



TESTIMONY FOR HB1051 – Public Health – Patient Access to Medication – FAVORABLE

Bill Sponsor: Delegate Rosenberg

Committee: Health and Government Operations

Organization Submitting: Maryland Legislative Coalition

Person Submitting: Jessica Gorski, Executive Committee

Position: FAVORABLE

Chair, Vice Chair, and Members of the Committee,

My name is Jessica Gorski, and I am submitting this testimony in strong support of HB1051 on behalf of the Maryland Legislative Coalition. Our coalition represents more than 30,000 Marylanders across every legislative district, united by a commitment to advancing policies that strengthen public health, improve access to care, and support the well-being of all Maryland residents.

HB1051 is a forward-looking and practical reform that improves patient access to essential medications while reducing preventable hospital readmissions.

This bill establishes the Meds-to-Beds Program within the Maryland Department of Health, requiring every hospital in the state to participate. The program's purpose is clear: reduce hospital readmissions by ensuring that patients receive their discharge medications before they leave the hospital, delivered directly by a licensed pharmacist.

HB1051 also modernizes Maryland's medication-delivery infrastructure by:

- Authorizing certain health care facilities to use automated drug dispensing systems and remote dispensing systems under defined safeguards
- Allowing pharmacies to outsource prescription processing to another pharmacy under specific conditions
- Updating the definition of telehealth to include the use of automated and remote dispensing systems for insurance coverage purposes

These updates reflect the realities of modern healthcare delivery and help ensure that Maryland patients receive timely, accurate, and accessible medication support.

These improvements are not theoretical. They are urgently needed.

Medication non-adherence after hospital discharge is one of the leading drivers of preventable readmissions. When patients leave the hospital without their medications—because of transportation barriers, pharmacy delays, or confusion about prescriptions—their health outcomes worsen, and the likelihood of returning to the hospital increases. The Meds-to-Beds model directly addresses this by ensuring:

- Patients receive medications before discharge, reducing gaps in treatment
- Pharmacists can provide real-time counseling and education
- Hospitals can improve continuity of care and reduce readmission penalties
- Families face fewer logistical and financial barriers during a vulnerable transition period

Additionally, the authorization of automated and remote dispensing systems expands access in underserved areas, supports long-term care and rural facilities, and strengthens Maryland's medication-delivery infrastructure.

This legislation aligns squarely with the mission of the Maryland Legislative Coalition. It improves public health outcomes, enhances patient safety, modernizes healthcare delivery, and reduces avoidable strain on families and caregivers. HB1051 ensures that Marylanders can access the medications they need at the moment they need them most.

No patient should be put at risk because they leave the hospital without the medications essential to their recovery. HB1051 helps ensure that doesn't happen.

Thank you for your time and consideration. **We respectfully urge a FAVORABLE report on HB1051.**