



**TESTIMONY OF  
YALE-NEW HAVEN HOSPITAL**

**SUBMITTED TO THE  
HUMAN SERVICES COMMITTEE  
Thursday, March 11, 2010**

**HB 5398, An Act Concerning A Pilot Program To Transfer Hospital Patients Who Receive  
Medicaid Benefits To Nursing Homes In A Timely Manner**

Yale-New Haven Hospital (YNHH) appreciates the opportunity to present testimony concerning **HB 5398, An Act Concerning A Pilot Program To Transfer Hospital Patients Who Receive Medicaid Benefits To Nursing Homes In A Timely Manner**. Yale-New Haven fully supports this bill.

As we understand it, HB 5398 requires the Commissioner of Social Services, in consultation with the Commissioner of Public Health, a representative of an acute care hospital and a representative of a long-term care facility, to develop a plan to implement a pilot program to decrease the period of time that Medicaid recipients, who require long-term health care, remain hospitalized in an acute care hospital before transfer to a long-term care facility.

As proposed, this pilot program would provide a cost effective way to provide the appropriate level of care for patients who require long-term healthcare services. HB 5398 seeks to establish a pilot program developed with the input of the state agencies and healthcare providers. This would fill a critical need for patients in New Haven, alone. At Yale-New Haven Hospital, we can have anywhere from 8-12 patients who are medically cleared and awaiting placement in a nursing home at any time. In fact, 11 patients have accumulated over 1000 unnecessary acute days at YNHH due to discharge barriers.

Patients become 'stuck' at Yale-New Haven for several reasons. There are barriers to getting patients placed in nursing homes including: families' level of cooperation with the process; supplying all information in an up front manner; and high cost patients who nursing homes are unable or unwilling to take due to reimbursement. One of our patients has been medically ready for discharge since December (80 days and counting) and awaits a 'T-19 upgrade' as the patient was granted emergency SAGA for placement to Gaylord. The decision has been pending with the State since February 5. Another more extreme case is that of a patient who we discharged to a nursing facility while the conservator works on T-19 authorization. YNHH has been paying the nursing home bill for this patient since last year. Prior to hospital admission, this particular patient came from out of state, and was found disoriented in New Haven's train station with only a duct taped suitcase. Many days were spent in the hospital before we could discharge the patient, who no longer required acute care, but had no where to go.

As we continue to debate the issue of health care reform, we must develop creative initiatives to improve patient care and utilize our limited resources more wisely. We urge you to support HB 5398. Thank you for your consideration of our position.

For additional information, contact Ann Hogan, Community & Government Relations, Yale-New Haven Hospital, 203/688-3796.