

Comments on
Draft Recommendation Report of the MaineCare Redesign Task Force

Mary Jane Richards, COO
North Country Associates
December 11, 2012

My name is Mary Jane Richards and I am the Chief Operations Officer for North Country Associates, an organization that represents 23 Long Term Care and ICF/MR facilities in the State of Maine. I am submitting testimony today to express my opposition to the task force's recommendation to eliminate MaineCare reimbursement for nursing facility bed-hold days.

While I understand the need to find ways to narrow the budget gap, I am disappointed that once again Long Term Care is one of the areas that DHHS has looked towards for areas in which to save. The Long Term Care Community is underfunded by over \$22,000,000 per year already. Further cuts are only setting up providers to pass on drastic changes to our employees either through decreasing pay and/or benefits and the elimination of positions. Looking towards our nursing facilities to assist in shortening the budget gap is irresponsible. We can not continue to keep suffering losses without jeopardizing the care we provide to both the elderly population and people with developmental challenges.

Our experience over the past several years is that people come to our facilities with many more medical needs than they ever used to. At times their co-morbidities demand medical attention that can not be provided in our settings. We have highly skilled staff in order to prevent as many hospitalizations as possible. Inevitably however, there are short stays in a hospital that are necessary and prudent for the health and safety of the individual. Eliminating bed holds is putting the health and safety of those patients at risk. If MaineCare bed-holds are eliminated, I see us taking step backwards in our current relationships we have with hospitals in the communities our facilities serve. Our relationship now is one which works together to minimize

the time that is spent at the hospital by the patient so that they can return home or to our facilities as quickly as possible. If our facilities do not have a mechanism by which to hold or reserve the patients bed in the Long Term Care facility, we will be forced to discharge that patient to the hospital and accept another patient into the facility so that we do not go a day without reimbursement. Should residents be discharged from our facilities their intended short stay at the hospital will become longer and cost more than it should for the hospital and consequently the State of Maine.

North Country Associates provides long term care services to 1500 people in Maine. In reviewing our data for 2012 the elimination of Mainecare bed-holds would have resulted in a \$200,000 loss for our facilities. With a loss of that magnitude we would have to begin the process of eliminating jobs, decreasing pay and/or benefits and therefore affecting the care we provide. We simply can not continue to offer care that is not financially supported by DHHS.

I urge you to consider the unintended consequences of allowing the elimination of bed-holds to Mainecare patients, consequences that include risking the health and safety of the individuals we provide care for in our facilities; the increased length of stay for these individuals in hospitals because they no longer have a bed to come back to, and the elimination of positions and/or cuts in pay and benefits for our employees due to the additional loss in reimbursement these changes will inevitably create.

Thank you for your time and attention to this very important matter.

Respectfully submitted,

Mary Jane Richards, COO for North Country Associates