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Health and Government Operations
Committee
Chair
Health Occupations and
Long-Term Care Subcommittee

House Chair
Joint Committee on Administrative,
Executive, and Legislative Review



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Testimony of Delegate Samuel I Rosenberg
Before the Health and Government Operations Committee

In Support of
House Bill 1301

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

Madam Chair and Members of the Health and Government Operations Committee:

Prior authorizations represent a present threat to Maryland's healthcare system and its current and future patients that must be mitigated. They require a doctor or provider to obtain approval of a patient's health plan before providing that patient any healthcare services.

This bogs down the system and perpetuates long wait times for emergency services in Maryland. Authorization typically takes several days and forces hospitals to delay admissions to avoid risking nonpayment for the entire length of an in-patient stay.

Our healthcare system has disproportionately prioritized healthcare administration over investment in actual healthcare. Reflecting this, nationally, the Peterson-KFF health system tracker shows that there is a 10:1 administrator-to-doctor ratio. The tracker also demonstrates how the number of healthcare administrators increased over 3,800 percent between 1970 and 2019, compared to a 200-percent increase in the number of doctors.

House Bill 1301 represents a continuation of my efforts to eliminate prior authorizations and improve efficiency in our healthcare system. Last session, I introduced House Bill 1376 (2024).

During the COVID-19 pandemic, these prior authorizations to special pediatric hospitals were suspended, and transfers from acute care were expedited. While we continue to see substantial shortages of healthcare workers, any viable method for increased efficiency is crucial.

All other forms of care transfer do not require prior authorization; yet we require it when advancing children with cancer to their healthcare treatment in a special pediatric hospital. It is

both cruel and unnecessary to require prior authorization before conducting any evaluation of the type of care and resources that would be needed for emergency treatment.

HB1301 would vastly improve the efficiency and effectiveness of Maryland's healthcare system, and I urge the Committee to issue a favorable report.

March 10th, 2025