

An affiliate of University of Maryland Medical System and Johns Hopkins Medicine

HB1301

Favorable

To: The Honorable Joseline A. Peña-Melnyk, Chair

Health and Government Operations Committee

From: Julie Quinn

Director of Rehab, Mt. Washington Pediatric Hospital

Date: March 10, 2025

Re: HB1301: Maryland Medical Assistance Program, Maryland Children's Health Program,

and Health Insurance – Transfers to Special Pediatric Hospitals – Prior Authorizations

My name is Julie Quinn, Director of Rehabilitation at Mt, Washington Pediatric Hospital, requesting a <u>FAVORABLE</u> report on <u>HB1301</u>. This bill would remove barriers to transferring children to Mt. Washington Pediatric Hospital where they can receive the care they need.

The emphasis of medical care in an acute care hospital, such at Johns Hopkins or University of Maryland Medical Center, is to save the child's life. When a child of any age comes to Mt. Washington Pediatric Hospital, our job is to teach children how to live their life to its fullest after an illness or accident. When very young infants come to MWPH we work to provide developmentally appropriate supports for feeding, moving, socializing, and playing. We work with older children on accessing their home (inside and out).

At Mt. Washington, we incorporate our patients, their siblings and family members into normalized experiences; we take children to playrooms, outside and into the community to simulate real-life experiences and prepare them to succeed in their communities.

For a teenager who sustained a spinal cord injury from a gunshot wound, life will look and feel very different when they leave the hospital. Prior to injury, this teen was playing basketball for high school and was preparing for prom and college. Our team has worked with this patient on increasing independence, cooking activities, and involvement in peer support groups. The patient is now living at home and states, "At MWPH I figured out new ways of doing things. I feel empowered to show the world that people with disabilities can live and thrive."



As another example, a very young child who was born healthy got what seems like a cold (but wasn't) around her 2nd birthday. The patient was admitted to an acute care hospital with a horrible infection and spent many months being treated with the most advanced medical technology and they saved the patient's life, but the patient lost a portion of all four limbs. At MWPH we worked with the patient's family to fit the patient with prosthetic limbs and teach the patient to walk again but more importantly we taught this vibrant young child to run and play again. Mom reports that at MWPH, "was the first time the patient got to be around other people, see other kids, and get out of bed. All we wanted was for our child to be a kid – and MWPH gave her that chance."

Children's early years are critically important for cognitive, language and emotional development.

The longer a child is hospitalized, without access to opportunities for play and self-expression, the more likely they are to have later medical, social and developmental problems.

We offer the infant and their caregivers' opportunities for play time on a mat in a playroom, music activities, sensory experiences, early literacy programs, infant massage and caregiver/infant bonding programs. If we give children healthy experiences, and give parents tools to help their children cope, it equates to children who are well-adjusted, have fewer rehospitalizations, and less need for medical intervention as they age.

You can how important it is to remove as many barriers as possible for children to be transferred into Mt. Washington. Therefore, I respectfully request a **favorable** committee report on **HB1301**.

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