



**Testimony of Fernando Ferrer, MD, Surgeon-in-Chief and Theresa Hendricksen, RN,
MS, Senior Vice President, Clinical Services and Chief Nursing Officer, Connecticut
Children's Medical Center
to the Appropriations Committee
Regarding the Governor's Proposed Deficit Mitigation Plan
And the Impact of the Governor's Rescissions
December 9, 2009**

Senator Harp, Representative Geragosian, members of the Appropriations Committee, thank you for the opportunity to speak with you today. I am Dr. Fernando Ferrer, Surgeon-in-Chief at Connecticut Children's Medical Center. With me today is Theresa Hendricksen, Senior Vice President for Clinical Services and Chief Nursing Officer at Connecticut Children's. As members of the Connecticut Children's Medical Center Executive Management Team, we are here today representing the pediatric physicians and nurses who strive each day to provide the best possible health care services to the children of our region.

We have serious concerns regarding the impact that the Governor's proposals could have on the children and families that we serve. Lines 58 and 59 of the Governor's mitigation plan cut Connecticut Children's Disproportionate Share Hospital (DSH) payment by 25% and our inpatient per diem rate for Medicaid by 5%. Taken together, these cuts will amount to a \$5 million reduction in revenue annually. The State must reject these proposals if we are to preserve the critical resources that Connecticut Children's provides every day.

At Connecticut Children's, nothing is more important than a child's health. That's why all of the healthcare professionals at Connecticut Children's chose to become part of the only hospital in the region dedicated exclusively to children. It is commonly accepted that centers dedicated to children provide better and more efficient care than adult or mixed environments. Since we care for children exclusively, we would respectfully suggest that no one else in Connecticut has a better understanding of a child's health care needs and the care options available for them and their families.

We offer the full spectrum of pediatric care to children from each of Connecticut's 169 cities and towns. In Fiscal Year 2009, Connecticut Children's pediatric health care professionals collaborated to care for over 250,000 patients. 35,000 children received pediatric primary care services, 51,000 children visited our emergency department and we performed over 9,800 surgeries ranging from simple procedures to complex neurosurgical procedures, heart surgery or as in the case of my personal patients complex reconstructive procedures for congenital anomalies and every parent's nightmare – children's tumors. In many cases, we are the only center in the state staffed to care for some of these children.

Connecticut Children's is a vital resource for children and families across the state. In some cases the expertise provided by our faculty and nurses are the only thing standing between care at home, in Connecticut, or having to travel to another state. Today the United States faces a critical shortage of many pediatric subspecialty care providers and nurses. We in Connecticut are not immune to this shortage. It was a short four years ago when we, for a time had no pediatric specialty trained neurosurgeon in the state. I distinctly remember being at the bedside of a critically ill child in our ICU contemplating emergent helicopter transportation out of the state – or the night one of the life star choppers had to land emergently before reaching its destination with one of our children being transferred out for want of a surgical subspecialist. Today a limited pool of pediatric specialists exists and we struggle to fill these positions. In my own specialty children wait for months for appointments and surgery because of a lack of practitioners. The proposed removal of support will dramatically effect our ability to recruit and will send a message to prospective candidates that this state does not support children's health care.

All children should have the health care they need to grow and lead healthy productive lives. It is critically important for the State to recognize and provide coverage for those uninsured children who are often at highest risk. The State must pay safety net providers like Connecticut Children's adequately in order to ensure access to care.

Thank you and I like to introduce my colleague and our Chief Nursing Officer, Theresa Hendricksen.

Theresa Hendricksen:

Thank you. I have had the privilege of serving our state's children as a nurse since 1984 and with Connecticut Children's since it opened in 1996. Connecticut Children's is a major employer in the state, with a current staff of over 2,000, including a large group of highly skilled pediatric nurses and clinicians. With increased job losses, more families are relying on HUSKY and Connecticut Children's is seeing the impact of this change every day. Between October 2008 and October 2009, our Medicaid discharges increased from 46% to 53%. This is by far the highest percentage of any Connecticut hospital. During the same time, our Medicaid volume in the Emergency Department rose from 58% to 64%. By providing a critical safety net for HUSKY, Connecticut Children's suffers huge financial losses.

The recession and state budget crisis certainly present all of us with difficult decisions. We are asking today that you focus special attention on the needs of our children and families. While it is clearly our mission to provide access to vulnerable children, Connecticut Children's is likely to experience even greater Medicaid losses as families shift from employer-based coverage to HUSKY.

As Connecticut's only independent children's hospital, Connecticut Children's enhances the quality of life in our state, we support the local economy, and we are good for kids.

The State of Connecticut insures our neediest children by providing them with HUSKY cards. Those children come to Connecticut Children's to get high quality family centered pediatric health care services. Every day we provide those services. Inadequate revenue from HUSKY will jeopardize our physicians' and nurses' ability to provide all the care that our children and families deserve, whether they are covered by HUSKY or not. We ask the Appropriations Committee to reject the proposed cuts to Connecticut Children's DSH payment and inpatient rates and instead work to provide more equitable Medicaid revenue so that we can preserve these critical resources.

Thank you.