



THE MARYLAND HOUSE OF DELEGATES
ANNAPOLIS, MARYLAND 21401

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Testimony in SUPPORT of HB 1002: Nursing Facilities - Involuntary Discharge or Transfer

Summary: HB 1002 closes a dangerous gap in state law by requiring a 30-day involuntary discharge notice for all nursing home residents, regardless of how long they have lived in a facility. The bill also requires facilities to identify a safe and viable discharge location with a specific address to prevent residents from being released to hospitals, shelters, or unsafe housing. These changes will protect vulnerable residents, reduce avoidable hospitalizations, and improve continuity of care across Maryland's long-term care system.

Overview: Involuntary nursing home discharges are the number one complaint reported by Long-Term Care Ombudsman programs in Maryland and nationwide. According to the Maryland [Office of the Long-Term Care Ombudsman](#), residents and families routinely report abrupt transfers that leave individuals medically unstable, unhoused, or discharged to unsafe environments.

Current Maryland law requires a 30-day discharge notice only after a resident has lived in a facility for 30 days. This creates a dangerous gap: residents in short-term rehabilitation or post-acute care, often recovering from surgery, stroke, or serious illness, can be discharged with little warning and without meaningful transition planning.

These abrupt discharges frequently result in:

- Hospital readmissions
- Homelessness or unstable housing
- Placement in inappropriate settings
- Interrupted medical treatment and medication errors

Federal nursing home standards emphasize that facilities must ensure safe and orderly discharges, yet without a universal notice requirement, residents lack sufficient time to appeal, secure housing, arrange services, or coordinate care.



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Residents in nursing facilities are among Maryland's most medically vulnerable individuals. Many have cognitive impairments, mobility limitations, or complex health needs that make sudden displacement not just disruptive, but dangerous.

Research consistently shows that poorly planned discharges increase hospital utilization and health system costs. The [Centers for Medicare & Medicaid Services](#) identifies safe discharge planning as a core quality and patient safety measure. When residents are discharged to unsafe or unknown locations, continuity of care collapses.

Providing adequate notice is not merely administrative, it is a matter of patient safety, dignity, and public health.

This legislation makes two targeted but critical improvements:

- Universal 30-Day Notice: ensures every nursing home resident, regardless of length of stay, receives a 30-day written involuntary discharge notice.
- Safe and Viable Discharge Requirement: requires facilities to identify a safe and viable discharge location with a specific address, strengthening accountability and preventing discharges to uninhabitable or unknown destinations.

These changes align Maryland policy with best practices recommended by long-term care advocates, including the [National Consumer Voice for Quality Long-Term Care](#).

This bill will:

- Prevent unsafe discharges to hospitals, shelters, storage units, or unlivable homes
- Reduce avoidable hospital readmissions and emergency care utilization
- Improve care transitions and long-term stability in community settings
- Support families and caregivers in planning appropriate placements
- Strengthen oversight and accountability in nursing facility discharge practices

For Maryland, this means better health outcomes for residents and more efficient use of state health resources.

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Conclusion: Every nursing home resident deserves time, planning, and a safe destination when leaving a facility. This legislation closes a harmful loophole, strengthens patient protections, and ensures that transitions from institutional care are humane, safe, and coordinated.