



**2026 SESSION**  
**POSITION PAPER**

**BILL NO:**                **HB 1563**

**COMMITTEE:**        **Senate Finance**

**POSITION:**           **Support As Amended**

**TITLE:**                **HB 1563 - Emergency Room Services and Post-Acute Care - Coverage and Facility Studies**

**BILL ANALYSIS**

*HB 1563 - Emergency Room Services and Post-Acute Care - Coverage and Facility Studies* prohibits insurance carriers from denying coverage for certain emergency department services. It further mandates that the Maryland Health Care Commission (MHCC) and the Health Services Cost Review Commission (HSCRC) jointly study hospital and post-acute care bed capacity, improve data auditing processes, and identify strategies to facilitate efficient patient transitions between care settings.

**POSITION AND RATIONALE**

The MHCC supports as amended HB 1563 for its focus on modernizing Maryland's health planning and data infrastructure and for working towards addressing the sources of extended stays in Emergency Departments and hospital units post-admission.

Emergency Department (ED) wait times have been a longstanding challenge in Maryland, with the length of stay (LOS) frequently exceeding national averages. These concerns regarding patient experience and hospital efficiency predate the implementation of the Maryland Model.

Multiple potential reasons for extended wait times suggest that broader, systemic factors are contributing to the state's difficulties. Furthermore, recent Census data indicates that Maryland's population is aging faster than the national average. This trend may further exacerbate wait times due to increased patient acuity and more complex hospitalizations.

In addition to monitoring the impact of an aging population, the state anticipates shifts in insurance coverage as Maryland implements the new Medicaid eligibility requirements under H.R. 1.

During the 2024 legislative session, the Maryland General Assembly passed House Bill 1143 (Chapter 0844), which established the Maryland Emergency Department Wait Times Commission.

The purpose of the Commission is to examine and address factors throughout the health care system that contribute to increased emergency department (ED) wait times. The Commission issued an interim report in November 2025 and one of the findings and recommendations is to strengthen the State's data infrastructure by developing a reliable and user-friendly reporting mechanism to comprehensively assess capacity across all healthcare settings, both in real-time and in annual assessments. That work is in process and will result in recommendations by the end of this year.

HB 1563 is aligned with this specific recommendation in the following ways:

- **Standardized Capacity Metrics:** The bill establishes a coordinated framework to quantify bed capacity across the care continuum. MHCC recognizes that existing capacity constraints directly impact emergency department efficiency and overall care delivery, and the goal of establishing standardized definitions would ultimately improve the data to quantify bed capacity in the State.
- **Strategic Alignment:** The mandated study integrates MHCC's health planning and Certificate of Need (CON) oversight with HSCRC's financial and utilization data. This partnership ensures that capacity planning and solutions are driven by both clinical demand and the Total Cost of Care model.
- **Data Integrity:** By prioritizing standardized auditing and data quality, HB 1563 addresses current reporting deficiencies that can mischaracterize facility capacity. Strengthening these processes ensures that future policy developments are based on accurate, actionable analytics.



In addition to extended wait times in emergency departments, hospitals have also reported extended stays for certain patients admitted to their facilities due to challenges with discharging these patients when they are ready to be transitioned to clinically appropriate post-acute care settings. This situation creates bottlenecks that keep patients in a high acuity, high-cost level of care that can also contribute to extended wait times in the emergency department, because inpatient beds are occupied by patients waiting to be discharged to post-acute care. This legislation would fund work to identify the causes of post-acute care discharge delays and potential policy options to address such factors.

For these reasons, the Maryland Health Care Commission respectfully requests a favorable report on House Bill 1563.

