

March 2, 2021

To: The Honorable Shane E. Pendergrass, Chair, House Health & Government Operations Committee

Re: Letter of Support - House Bill 1022 - Public Health- State Designated Exchange - Clinical Information

Dear Chair Pendergrass:

On behalf of the Maryland Hospital Association's (MHA) 60 member hospitals and health systems, we appreciate the opportunity to comment on House Bill 1022. Since 1977 Maryland hospitals have worked under a unique rate-setting and payment system under an agreement with the Centers for Medicare & Medicaid Services (CMS). To succeed under the Total Cost of Care Model (Model), Maryland must meet specific savings targets in those covered by Medicare both inside and outside of the hospitals and achieve certain population health goals. Success requires the work of not just hospitals, but all health care professionals, payers, and the state government.

HB 1022 requires electronic health networks (EHN), or claims clearinghouses, to share non-financial encounter information with the state-designated health information exchange (HIE), currently CRISP. The legislation will facilitate success under the Model by improving hospital-and community-based care partners' visibility into patient care patterns and care teams. This information is essential as hospitals are increasingly required to manage new panels of patients and exhibit care transformation expected by CMS.

The legislation will also ease the burden for non-hospital providers who share information into the HIE. Under current practice, HIE users must share patient rosters manually. This information is already embedded in the encounters available through EHN data feeds. HB 1022 facilitates sharing encounter data at scale.

Success under the Model requires Maryland, and Maryland hospitals, to transform the way care is delivered and improve population health. Data is essential to meet these goals. Maryland's commitment to create a statewide health information exchange, with investments from hospital partners, positions Maryland as a leader in health information technology. Fully utilizing this resource is vital to success under Maryland's Total Cost of Care Model.

For these reasons we urge a *favorable* report on House Bill 1022.

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