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Appropriations Committee  
Vice Chair, Racing and Sports  
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THE MARYLAND HOUSE OF DELEGATES  
ANNAPOLIS, MARYLAND 21401

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Written Testimony for HB 1540 – University of Maryland Capital Region Medical Center –  
Funding – Repeal of Termination Date

Good afternoon, Chair Barnes, Vice Chair Chang, and members of the Appropriations Committee.

HB1540 repeals the termination date on an annual State operating grant to support the operations of UM Capital Region Medical Center, the flagship hospital of UM Capital Region Health, a part of the University of Maryland Medical System.

Before I get into the need for this legislation, I must share some relevant history that makes clear what a feat that sentence represents; what it took to get to the place where health care delivery sits now in Prince George's County.

UM Capital Region Medical Center is the largest hospital in the second largest County in the State of Maryland. Prince George's is home to almost 1 million residents in a State of 6 million. Still, while Prince George's County today has 4 amazing inpatient hospitals and a growing health care delivery system, our hospitals' collective footprint is still much smaller than that of comparable jurisdictions.

We have a total of 677 inpatient beds compared to 1,384 in Montgomery County and 3,663 in Baltimore City – 2,172 when you subtract for the large statewide academic medical centers.

Those 677 beds and the growing health care delivery system that surrounds them were and are hard-fought resources. A fight that you and I, Mr. Chair - and very few members of this body today - might even remember.

As a member of the County Council from 2008-2018, I had a front row seat to the work that went into preserving and now transforming health care in the County. As a member of the Dimensions Board, one of the last county-owned Hospital Associations, it is still difficult to

remember the times we only had one day worth of cash on hand, still had to pay the employees, and operate a level 2 trauma system, the busiest in Southern Maryland.

What we see today would not have happened but for the formation of a historic public-private-partnership among the State; the County and the University of Maryland Medical System that began in 2011 with an MOU, pledging to work toward the goal of transferring the last County-owned hospital system in the State to UMMS, a private, not for profit health system that includes one of two academic medical centers in Maryland.

With very little certainty around whether the effort to preserve and grow health care in the County would ever be successful, the County and the County Delegation again and again, year after year, made investment in restructuring the health system its number one priority.

If I had an hour to testify, I could at least begin to detail the work and commitment at every level that contributed to what we see in Prince George's County today and what the amazing physician leaders next to me represent. But I want to be respectful of the Committee's time and just say, I can't even . . .

What I do know is this operating grant remains necessary to operate the RMC and to support the clinical programs that represent unique, lifesaving resources to our County, to the Region and to the State.

The bill does not change the purposes for which State and county funds may be used. Those funds must continue to support the transition of Prince George's County Regional Medical Center into the University of Maryland Medical System and may only be used to increase access to critical health care services, improve the quality of care, and facilitate cost containment measures that prevent additional operating losses. The underlying statute also continues to require Prince George's County's significant capital commitment—208 million dollars—for construction of the facility, with the State matching those capital funds as previously enacted. HB 1540 respects and reinforces that shared State-county partnership.

For Prince George's County and the broader region, the Capital Region Medical Center is more than a building; it is the backbone of our local health care system. It is a trauma resource, a major employer, and a key component of our efforts to address longstanding health inequities in majority-Black communities that have historically faced higher rates of chronic disease, maternal mortality, and barriers to specialty care. Ensuring predictable, ongoing State support helps maintain high-quality clinical programs, recruit and retain top medical staff, and sustain the services our residents depend on—from emergency care to specialty services.

Mr. Chair, thank you for the role you have played and continue to play in the transformation of health care delivery in our County. Colleagues, I thank you for your time; and I respectfully request a favorable report on HB 1540 so that we can safeguard the State's investment, uphold our commitment to Prince George's County, and ensure continued access to high-quality health care for the residents of the Capital Region. Thank you for your consideration, and I will turn it over to my panel.