



# New Milford Hospital

Member  
**New York-Presbyterian Healthcare System**  
Affiliate: Columbia University College of Physicians & Surgeons

**TESTIMONY OF  
Marydale DeBor  
New Milford Hospital  
Vice President, External Affairs  
TO THE  
APPROPRIATIONS COMMITTEE  
Thursday, March 11, 2010**

**Governor M. Jodi Rell's March 1, 2010 Deficit Mitigation Plan For Fiscal Year 2010**

My name is Marydale DeBor. I am Vice President, External Affairs for New Milford Hospital. I am submitting this testimony for the record on **Governor M. Jodi Rell's March 1, 2010 Deficit Mitigation Plan For Fiscal Year 2010.**

Thank you for the opportunity to provide this essential information to you. While we appreciate the difficult task facing Governor Rell and the legislature in addressing the state's budget deficit, we strongly oppose the devastating payment reductions to hospitals and imposition of a tax on hospital revenues included in the Governor's deficit mitigation plan.

The plan includes cuts to Medicaid rates, cuts to Urban DSH funds, elimination of non-emergency dental services, restrictions in the definition of medical necessity, and the imposition of co-payments under Medicaid, at an overall cost of \$70 million to Connecticut's hospitals for SFY 2010-2011.

In addition, the Administration's inaction in implementing the current SAGA budget as planned – and as required by statute – results in another \$108 million cut to hospitals and has the additional impact of eliminating \$41 million that would have come to Connecticut hospitals through increased Medicare DSH payments.

The overall impact of the changes the Governor has proposed for hospitals totals \$219 million.

The deficit mitigation plan also includes the imposition of a tax on hospital revenues, totaling approximately \$130 million. As Congress and President Obama work to enact significant healthcare reform and reduce the cost of care, a tax on hospitals is counterproductive as it will increase Connecticut's healthcare costs and increase the already onerous cost shift onto Connecticut businesses.

For New Milford Hospital the proposed reductions will mean a cut of \$ 379,426 in total, exacerbating an already fragile financial situation. We have experienced a deficit in the past two fiscal years, and this year aim to have a "break even" budget, having implemented very disciplined cost cutting measures and a reduction in employees. These cuts will make it impossible for us to meet our goal. In the face of the prolonged recession, as unemployment has soared and record numbers of people have found themselves uninsured or on Medicaid, we continue to provide care to all 24 hours a day, 7 days a week, regardless of patients' ability to pay. These cuts fall the hardest on small community hospitals such as ours, having a disproportionate impact that, if not reversed, could compromise the services upon which the communities we serve depend. The safety net that we community hospitals provide will be further eroded.

It simply makes no sense to cut Medicaid payments and impose a tax on hospitals at a time when Congress has given unprecedented Medicaid funding increases to states. Under the stimulus bill, Connecticut will get more than \$1.74 billion in increased federal funds to provide care for our most vulnerable populations. This infusion should be used to maintain eligibility and coverage, and help bring provider rates closer to covering the actual cost of care. Instead, the Governor is proposing to reduce hospital funding by \$219 million.

In addition, while the Rell Administration has not taken the steps necessary to implement the SAGA waiver as directed by the legislature, the biennial budget passed in September 2009 provided the funding needed to raise hospital SAGA rates up to Medicaid effective January 1, 2010. The funds necessary to raise hospital SAGA rates to Medicaid have been appropriated and will be matched with or without a waiver. We urge you to insist that DSS pays hospitals in accordance with the biennium budget at the Medicaid rate for SAGA and finally put hospitals on par with all other providers to the SAGA program.

We strongly urge rejection of the proposed cuts and hospital tax, and immediate implementation of the SAGA rates funded in the biennial budget.