

CHERISHING THE DIVINE WITHIN ALL

Testimony on HB 1134 Hospitals and Related Institutions - Residential Treatment Centers - Accreditation House Health and Government Operations Committee March 1, 2024 POSITION: SUPPORT

My name is Kevin Keegan, and I am with Catholic Charities of Baltimore. We support HB 1134, which would increase the accreditation options for Residential Treatment Centers in Maryland and allow RTCs in Maryland to have a choice over their accreditation agency similar to the choice that Maryland's outpatient behavioral providers have.

Inspired by the Gospel to love, serve and teach, Catholic Charities provides care and services to improve the lives of Marylanders in need for the past 100 years. Catholic Charities has accompanied Marylanders as they age with dignity, obtain empowering careers, heal from trauma and addiction, achieve economic independence, prepare for educational success and feel welcome as immigrant neighbors.

At Catholic Charities we operate a 55-bed licensed Residential Treatment Center (RTC) for children up to the age of 14. We are currently accredited by the Joint Commission and have no immediate plans to change that, although would be open to having that option if we so choose. We are supportive of the changes that have been proposed in this piece of legislation.

Most providers of congregate and outpatient services have historically chosen the Council on Accreditation (COA) or the Commission on Accreditation of Rehabilitation Facilities (CARF) as their accrediting agency. They have traditionally been viewed as more focused on community-based providers, whereas Joint Commission has historically been viewed as more medically focused, given their status as the accrediting agency for all hospitals in Maryland. Prior to any accreditation requirements for community-based providers, RTCs were required to be accredited, so they were lumped in with hospitals decades ago on this requirement. More recently, as accreditation has become a requirement as a condition of licensure for many levels of care, providing a choice of accrediting bodies has become standard practice across the country. The lack of choice isn't related to one being more rigorous or better than the other, it simply grew out of this historical practice.

One of the limiting factors in growing the network of RTC providers is the unwillingness to become accredited by the Joint Commission rather than being able to stay with their current accrediting agency. This law would open the door to other providers being willing to provide the critical level of service in Maryland.

In closing, we urge the committee to give HB 1134. Thank you for your time and consideration.