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Senate Finance Committee February 18, 2025 Senate Bill 696 – Public Health – Pediatric Hospital Overstay Patients POSITION: SUPPORT

On behalf of MedChi, The Maryland State Medical Society and the Maryland Chapter of the American College of Emergency Physicians (MDACEP), we submit this letter of support for Senate Bill 696.

Senate Bill 696 expands the Maryland Mental Health and Substance Use Disorder Registry and Referral System to include both private and state inpatient and outpatient services. It mandates the Maryland Department of Health, in coordination with the Department of Human Services, to ensure that pediatric hospitals overstay patients – those who remain in hospitals beyond medical necessity – are placed in the least restrictive setting possible. Hospitals are authorized to explore both in-state and out-of-state placements for these patients. Additionally, the bill establishes a Pediatric Hospital Overstay Coordinator within the Governor's Office for Children to coordinate efforts between state agencies, advocate for pediatric hospital overstay patients, and maintain data on their cases. The bill includes funding provisions for filling positions at regional institutes for children and adolescents and mandates annual reporting on pediatric hospital overstay cases.

Pediatric hospital overstays have been a persistent issue in Maryland, particularly affecting foster children. On February 6, 2025 the Department of Human Services released their <u>Report on Hospital Stays</u>, <u>Average Length of Stay, and Placements After Discharge</u>, which was completed pursuant to the 2024 Joint Chairmen's Report. According to the report in FY 2024, 102 youths in the care of local departments of social services experienced hospital overstays. These children often remain in hospitals for weeks or even months beyond medical necessity, facing emotional and developmental challenges as a result. These overstays occur due to gaps in community-based and residential services, highlighting the need for improved placement options, which this bill aims to address. For these reasons, MedChi and MDACEP support Senate Bill 696.

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