



THE QUEEN'S MEDICAL CENTER

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COMMITTEE ON HUMAN SERVICES

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COMMITTEE ON HEALTH

Rep. Ryan I. Yamane, Chair

Rep. Dee Morikawa, Vice Chair

March 21, 2011 – 9:00 a.m.

State Capitol, Conference Room 329

LATE Testimony

In Strong Support of SB 787 SD2, Relating to Health

Chairs Mizuno and Yamane, Vice Chairs Jordan and Morikawa and Members of the Committees,

My name is Christina Donkervoet, Director of Care Coordination and Patient Flow at The Queen's Medical Center (QMC), testifying in strong support of SB 787 SD2, which adjusts the Medicaid reimbursement rates for waitlisted patients remaining in hospitals and develops sub-acute rates for complex patients being cared for in long-term care facilities.

We have testified on this bill in previous years, and again submit testimony in strong support. QMC continues to be greatly impacted by the limited community resources available to serve people in need of long-term care. There are many patients who remain at Queen's well beyond their acute inpatient medical stay, but who are unable to be discharged because the necessary community resources are not available. Prolonged stays at an acute care facility after the patient no longer needs hospitalization can result in a less than optimal quality of life for the patient and creates a serious financial drain on the hospital. The Medicaid reimbursement for these patients is at a rate that is twenty to thirty per cent of the actual cost of acute care hospitalization. The total loss to Hawaii hospitals in 2008 was estimated at over \$72 million.

Our Emergency Department, the busiest in the State, is sometimes forced to go on divert status because we simply do not have the bed capacity to admit patients needing hospitalization. We are often unable to accept patient transfers from hospitals across the state and the Pacific due to patients remaining in hospital beds waiting for long-term care services. This inability to admit acutely ill patients impacts not only QMC, but the health care system state-wide.

QMC understands the challenges of coordinating services between hospitals and long-term care facilities and will continue to work with state agencies and community facilities and programs to ensure access to quality care at the appropriate level for our patients. Thank you for the opportunity to support SB 787 SD2.