



The Hospital + Healthsystem
Association of Pennsylvania

Leading for Better Health

April 25, 2022

TO: Chairman Frank Farry, Chairman Angel Cruz, and Honorable Members of the House Human Services Committee

FROM: Heather Tyler, Vice President, State Legislative Advocacy

SUBJECT: Support for House Bill 1644, Medicaid Care Transition Program

On behalf of 235 member hospitals statewide and the patients and communities they serve, The Hospital and Healthsystem Association of Pennsylvania (HAP) respectfully requests that you vote “yes” on House Bill 1644 when it comes before the House Human Services Committee.

Sponsored by Representative Jim Struzzi, HB 1644 is one policy change that can begin to alleviate significant inadequacies of Pennsylvania’s behavioral health delivery system and provide additional data to policymakers as we begin to address the larger structural issue of access to behavioral health care.

We are in a behavioral health crisis in Pennsylvania. Now, more than ever, our families, friends, neighbors, and colleagues are desperately seeking help for mental distress.

Hospital emergency departments (ED) are a main point of entry for in-crisis patients who need critical health care. Many who come in to the ED are suffering with dire mental health and trauma. And while the ED has the capacity to treat acute physical needs, it is not the suitable or appropriate setting to provide complex, long-term mental health treatment.

While EDs have and continue to improve their abilities to effectively assess and triage patients in need of such care, hospitals often face long delays in being able to move patients to the proper inpatient and outpatient settings to get the treatment they need. Placement delays require patients to wait in EDs for extended periods—sometimes days or even weeks. This situation denies the person in crisis the care they need, stresses caring health care professionals who want to provide the best care, and then confounds hospital staff charged with finding and coordinating clinically appropriate treatment.

While the lack of inpatient psychiatric beds, widespread instances of hospital “boarding” due to lack of discharge options, and crisis capacity will require a comprehensive and sustained effort, HB 1644 is an immediate step that can be taken now to address this issue impacting Medicaid patients.

HB 1644 will implement accountability measures for Behavioral Health Medicaid Managed Care Organization (BH-MCOs)—Medicaid Care Transition Program Act. Specifically, the bill would:



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- Require BH-MCOs to devote resources to help hospitals find placements for individuals currently “boarded” in an emergency department or inpatient unit
- Provide that, if a placement is not found within 24 hours, a case must be referred to the Department of Human Services (DHS), which must work with the BH-MCO and others until an appropriate placement is identified
- Permit—for the first time—DHS to track and measure the scope of this problem. This data will be invaluable as we work together to solve these daunting issues during the long term

This bill, which reflects feedback from Pennsylvania health care providers and experts who have instituted a similar process in another state (Massachusetts), relies on the commonsense premise that the commonwealth is paying BH-MCOs to provide care for Medicaid patients, and they should be held accountable for doing so.

Thank you for the opportunity to provide the hospital community’s position on HB 1644.



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