

TO: The Honorable Delores Kelley, Chair
Senate Finance Committee

FROM: Annie Coble
Assistant Director, State Affairs, Johns Hopkins University and Medicine

DATE: February 22, 2022

Johns Hopkins University and Medicine urges a **favorable** report on **SB659 Maryland Medical Assistance Program - Psychiatric Inpatient Care - Admissions Restrictions (Psychiatric Hospital Admissions Equity Act)**. This bill prohibits Maryland Medicaid from restricting admission of a Medicaid recipient into inpatient psychiatric care unless the limitations are based on medical necessity or established through regulations.

In May 2021, Maryland Medicaid released guidance requiring an Emergency Department to obtain 4 or 5 denials (depending on the hospital) before it can seek authorization for the patient to be transferred to a psychiatric IMD. This is an incredible barrier to getting patients into the appropriate level of care. There is already a significant delay in getting psychiatric patients out of emergency departments and into the appropriate care, any additional barrier, administrative or otherwise, would just continue the delay at the detriment to the patient.

Administrative changes like this are incredibly impactful to the patients, young patients in particular. At Johns Hopkins, some children have been hospitalized for as long as 115 days beyond what is medically necessary because of lack of community placements. This creates limited capacity in our inpatient units. Johns Hopkins Child and Adolescent Psychiatry inpatient services receives over 2,000 referrals and is only able to accept approximately 20% due to the unit being at capacity. Requiring emergency departments to make requests to inpatient units that are already at capacity is an unnecessary task.

Having patients transfer into the appropriate level of care as quickly as possible should be the top priority for the State. It is unreasonable to expect Medicaid recipients to sit in emergency departments to wait for denials that they know are coming before being allowed to go to an IMD. This bill realigns the priorities of Maryland Medicaid to be patients first. For these reasons and more, Johns Hopkins urges a favorable report on SB659.