient days per year spent in a higher-cost, less medically appropriate setting.
- Reimburse MWPH for the medically necessary services it provides once inpatient care is no longer needed, but there is still no safe discharge to home or other placement. These services include all of the care these children still need: rehabilitation therapies, respiratory assistance, medications, etc.
- Allow MWPH to appeal Medicaid decisions regarding medical necessity, in the same way that acute hospitals can already do.

With these regulations, MWPH can continue to admit, treat, support, train, and discharge the most medically complex children in Maryland. These provisions would facilitate pediatric patients’ receiving their care at the appropriate level and time, helping them and their families recover from illness and injury in an environment tailored to their needs, while also reserving space in acute level hospitals for those patients needing care at that level.

For all of the above reasons, I request a FAVORABLE report for HB1376.

March 7, 2024