



September 22, 2022

The Honorable Deb Patterson  
Chair, Senate Health Care Committee  
State Capitol  
Salem, Oregon

Re: Health care system capacity

Dear Chair Patterson and members of the committee,

Providence Health & Services in Oregon is a not-for-profit network of hospitals, health plans, physicians, clinics, home health services, long-term care facilities and affiliated health services. Providence is the largest health care provider in Oregon and one of the largest private employers in the state with more than 22,000 caregivers. The range of clinical services and facilities we operate statewide gives Providence a unique perspective about the challenges we face across the health care continuum. We appreciate the opportunity to discuss hospital length-of-stay, one of the most serious issues our communities are facing.

Our hospitals and caregivers have been on the frontlines of the COVID-19 pandemic, consistently providing compassionate, quality care to all. It was our hope that after the Omicron surge in early 2022 we would begin to see an increase in hospital capacity, allowing us to take pressure off our acute care workforce, emergency rooms and Emergency Management Systems. To the contrary, the need for hospital services continues to increase for several reasons. Patients that delayed care during the pandemic are presenting at hospitals sicker with more complex health care needs. Our workforce is strained, Providence alone has nearly 1,700 open positions in Oregon. More patients are “stuck” in the hospital - they are clinically ready for discharge to a more appropriate setting, but there are no placements available in the community.

For a long time, we have thought about hospital discharge as a singular issue, but the severity of the problem is creating a community wide crisis we cannot ignore. The average length of stay for patients at Providence hospitals in Oregon increased from an average of five days in 2019 and peaked at seven days earlier this year. This has a direct impact on the community’s ability to access health care. Patients that need hospital level care and life-saving treatment are not able to get a bed. For example, in May of this year:

- Eleven out of 19 emergency departments in the Portland Metro area were on divert more than 50% of the time.
- Emergency department boarding at Providence’s hospitals increased to an average of 17,000 hours, compared to 5,000 hours in January 2021.

- Emergency department wait times increased dramatically, leading to a significant increase in patients leaving without being seen and returning with more acute clinical issues.

As we approach the 2022 flu season, when we would normally expect hospital capacity to increase, we need immediate actions to ensure we can continue to meet community needs. This week the Emergency Board is considering funding solutions that support Oregon's post-acute care system and help coordinate complex hospital discharges. Notably, the package includes the Adult Foster Home Hospital Decompression Initiative, which was originally piloted in January. During that time, from January to March 2022, Providence was able to successfully place 70 patients with an average length of stay of 41 days. Your support of this funding package is an important first step.

The last two years have been incredibly challenging for the entire health care system, and it will take time to recover. Providence appreciates our legislative champions, partners in post-acute and long-term care, and leadership at the Oregon Health Authority and the Oregon Department of Human Services for continuing to be innovative and solution oriented. We encourage you to support OHA and ODHS's Emergency Board request and appreciate the opportunity to provide comment.

Sincerely,

A handwritten signature in black ink, appearing to read 'Raymond Moreno', with a stylized, cursive script.

Raymond Moreno, MD, FACEP  
Chief Medical Officer  
Providence St. Vincent Medical Center