

TO: The Honorable Pamela Beidle, Chair

Senate Finance Committee

SB447 Unfavorable

FROM: Annie Coble

Assistant Director, Maryland Government Affairs

DATE: February 11, 2025

RE: SB447 HOSPITALS – EMERGENCY MEDICAL CONDITIONS - PROCEDURES

Johns Hopkins opposes **SB447 Hospitals** – **Emergency Medical Conditions** – **Procedures.** As written, the bill codifies Emergency Medical Treatment and Labor Act (EMTALA) in Maryland statute and adds additional State penalties. We understand and support the goal of the legislation is to create additional protection for patients, but are concerned with the execution.

EMTALA is a federal law that protects patients by requiring hospitals to provide emergency care to anyone in need. EMTALA was enacted in 1986 and has been updated throughout the years based on precedents and best practices. Duplicating the provisions in State law could easily lead to confusion and discrepancies regarding implementation. For example, there are discrepancies between this law and EMTALA regarding hospitals accepting transfers, and allowable procedures to register a patient.

As written, there are different thresholds for penalties between the current EMTALA federal law and the proposed law but no clarity regarding if a hospital, and/or its providers, could be penalized by both.

Finally, and more importantly, duplicating EMTALA would not create any more protections for patients. Hospitals are dedicated, and required, to provide emergency care to best serve our patients. Johns Hopkins Medicine handles more than 337,100 emergency visits each year. This law would not change if, how or when we deliver necessary care to our patients.

Johns Hopkins respectfully requests an **unfavorable** committee report on SB447, as it is duplicative and unnecessary but does not help patients.