

In accordance with the requirements in COMAR 10.24.21.05B(2), the Maryland Health Care Commission (MHCC) publishes the following notice regarding the projected utilization for adolescent, child, and adult psychiatric beds. Geriatric beds are included in the adult bed utilization projections. The utilization projections for psychiatric beds by age group are final and will apply to Certificate of Need (CON) applications acted on by MHCC after the date of publication. Published utilization projections remain in effect until new projections are published in the *Maryland Register*. Projections may change after publication, as a result of changes in the number of licensed beds, changes in the number of approved beds made through the CON review or exemption processes, or corrections of errors in data.

**Gross and Net Bed Utilization Projections for Acute Psychiatric Adolescent Beds, CY 2030**

Health Planning Region	Occupancy	Minimum Days	Maximum Days	Current Number of Licensed Beds	Gross Bed Utilization Minimum	Gross Bed Utilization Maximum	Net Bed Utilization Minimum	Net Bed Utilization Maximum
Baltimore Upper Shore	76.4%	30,332	35,582	135	109	128	-26	-7
Lower Eastern Shore	70.0%	0	1,602	10	0	6	-10	-4
Montgomery	74.4%	5,652	6,795	27	21	25	-6	-2
Southern Maryland	70.0%	2,761	5,347	0	11	21	11	21
Western Maryland	75.0%	5,997	7,325	24	22	27	-2	3

**Gross and Net Bed Utilization Projections for Acute Psychiatric Child Beds, CY 2030**

Health Planning Region	Occupancy	Minimum Days	Maximum Days	Current Number of Licensed Beds	Gross Bed Utilization Minimum	Gross Bed Utilization Maximum	Net Bed Utilization Minimum	Net Bed Utilization Maximum
Baltimore Upper Shore	70.0%	11,244	14,528	48	44	57	-4	9
Lower Eastern Shore	70.0%	0	200	5	0	1	-5	-4
Montgomery	70.0%	0	1,116	12	0	4	-12	-8
Southern Maryland	70.0%	0	1,070	0	0	4	0	4
Western Maryland	70.0%	2,659	3,851	14	10	15	-4	1

**Gross and Net Bed Utilization Projections for Acute Psychiatric Adult and Geriatric Beds, CY 2030**

<b>Health Planning Region</b>	<b>Occupancy</b>	<b>Minimum Days</b>	<b>Maximum Days</b>	<b>Current Number of Licensed Beds</b>	<b>Gross Bed Utilization Minimum</b>	<b>Gross Bed Utilization Maximum</b>	<b>Net Bed Utilization Minimum</b>	<b>Net Bed Utilization Maximum</b>
<b>Baltimore Upper Shore</b>	77.4%	178,176	203,396	740	657	750	-110	-20
<b>Lower Eastern Shore</b>	70.0%	4,801	6,012	13	19	24	6	11
<b>Montgomery</b>	78.1%	35,408	42,621	134	130	157	-10	16
<b>Southern Maryland</b>	72.7%	27,385	35,298	95	103	133	8	38
<b>Western Maryland</b>	71.5%	22,853	25,261	70	89	99	18	27

Sources: MHCC staff analysis of HSCRC discharge data, Maryland private psychiatric hospital data, and District of Columbia discharge data for CY 2017, CY 2018, CY 2019, CY 2021, CY 2022, CY 2023; Population estimates are from: Maryland Department of Planning; West Virginia University John Chambers College of Business and Economics; University of Virginia Weldon Cooper Center for Public Service; Pennsylvania State Data Center; Delaware Office of State Planning Coordination; District of Columbia Office of Planning; and United States Census Bureau.

Notes for all Utilization Projections:

Psychiatric discharges from Maryland general hospitals are defined as records in the Health Services Cost Review Commission (HSCRC) discharge data with major diagnosis category 19; All discharges from Maryland psychiatric hospitals are defined as psychiatric discharges. Children are defined as ages 12 and younger; adolescents are defined as ages 13 through 17; adults are defined as ages 18 through 64; geriatric patients are defined as ages 65 and older.

The occupancy level reflects a weighted average of the minimum average occupancy level for each facility with acute psychiatric beds in a health planning region (HPR). The minimum average occupancy level for a facility is defined in COMAR 10.24.21.06G(3).

The current number of licensed beds reflects the current number of licensed beds in an HPR and any beds approved through the CON process, which have not been established yet.

The minimum and maximum gross bed utilization are calculated based on the methodology in COMAR 10.24.21.06, using the base year 2023 and projected year 2030.

The minimum and maximum net bed need numbers represent the difference between the minimum and maximum gross bed need and the current number of licensed beds.

The utilization projections consider migration patterns and incorporate discharge data from hospitals in the District of Columbia to calculate utilization rates for Maryland residents. Currently, the latest full calendar year of discharge data available for District of Columbia hospitals is 2023.

Each HPR is defined as described here and in COMAR 10.24.21.06A. The Baltimore Upper Shore HPR includes Anne Arundel, Baltimore, Carroll, Cecil, Harford, Howard, Kent, Queen Anne's, and Talbot Counties, and Baltimore City. The Lower Eastern Shore HPR includes Caroline, Dorchester, Somerset, Wicomico, and Worcester Counties. The Montgomery HPR includes only Montgomery County. The Southern Maryland HPR includes Calvert, Charles, Prince George's, and St. Mary's Counties. The Western Maryland HPR includes Allegany, Frederick, Garrett, and Washington Counties.

The historic utilization rates used in these projections exclude CY 2020 because the COVID-19 pandemic altered hospital utilization significantly; the projections are still based on five years of historic data.