



Hospice & Palliative Care Network
OF MARYLAND

February 23, 2026

The Honorable Heather Bagnall, Chair
The Honorable Bonnie Cullinson, Vice Chair
Maryland House Office Building
6 Bladen Street
Annapolis, MD 21401

RE: HB965/SB240 Office of Health Care Quality Stakeholder Advisory Council -Establishment - Favorable with Amendments

Dear Chair Bagnall, Vice Chair Cullison, and Members of the Committee:

On behalf of the Hospice & Palliative Care Network of Maryland (HPCNM), I write in support of **HB965/SB240** and respectfully request a favorable report with amendments.

HPCNM is Maryland's statewide association representing hospice and palliative care providers, clinicians, and partners committed to advancing access to high-quality, patient- and family-centered serious illness and end-of-life care across the state. Our members collectively serve over 25,000 Marylanders each year in homes, nursing facilities, hospitals, and hospice houses.

We appreciate the intent of **HB965/SB240** and its focus on strengthening care delivery, oversight, and collaboration across Maryland's health care system. The goals of this legislation align closely with our mission to ensure quality, access, and appropriate utilization of hospice and palliative care services.

Proposed Amendment

HPCNM respectfully requests that **HB965/SB240** be amended to include:

- A designated seat for the Hospice & Palliative Care Network of Maryland; **or**
- Language permitting appointment of a representative referred by the Hospice & Palliative Care Network of Maryland.

Rationale for Inclusion

Including hospice and palliative care representation is important for several reasons:

1. **Expertise in Serious Illness and End-of-Life Care**
Hospice and palliative care providers bring specialized clinical and operational expertise in managing complex, high-acuity patients with advanced and life-limiting illnesses. Policy



Hospice & Palliative Care Network
OF MARYLAND

decisions affecting care coordination, utilization, reimbursement, or quality measurement directly impact this population.

2. **System-Wide Perspective**

Hospice and palliative care providers operate across care settings — home, hospital, nursing facility, and residential hospice — providing a cross-continuum lens that can help ensure policies are practical, patient-centered, and fiscally responsible.

3. **Equity and Access Considerations**

Hospice and palliative care programs serve Medicaid beneficiaries, rural communities, pediatric populations, and individuals with significant social determinants of health. Inclusion of HPCNM helps ensure access and equity implications are thoughtfully considered.

4. **Alignment with Cost and Quality Goals**

Evidence consistently demonstrates that high-quality hospice and palliative care can reduce avoidable hospitalizations, improve patient and family satisfaction, and align care with patient goals. Representation would support the bill's broader objectives related to quality improvement and responsible resource utilization.

5. **Established Statewide Infrastructure**

As the recognized statewide association, HPCNM can provide a coordinated and representative voice rather than a single organizational perspective, ensuring balanced and informed participation.

HPCNM stands ready to collaborate constructively with legislators, state agencies, and stakeholders to help ensure **HB965/SB240** achieves its intended goals while reflecting the realities of serious illness and end-of-life care delivery in Maryland.

We respectfully request a **favorable report with the amendment outlined above**.

Thank you for your consideration and for your leadership on this important matter. If you need additional information, please feel free to call me at 410.746.0659.

Sincerely,

Peggy Shimoda, CAE

Executive Director

Hospice & Palliative Care Network of Maryland

cc: Monica Escalante, HPCNM President, Public Policy Cochair
Carlos Graveran, HPCNM Public Policy Cochair