



# Mt. Washington Pediatric Hospital

*Where Children Go to Heal and Grow*

*Est. 1922*

An affiliate of University of Maryland Medical System and Johns Hopkins Medicine

**HB1301**

**Favorable**

**To:** The Honorable Joseline A. Peña-Melnyk, Chair  
Health and Government Operations Committee

**From:** Scott Klein, MD, MHSA  
CEO, Mt. Washington Pediatric Hospital

**Date:** March 10, 2025

**Re:** HB1301: Maryland Medical Assistance Program, Maryland Children's Health Program,  
and Health Insurance – Transfers to Special Pediatric Hospitals – Prior Authorizations

My name is Scott Klein, CEO of Mt. Washington Pediatric Hospital. I am writing to request a **FAVORABLE** report on **HB1301**.

Mt Washington is a unique hospital – a specialty children's hospital. We help transition children from the ICU to home through intensive rehabilitation and parent training in a lower cost environment. The patients we serve have medical and social complexity. 75% are on Medicaid and impacted by social determinants of health. We regularly admit patients needing complex discharge planning. Better to tackle complex discharges in a lower cost environment than the ICU.

We are co-owned by the University of Maryland Medical System and Johns Hopkins Medicine. We partner with pediatric providers throughout Maryland to ensure children receive the right care, in the right place, at the right time. A properly functioning system of care ensures that we provide valuable healthcare in the most cost-effective way.

Maryland's system of care encourages movement of patients expeditiously from high cost to lower cost environments and any delays add waste to the system. The prior authorization process to transfer patients to MWPH is an example where waste is added to the system. As we have seen during Covid and with the past year's work with some payers, waiving prior authorization allows for more rapid movement of patients to the right environment with no downside. The patient does not benefit from prior authorization nor does the provider. Since we have had no retroactive denials from any of the payers participating, it would appear the prior authorization process does not benefit the payers either.

Accredited by The Joint Commission  
and by Commission on Accreditation  
of Rehabilitation Facilities

[mwph.org](http://mwph.org)

**Mt. Washington Pediatric Hospital**  
1708 West Rogers Avenue  
Baltimore, Maryland 21209  
410-578-8600

**Mt. Washington Pediatric Hospital  
at UM Capital Region Medical Center**  
901 North Harry S. Truman Drive,  
8th Floor, Largo, Maryland 20774  
240-677-1800 (inpatient)  
240-677-1850 (outpatient)

What the prior authorization process does do is delay transfer. Arranging a bed, coordinating ambulance transportation, and ensuring parents can be available for transport requires knowing when authorization will be in place. This often means scheduling 2-3 days ahead in hopes authorization will go through. For the payers where prior authorization is not required, the teams can arrange transfer as soon as the patient is ready. Any days lost are wasted for the patient and the system. For 400+ admissions, that is a lot of waste for something that doesn't seem to provide value for anyone. Given the difficulty with hospital throughput and emergency room delays, this is an opportunity to ensure an acute pediatric bed is available for those who desperately need one.

As a pediatrician who has worked with medically fragile children my entire career, I know the value of our patients reaching us as quickly as possible to take the next steps in their journey home.

For these reasons I respectfully request a **favorable** committee report on **HB1301**.