SENATE BILL 387

By: Senators Lewis Young, Beidle, and Rosapepe
Introduced and read first time: February 1, 2023
Assigned to: Finance
Committee Report: Favorable with amendments
Senate action: Adopted
Read second time: March 27, 2023

CHAPTER ______

AN ACT concerning

Task Force on Reducing Emergency Department Wait Times

FOR the purpose of establishing the Task Force on Reducing Emergency Department Wait Times to study best practices and make recommendations for reducing emergency department wait times; and generally relating to the Task Force on Reducing Emergency Department Wait Times.

SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, That:

(a) There is a Task Force on Reducing Emergency Department Wait Times.

(b) The Task Force consists of the following members:

(1) one member of the Senate of Maryland, appointed by the President of the Senate;

(2) one member of the House of Delegates, appointed by the Speaker of the House;

(3) the Secretary of Health, or the Secretary’s designee; and

(4) the Executive Director of the Maryland Institute for Emergency Medical Services Systems, or the Executive Director’s designee;

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

Brackets] indicate matter deleted from existing law.
Underlining indicates amendments to bill.
Strike-out indicates matter stricken from the bill by amendment or deleted from the law by amendment.
(5) the Executive Director of the Health Services Cost Review Commission or the Executive Director’s designee;

(6) the Executive Director of the Maryland Health Care Commission, or the Executive Director’s designee; and

(4) the following four members, appointed by the Governor:

(i) one representative from the Maryland Hospital Association;

(ii) two representatives of patient advocacy organizations; and

(iii) one individual who is employed as medical staff in an emergency department

(ii) two representatives of hospitals, one of whom represents a hospital in a rural setting;

(iii) one representative of a hospital with a pediatric emergency department;

(iv) one representative from a specialty psychiatric provider that provides both inpatient and outpatient services;

(v) two representatives who are emergency department personnel, including:

1. one licensed physician; and

2. one licensed nurse;

(vi) one provider of behavioral health services; and

(vii) one high volume emergency medical services provider.

(c) The Governor shall designate the chair of the Task Force.

(d) The Maryland Department of Health Maryland Institute for Emergency Medical Services Systems shall provide staff for the Task Force.

(e) A member of the Task Force:

(1) may not receive compensation as a member of the Task Force; but

(2) is entitled to reimbursement for expenses under the Standard State Travel Regulations, as provided in the State budget.
(f) The Task Force shall:

(1) identify potential solutions to reduce excessive root causes of wait times in emergency departments in the State, including:

(i) an analysis of health system capacity, including:

1. inpatient hospital;

2. urgent care;

3. inpatient and community behavioral health;

4. primary care; and

5. other health facility or community capacity considered necessary by the Task Force;

(ii) an analysis of health care workforce supply and unmet need;

(iii) an analysis of changes in acuity over time in hospitalizations and emergency department visits; and

(iv) the availability of post–hospitalization care options and barriers to accessing those care options;

(2) study best practices for emergency department staffing, triage, and the regulatory environment, access and availability of health care services, and inpatient bed availability in states that:

(i) have a population similar to Maryland;

(ii) are similar in hospital density and care pattern utilization;

(iii) have at least one city of approximately 500,000 residents; and

(iii) (iv) rank within the top 50% of states in shortest emergency room wait time; and

(3) make recommendations regarding best practices for reducing emergency department wait times that should be implemented in the State;

(3) coordinate with other State commissions examining issues related to workforce shortage and behavioral health capacity;
(4) review studies and recommendations on addressing workforce capacity issues;

(5) conduct an analysis of reimbursement policies and the effect of those policies on hospital reimbursement; and

(6) make recommendations, including legislative, regulatory, or other policy initiatives, regarding best practices for reducing emergency department wait times that should be implemented in the State.

(g) On or before January 1, 2024, the Task Force shall report its findings and recommendations to the Governor and, in accordance with § 2–1257 of the State Government Article, the General Assembly.

SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect June 1, 2023. It shall remain effective for a period of 1 year and 1 month and, at the end of June 30, 2024, this Act, with no further action required by the General Assembly, shall be abrogated and of no further force and effect.

Approved:

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Governor.

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President of the Senate.

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Speaker of the House of Delegates.