

A COUNTY

Wednesday, March 20, 2024 at 10:30 am Conference Room 329

House Committee on Health and Homelessness

To: Chair Della Au Belatti

Vice Chair Jenna Takenouchi

From: Hilton R. Raethel

President and CEO

Healthcare Association of Hawaii

Re: Submitting comments

HCR 185/HR 165, Requesting the Department of Health to conduct a study to examine whether bed-hold policies place an undue financial burden on individuals in assisted living facilities

The Healthcare Association of Hawaii (HAH), established in 1939, serves as the leading voice of healthcare on behalf of 170 member organizations who represent almost every aspect of the health care continuum in Hawaii. Members include acute care hospitals, skilled nursing facilities, home health agencies, hospices, assisted living facilities and durable medical equipment suppliers. In addition to providing access to appropriate, affordable, high-quality care to all of Hawaii's residents, our members contribute significantly to Hawaii's economy by employing over 30,000 people statewide.

Thank you for the opportunity to submit **comments** on this measure that would request that the Department of Health examine whether bed hold policies at assisted living facilities (ALFs) create undue financial burdens on individuals. A bed hold is the practice of a patient paying a provider to reserve their bed in a facility while a resident is temporarily transferred to another setting such as a hospital. Currently, there are no state rules requiring ALFs to have bed hold policies like there are for nursing homes, which provide a higher level of care.

Although Medicare does not pay to hold a resident's bed, Medicaid will generally pay for a bed hold of up to three days. However, there are very few Medicaid beneficiaries residing in our member ALFs. Accordingly, bed hold payments for services in an ALF are determined on a case-by-case basis.

We understand that there may be some concerns about bed hold policies in ALFs. However, we note that state regulations require ALFs to develop and provide residents with the facility's admission and discharge policies. Furthermore, the regulations also give residents and their family members the right to an informal conference with the facility if requested within ten days of the receipt of a discharge notice. We believe that this mechanism can cover unusual situations not already covered by a facility's existing policies.



JOSH GREEN, M.D. GOVERNOR OF HAWAI'I KE KIA'ĀINA O KA MOKU'ĀINA 'O HAWAI'I KENNETH S. FINK, M.D., M.G.A., M.P.H. DIRECTOR OF HEALTH

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Testimony in OPPOSITION to HCR185

REQUESTING THE DEPARTMENT OF HEALTH TO CONDUCT A STUDY TO EXAMINE WHETHER BED-HOLD POLICIES PLACE AN UNDUE FINANCIAL BURDEN ON INDIVIDUALS IN ASSISTED LIVING FACILITES.

REP. DELLA BELATTI, CHAIR HOUSE COMMITTEE ON HEALTH & HOMELESSNESS

Hearing Date: March 20, 2024 Room Number: 329

- 1 **Fiscal Implications:** Funding to procure financial analysis resources will be required.
- 2 **Department Testimony:** The Department of Health (DOH) opposes this Concurrent
- 3 Resolution.
- 4 The financial impact of assisted living facility policies is out of scope for the DOH as it is
- 5 primarily a consumer issue governed by private contracts. Defining "undue financial hardship"
- 6 will be problematic given the range of income levels of clients and an individual's relative
- 7 comfort with price and cost. It is reasonable to conclude that anything short of free will be
- 8 considered an undue burden.
- 9 The department is open to investigating whether patient safety and health outcomes are impacted
- by bed-hold policies but opposes the financial perspective as any data will be unreliable.