#### Hospital Fact Sheet CON Modernization Task Force 2018

### Inventory:

There are 47 general hospitals and 32 special hospitals currently operating in Maryland.

There are 9,611 licensed acute care beds in general hospitals in FY 2018. This number is determined by a formula based on 140% of observed average daily census (i.e., the licensed bed capacity has an allowance for approximately 29% of beds at each hospital to be empty on an average day, based on the observed average daily census used in the formula). General hospitals reported total physical bed capacity for 11,635 acute care beds in 2016.

There are 17 freestanding special hospitals currently operating in Maryland.

- Nine are psychiatric hospitals. Five of these are operated by the state and are licensed to operate 1,658 beds. They reported staffing 957 beds in 2016. Four are private psychiatric hospitals. These four have 586 licensed beds. They reported staffing 508 beds in 2016.
- Two are medical rehabilitation hospitals with 146 licensed beds.
- Three are chronic care hospitals operated by the state with 226 licensed beds and 140 beds reported as staffed in 2016.
- Three are pediatric hospitals with 100 licensed beds and 91 beds reported as staffed in 2016.

There are four additional chronic care hospitals (238 licensed beds/141 staffed beds) and 11 medical rehabilitation hospitals (362 licensed beds) operated on general hospital campuses. There is one facility in Maryland that has a chronic hospital (100 beds) and a medical rehabilitation hospital (20 beds) that does not function as a general acute care hospital.

#### Use:

The formula used for licensing acute care bed capacity means that the overall average annual occupancy rate of licensed beds for most general hospitals, that have the ability to set up and staff beds equal to their licensed capacity if sufficient demand warrants, will typically be around 70 to 72%. Statewide, the average daily census used to establish licensed acute care bed capacity for FY 2018 is equivalent to 59% of the physical bed capacity reported in 2016. Staffed bed occupancy can be higher for particular categories of acute care bed (e.g., staffed bed occupancy statewide for acute psychiatric beds licensed as part of general hospital bed complements was reported to be 81% in 2015.)

Six general hospitals reported having more licensed bed capacity than physical bed capacity in 2016.

The average occupancy rate of licensed bed capacity in state psychiatric and chronic care hospitals is low (as evidenced by the disparity reported between licensed bed capacity and staffed bed capacity).

Special rehabilitation hospital bed capacity (freestanding and on general hospital campuses) is estimated to have experienced an average annual occupancy rate of 67% in CY 2016.

#### Population Use and Average Length of Stay



## **Regulatory Scope:**

- CON approval is required to establish, relocate, or change the bed capacity of a hospital.
- CON approval is required to change the type of scope of services provided by a hospital in certain ways. These include adding medical/surgical, obstetric, pediatric, or psychiatric services. It also includes introducing cardiac surgery, PCI, neonatal intensive care, rehabilitation, or burn intensive care.
- In most cases, CON approval is required to add operating rooms to a hospital.
- Most general hospitals are now part of multi-hospital systems. This means that some redistribution of resources can be accomplished though approval of exemptions from CON.

# Maryland vs. the U.S. [Source: AHA Hospital Statistics]

# Supply - 2014

Hospitals per 100,000 population

- Maryland 0.8
- U.S. 1.6

Average Beds per Hospital

- Maryland 221
- U.S. 160

Hospital Beds per 1,000 Population

- Maryland 2.0
- U.S. 2.5

## <u>Use -2014</u>

Average Annual Occupancy Rate of Hospital Beds

- Maryland 69.9%
- U.S. 62.8%