

Wes Moore, Governor · Aruna Miller, Lt. Governor · Ryan Moran, Dr.PH, Acting Secretary

March 4, 2025

The Honorable Pamela Beidle Chair, Finance Committee 3 East Miller Senate Office Building Annapolis, Maryland 21401

## RE: Senate Bill (SB) 740 – Health Care Facilities - Warrior Community Members (SFC Matthew Fast Act for Warrior Healthcare) – Letter of Information

Dear Chair Beidle and Committee Members:

The Maryland Department of Health (Department) respectfully submits this letter of information for Senate Bill (SB) 740 – Health Care Facilities - Warrior Community Members (SFC Matthew Fast Act for Warrior Healthcare).

SB 740 requires all healthcare facilities to screen patients for military service affiliation, document this designation in medical records, and comply with The Joint Commission's National Patient Safety Goal on Health Equity. Additionally, the bill mandates that warrior community members, including service members, veterans, and their families, be classified as a vulnerable population and requires annual reporting to the Governor and General Assembly, beginning in 2026, on their healthcare needs, the extent to which healthcare facilities are meeting those needs, and progress toward achieving health equity.

The Department understands that the legislation's intent aligns with the state's ongoing efforts through the "Ask the Question" initiative, which encourages healthcare providers to systematically ask, "Have you or a family member ever served in the military?" during patient intake.

The "Ask the Question" initiative is intended to enhance data collection, improve service referrals, and facilitate better care coordination for military-affiliated individuals. Initial implementation efforts are focused on provider education, electronic health record (EHR) integration, and expanding awareness among healthcare professionals.

Implementing SB 740 would require statewide data collection and analysis to track warrior community healthcare needs and facility compliance. This process would involve new data-sharing agreements, IT system modifications, and increased coordination with healthcare providers to ensure accurate reporting.

To fulfill the bill's requirements, the Department anticipates it would require additional personnel for compliance monitoring to manage data collection, compliance oversight, reporting functions, and Information system updates to the existing Electronic Health Record systems and state health databases, which may require modifications; the fiscal cost of fulfilling this legislation's

requirement for the Department is estimated to be \$150,000 for IT system upgrades and an ongoing annual cost of approximately \$499,000, including staffing, IT support, and compliance monitoring.

I hope this information is useful. If you would like to discuss this further, please do not hesitate to contact Sarah Case-Herron, Director of Governmental Affairs at <a href="mailto:sarah.case-herron@maryland.gov">sarah.case-herron@maryland.gov</a>.

Sincerely,

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Ryan B. Moran, Dr.P.H, MHSA Acting Secretary