

October 24, 2014

Commentary regarding the purchase of Waterbury Hospital and St. Mary's Hospital by Tenet Submitted to Mr. Gary Hawes - Office of the Attorney General

Via email: Gary.hawes@ct.gov

The National Physicians Alliance (NPA), Connecticut Chapter, is thankful for the opportunity to provide commentary on the proposed purchase of Waterbury Hospital and St. Mary's Hospital by Tenet Healthcare. For-profits make up about 20% of all hospitals and many of them are part of large chains (such as Tenet). We have serious concerns for several areas of healthcare delivery, access and quality that merit serious consideration regarding the ongoing healthcare delivery to the City of Waterbury and its surrounding areas.

Waterbury is a city with a vulnerable population. Over 50% identify as a racial or ethnic minority: approximately 19% of residents identify as Black/African American and 30.1% identify as Hispanic or Latino. The primary spoken language is English, but nearly $1/3^{\rm rd}$ of residents speak a language other than English at home (US Census Data, 2010). Between the years 2011 and 2012, 28.2% of residents were enrolled in Temporary Family Assistance and 38.1% were enrolled in Medicaid (Greater Waterbury Health Improvement Partnership Final Summary Report September 2013). All of these demographics, individually and together, have been strongly linked to healthcare disparities and overall poor health outcomes.

We are concerned that access for this vulnerable population may be jeopardized by the purchase of these two well-regarded community hospitals by a for-profit company. Our concerns are highlighted below.

-Access to care must be maintained

People's access to health care is of utmost importance. Tenet must ensure access for all patients no matter their insurance status. All current services including mental health, emergency, and obstetrical services must continue to be available at least at the current level of capacity for at least 10 years. Any reduction or elimination of service after that time must be approved by a local community board whose members are appointed by the Office of the Health Consumer Advocate (OHCA). Patients with limited resources should not be forced to seek care outside of their community due to lack of charitable care. Charitable care may be maintained through a trust, foundation, or grants but absolutely must be maintained for the community it serves. Patients should have access to the same excellent health care providers and staff they already see at these hospitals and therefore Tenet should agree not to outsource hiring to other agency nor should they cut staffing for at least 5 years at which time this may be reviewed by a designated community board.

-Transparency

Transparency is important when there is monopoly of care in a given area to make sure that promises of care to the community are kept. Transparency must encompass cost of hospital care, procedures to make sure they remain in line with state and country-wide projections and do not become exorbitant. There must be transparency as well about outcomes and treatments for patients with varying types of insurance or lack of insurance. This can be maintained in a variety of ways such as an oversight board that would include significant portions of patients from the community and community health care providers (non-Tenet affiliated) and may be designated by OHCA. This is to ensure the needs of the community are being met when data is reviewed.

-Cost

Cost becomes a significant issue when a hospital has a monopoly in an area. As such costs must be monitored closely and kept in alignment with state and national norms. This may be maintained through requiring government review of cost changes, filing of 990 forms as do non-profits.

We appreciate the opportunity to comment on this issue of vital importance to our state. We look forward to continuing to work on these important topics.

Signed,

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