

MARYLAND HEALTH CARE COMMISSION

GROSS AND NET 2021 BED NEED PROJECTIONS FOR ACUTE REHABILITATION BEDS BY HEALTH PLANNING REGION

In accordance with COMAR 10.24.09.05, the Maryland Health Care Commission (MHCC) publishes the following notice of regional gross and net bed need for acute rehabilitation beds. These regional bed need projections will apply in the review of Certificate of Need (CON) applications acted on by MHCC. Published projections of gross bed need remain in effect until MHCC publishes updated acute rehabilitation bed need projections. Projections of net bed need can change during the interim between bed need projection updates as a result of changes in the number of licensed acute rehabilitation beds.

Gross and Net Bed Need Projections for Acute Rehabilitation Beds: Maryland, 2021							
Health Planning Region	Minimum Occupancy Standard	Range	Total Days Projected	Current Licensed Bed Capacity	Available Bed Days	Gross Bed Need Range	Net Bed Need Range
Central	0.77	minimum	62,848	260	94,900	224	-36
		maximum	76,994			274	14
Eastern Shore	0.79	minimum	14,167	79	28,835	49	-30
		maximum	25,447			89	10
Montgomery	0.80	minimum	22,947	87	31,755	79	-8
		maximum	34,665			119	32
Southern	0.75	minimum	3,133	28	10,220	11	-17
		maximum	26,109			95	67
Western	0.75	minimum	9,385	33	12,045	34	1
		maximum	11,501			42	9

Sources: MHCC staff analysis of HSCRC discharge abstract data CY 2012-CY 2016; District of Columbia (DC) discharge abstract data CY 2012-CY 2016 discharge data; data from Johns Hopkins Bayview Medical Center for CY 2016; corrected data on patient acute rehabilitation days from Levindale for CY 2012-CY 2016; information submitted by Adventist Rehabilitation hospital regarding CY 2012 data; information provided by Union Memorial Hospital regarding CY 2012; Population data from the Maryland Department of Planning; Population data from the U.S. Census or respective state agencies responsible for official population projections were used for Virginia, West Virginia, Pennsylvania, and Delaware; for the District of Columbia, population estimates and projections for 2011-2021 are based on projections created by the University of Virginia Weldon Cooper Center because official population projections were not available through the U.S. Census or a District of Columbia government agency. Bed capacity information is from the licenses for hospitals and information from Sinai Hospital on the physical number of acute rehabilitation beds, which is lower than its licensed capacity.

Notes: For CY 2012, all discharges from Adventist Rehabilitation Hospital are counted as acute rehabilitation cases, even though the nature of admission or type of daily service may be listed as unknown or other. Staff obtained corrected information from the Hospital, after noting an unusually low number of acute rehabilitation discharges as compared to CY 2011 and CY 2013. In addition, for CY 2012 and CY 2013, for Adventist Rehabilitation Hospital, rather than relying on the county code to define patient origin, the zip code field should be used. Otherwise, many discharges will be labeled as being from an unknown county. For Union Memorial Hospital, CY 2012 acute rehabilitation discharges with a DRG of 945, or 946, and nature of admission coded as 9 are included as acute rehabilitation discharges. For DC discharge abstract data in CY 2015Q4 and CY 2016, records from George Washington University Hospital Center are counted as acute rehabilitation discharges when the field "rehab_flag" has a value of "1." For the 2015 HSCRC discharge abstract data, records with a value "CR" in the field "datatype" are excluded because this coding indicates a chronic care discharge.

The Central Region is comprised of Baltimore City and Anne Arundel, Baltimore, Carroll, Cecil, Harford and Howard Counties.

The Eastern Shore is comprised of Caroline, Dorchester, Kent, Queen Anne's, Talbot, Somerset, Wicomico, and Worcester Counties.

Montgomery County is comprised of Montgomery County.

Southern Maryland is comprised of Charles, Calvert, Prince George's and St. Mary's Counties.

Western Maryland is comprised of Allegany, Frederick, Garrett, and Washington Counties.

SPECIAL DOCUMENTS

Capacity and Utilization for Maryland Hospitals in CY 2016 at Hospitals With Currently Licensed Acute Rehabilitation Beds							
Hospital Name	Discharges	Total Days	Bed Days Available	Occupancy*	ADC	Health Planning Region	Current Licensed Beds*
Johns Hopkins Hospital	537	5,672	6,570	86%	16	Central	18
Sinai Hospital	1,195	11,630	15,695	74%	32	Central	43
Johns Hopkins Bayview Hospital	433	6,486	4,380	148%	18	Central	12
Good Samaritan Hospital	1,313	12,812	25,185	51%	35	Central	69
University of Maryland Rehabilitation and Orthopaedic Institute	1,755	20,903	35,770	58%	57	Central	98
Levindale Hospital	78	1,625	7,300	22%	4	Central	20
Memorial Hospital at Easton	343	3,471	7,300	48%	10	Eastern	20
HealthSouth Chesapeake Rehab Hospital	1,467	19,636	21,535	91%	54	Eastern	59
Adventist Rehabilitation Hospital	1,862	25,887	31,755	82%	71	Montgomery	87
Laurel Regional Hospital	259	2,413	10,220	24%	7	Southern	28
Meritus Medical Center	439	4,527	7,300	62%	12	Western	20
Western Maryland Regional Medical Center	293	3,205	4,745	68%	9	Western	13

Sources: MHCC staff analysis of data and sources used in the acute rehabilitation projections for 2021, as described in the above table.

*Notes: Johns Hopkins Bayview Hospital achieved occupancy above its licensed capacity through the utilization of chronic beds. Sinai hospital has a physical capacity of 43 beds, even though its license indicates a capacity of 57 beds.