Governor’s Proposed Budget Includes Reductions to Hospital Funding

On February 18, Governor Malloy released his FY 2016-2017 budget. The two-year $40 billion budget addresses the $1.3 billion deficit expected in FY 2015-2016 and the $1.4 billion deficit in FY 2016-2017. The two-year budget increases spending by about three percent each year.

CHA is currently reviewing the lengthy budget documents, and many yet-to-be-defined provisions, but what we know now is that the budget:

- Broadens the hospital tax by applying it to 2013 revenue. According to the Governor’s budget document, “this proposal (1) updates the base for the user fee from 2009 to 2013 total net patient revenues and (2) equalizes the tax rate on inpatient and outpatient services. Under this proposal, the user fee will increase $165.3 million from $349.1 million to $514.4 million. Taking into consideration a corresponding increase in supplemental payments to hospitals, an updated user fee will result in a net gain to the state of approximately $110 million. Figures reflect the state’s share of Medicaid expenditures. After factoring in the federal share, this proposal will increase total Medicaid expenditures by $165.3 million in each year of the biennium.”
- Eliminates the $15 million low-cost hospital pool.
- Limits the use of tax credits for businesses and hospitals. Currently, entities may offset 70 percent of their tax liability. The amount would be reduced to 35 percent in FY 2015, 45 percent in FY 2016, and 60 percent in FY 2017.
- Moves HUSKY A adults earning more than 138 percent of the federal poverty level into the Connecticut Healthcare Exchange.
- Reduces Medicaid provider rates by $107.5 million in FY 2016 and by $117.5 million in FY 2017. The reduction of rates would apply to most providers including hospitals and, while the budget does not detail the proposal, it states that “DSS will have discretion as to the distribution of this reduction.” The proposal excludes federally qualified health centers.
- Removes funding for the Federal Demonstration to Integrate Medicare and Medicaid Services Care for Dually Eligible Individuals in the amount of $21 million in FY 2016 and $30 million in FY 2017.
- Increases the newborn screening cost to hospitals by $42.00 per screen.
- Provides funding for the Governor’s mental health initiative (not defined) of $3 million in each fiscal year.
- Provides wraparound services for 100 units of supportive housing for $500,000 in each fiscal year.
- Provides funding for the substance abuse and opioid overdose prevention initiative in the amount of $224,000 in FY 2016, $326,000 in FY 2017, and $329,000 in FY 2018.
- The state will not disburse to hospitals the enhanced revenue on hospital supplemental payments of $12.9 million in FY 2014 and $16.1 million in FY 2015. Additionally, it is our understanding that the state will not disburse to hospitals the enhanced revenue in the new biennium.

Click here to read CHA’s statement in opposition to the provisions of the Governor’s budget that negatively impact hospitals.

Click here to view a PowerPoint summary of the budget.

Click here for Governor Malloy’s budget address to the General Assembly.

The budget will now be referred to the General Assembly’s Appropriations Committee for review and action, and the Committee will hold a series of public hearings over the next two weeks. The budget hearing on the Department of Social Services (DSS) budget proposal will be held on Friday, February 27, 2015.

CHA to Provide Testimony

On February 17, CHA provided testimony in support of HB 5782, An Act Allowing Pharmacists To Dispense Or Administer An Opioid Antagonist To Treat Or Prevent A Drug Overdose, and in support of HB 5784, An Act Concerning Pharmacists And Abuse-Deterrent Opioid Prescriptions. HB 5782 would allow licensed pharmacists to dispense or administer opioid antagonists such as naloxone hydrochloride (naloxone or Narcan) to reverse the respiratory depression caused by opioid overdose. HB 5784 would prevent pharmacists from making a substitution when an abuse-deterrent opioid is prescribed, unless the pharmacist receives written permission from the prescribing healthcare provider.

On Friday, February 20, CHA will provide testimony before the Public Health Committee in support of:

- SB 856, An Act Concerning Language Interpreters In Hospitals, a bill that would require acute care hospitals to make interpreter services available;
- SB 258, An Act Concerning Infant Safe Sleep Practices, a bill that would require hospitals to provide informational materials regarding recommended safe sleep practices for infants, including American Academy of Pediatrics recommendations concerning safe sleep practices, to parents after the birth of a child at the hospital; and
- SB 857, An Act Concerning Licensure For Genetic Counselors, a bill that would establish licensure requirements for genetic counselors.

CHA will provide qualified support of HB 5913, An Act Concerning Persons Who Decontaminate Reusable Medical Instruments Or Devices, a bill that would establish licensure requirements for persons who decontaminate, inspect, assemble, or package and sterilize reusable medical instruments or devices in a healthcare facility.

CHA will express concerns about SB 73, An Act Concerning Medical Records, a bill that would make changes to the statutes concerning access to medical records. and the fees charged for medical records.
Collaborations of Care Coalition Urges Support for Providers in Op-Ed

Healthcare providers across the continuum of care came together to author an op-ed on the importance of preserving Medicaid funding and supporting those who care for some of the state’s neediest patients. The piece was published in the February 13 edition of the Connecticut Mirror, the online media outlet read by state policy makers, advocates, academics, and others interested in public policy and civic engagement.

In the op-ed, healthcare providers highlighted the collaborative working relationship across the continuum of care and cautioned that cuts to the Medicaid program could turn back the clock on initiatives that are making a difference and would negatively impact access to care.

As part of CHA’s continued advocacy, the op-ed was sent to all legislators in advance of the Governor’s release of his budget on Wednesday, February 18, 2015.

The op-ed was signed by Jennifer Jackson, CEO, CHA, along with Matthew Barrett, Executive Vice President, Connecticut Association of Health Care Facilities; Deborah Hoyt, President and CEO, Connecticut Association for Healthcare at Home; Matthew Katz, President, Executive Vice President, Connecticut State Medical Society; and Mag Morelli, President, LeadingAge Connecticut.

Department of Mental Health and Addiction Services Commissioner Resigns

On February 15, Commissioner Pat Rehmer announced her intent to step down as the Commissioner of the Department of Mental Health and Addiction Services (DMHAS), a position she has held since first being appointed by Governor Jodi Rell in 2009. Most recently, Commissioner Rehmer was re-nominated for appointment by Governor Malloy.

A long-time mental health practitioner and advocate, Commissioner Rehmer began her career as a nurse at the Institute of Living in Hartford and later led the Capitol Region Mental Health Center before moving to DMHAS. She served as deputy commissioner of DMHAS before Gov. M. Jodi Rell named her commissioner in 2009. She also serves currently as President of the Board of the National Association of State Mental Health Program Directors.

CHA wishes the Commissioner well in her yet-to-be-announced plans and thanks her for the years of working with the hospital community on measures and policies to improve the delivery of behavioral health services in the state.

National Patient Safety Experts to Present at Patient Safety Summit

Please join us for CHA’s 13th Annual Patient Safety Summit, co-sponsored with Qualidigm. The 2015 Patient Safety Summit, which will be held at CHA on Tuesday, March 10, 2015, will focus on health outcomes, health distribution within a population, health determinants, and the policies and strategies needed to improve patient safety population health in the transition to value-based care.

David B. Nash, MD, Dean of the Jefferson School of Population Health, will deliver the keynote address, Population Health: The Key to Quality. Following Dr. Nash’s keynote, a panel of Connecticut healthcare leaders and advocates will respond to the presentation and explore the impact of population health on vulnerable populations in Connecticut. The panel will include Jewel Mullen, MD, Commissioner, Connecticut Department of Public Health; Pat Rehmer, Commissioner, Department of Mental Health & Addiction Services; Thomas Raskauskas, MD, President and CEO, St. Vincent’s Health Partners; and Grace Damio, Director of Research and Service Initiatives, Hispanic Health Council. Mark Schaefer, PhD, Director of Healthcare Innovation, State of Connecticut, will serve as moderator. Plenary sessions include Care in Context: Early Hospital Readmissions – Connecticut’s Critical Challenge, with M. Natalie Achong, MD, Yale University School of Medicine; Beyond the Medical Chart: Exploring the Role that Empathy Plays in Patient Engagement, with patient safety advocate Lisa Helfand; and Safe and Appropriate Use of Hypnotics in Older Adults: Clinical and Quality Improvement Considerations, with Ilse Wiechers, MD, Department of Veterans Affairs.

The Patient Safety Summit, held each spring at CHA, features nationally renowned experts. It is a continuation of CHA’s successful statewide initiative to eliminate all-cause preventable harm using high reliability science to create a culture of safety.

Education Updates

CHA Regulatory Series--Wage and Hour Law Review
Thursday, February 26, 2015
9:00 a.m. - 2:30 p.m.
View Brochure | Event Registration

This program will serve as a refresher for those generally familiar with wage and hour compliance issues—and as an introduction to key issues for those with new responsibilities in this area. Participants are encouraged to bring real or hypothetical questions about regulatory interpretation to the session for an open discussion.

Continuing education credits will be awarded. See the brochure for details.

HRO Leadership Method Training for Ambulatory Practices
Thursday, March 12, 2015
9:30 a.m. - 4:00 p.m.
Event Registration

This ambulatory session will be held at CHA and all ambulatory participants are welcome to join us. Leadership sessions teach the science of safety and behaviors and practices of High Reliability organizations.

HRO Creating Sustainability for High Reliability Organizations
Monday, March 16, 2015
9:00 a.m. - 12:00 p.m.
Event Registration

This session is for leaders in the organizations that have trained staff in high reliability behaviors and practices and are looking for techniques to improve the likelihood that high reliability does not become a flavor of the month.

HRO Fair and Just Accountability
Monday, March 16, 2015
1:00 p.m. - 4:00 p.m.
Event Registration

Fair and Just Accountability is for anyone who manages people and the course trains staff how to use the Performance Management algorithm and why Fair and Just Accountability is important to creation of a safety culture.

HRO Rounding to Influence
Monday, March 23, 2015
1:00 p.m. - 4:00 p.m.
Event Registration

Rounding to Influence is for leaders who want to learn how to be more effective up on the units, when they are coaching staff and reinforcing behaviors.

HRO Safety Coach Training
Monday, March 23, 2015
9:00 a.m. - 12:00 p.m.
Event Registration

Safety Coaches are peer mentors who help remind employees about the safety practices and behaviors that your organization has adopted.

HRO Leadership Method Training for Hospitals
Tuesday, March 24, 2015
9:00 a.m. - 4:00 p.m.
Event Registration

This Leadership session is for new Level 3 hospitals and any new hires in previously trained Level 3 hospitals. Leadership sessions teach the science of safety and behaviors and practices of High Reliability organizations.

Sterile Compounding: A Blueprint for Best Practices (for Hospital Engineers)
Tuesday, March 31, 2015
8:00 a.m. - 11:00 a.m.
View Brochure | Event Registration

This training—which is designed for hospital engineers—will include an explanation of current facility, environmental, and personnel metrics requirements for compounding sterile preparations in compliance with USP and the CETA Guidelines. A description of how primary and secondary engineering controls contribute to airflow velocity, direction, and ultimately ISO classification will also be provided.

Registration for this session includes access to CriticalPoint’s eLearning course Engineering Controls for Sterile Compounding. These two lessons and post tests must be completed by all participants prior to the scheduled training. *Login information will be e-mailed to all registrants.

This live-training session will be submitted for continuing education credits.