



Maryland Chapter

AMERICAN COLLEGE OF
EMERGENCY PHYSICIANS

TO: The Honorable Joseline A. Pena-Melnyk
Members, House Health and Government Operations Committee
The Honorable Harry Bhandari

FROM: Danna L. Kauffman
Pamela Metz Kasemeyer
J. Steven Wise
410-244-7000

DATE: February 28, 2024

RE: **LETTER OF INFORMATION** – House Bill 1143 – *Emergency Medical Services – Maryland
Emergency Department Wait Time Reduction Commission and Standardized Protocols –
Establishment*

The Maryland Chapter of the American College of Emergency Physicians (MDACEP), which represents the interests of emergency physicians and their patients throughout the State of Maryland, submits this **letter of information** on House Bill 1143.

House Bill 1143 establishes a Maryland Emergency Department Wait Time Reduction Commission to enhance the overall effectiveness and responsiveness of emergency medical services in the State. The bill also requires the Maryland Institute of Emergency Medical Services, with the advice of the Commission, the Maryland Hospital Association, and the Health Services Cost Review Commission to (1) develop standardized operational protocols to enhance efficiency in emergency departments; (2) develop advanced technology solutions for real-time tracking and management of patient flow in hospital emergency departments; (3) develop and provide training programs for emergency department staff to adapt to, and implement, the protocols; and (4) establish a system for the regular monitoring and evaluations of hospital emergency department performance, regarding wait times and quality of patient care.

MDACEP is strongly supportive of developing and implementing strategies that reduce emergency department wait times and “boarding,” i.e., patients remaining in the emergency department after being admitted for inpatient services or waiting for a bed outside the hospital (e.g., mental health services). Members of MDACEP participated in the Hospital Throughput Work Group, which met monthly over the interim. Unlike House Bill 1143, which focuses exclusively on emergency departments, the Hospital Throughput Work Group examined the external issues that caused and/or contributed to the wait times in the emergency department. Any resolution of this important issue must focus on the totality of the health care system. House Bill 1143 appears to be redundant of the work that occurred this interim. If the General Assembly determines that the development of a Commission is necessary, MDACEP would request that the bill be broadened to examine the wider issue and that an emergency department physician be included on the Commission. In addition, we encourage the General Assembly and State agencies to continue to review the recommendations of the Hospital Throughput Workgroup and work on implementation of those recommendations.