

February 7, 2023

To: The Honorable Joseline Pena-Melnyk, Chair, House Health and Government Operations

Re: Letter of Concern- House Bill 121- Mental Health - Treatment Plans for Individuals in Facilities - Requirements

Dear Chair Peña-Melnyk:

On behalf of the Maryland Hospital Association's (MHA) 60 member hospitals and health systems, we appreciate the opportunity to comment on House Bill 121.

Ensuring family involvement in a patient's treatment plan, when possible, is always clinical best practice. It is also required by the Joint Commission, and other accrediting entities that certify hospitals and health systems meet quality standards of care and enable participation in Medicare and Medicaid.

We agree with the intent of the legislation, yet we believe there are a few areas of opportunity to ensure the spirit of the law, should it pass, can be implemented in an acute hospital environment. Changes to treatment in an acute care setting can be made daily. As written, these minor changes would require separate notifications.

Furthermore, staff documentation requirements already contribute to staff burnout. The legislation as written could exacerbate this issue.

Lastly, the language about family involvement could be interpreted to include the permission of substitute judgement—or the family having veto power over treatment plans—leading to a distortion of the patient-doctor relationship.

MHA is working with our members to offer amendment language to allay clinicians' concerns and maintain the fidelity to the sponsors' intent. We hope to share this with the sponsors over the next several days and look forward to working with them as the legislation moves through the process.

For more information, please contact: Erin Dorrien, Vice President, Policy Edorrien@mhaonline.org