



February 28, 2023

House Committee on Behavioral Health and Health Care

The Honorable Rep. Rob Nosse, Chair

The Honorable Rep. Christine Goodwin, Vice Chair

The Honorable Rep. Travis Nelson, Vice Chair

Dear Chair Nosse, Vice Chair Goodwin, Vice Chair Nelson and members of the committee,

Oregon Health & Science University (OHSU), at its core, is all about people. For our 19,000 clinicians, educators, researchers and staff, their work every day is focused on improving the health and well-being of Oregonians. OHSU supports the need for change in our health care system but is opposed to House Bill 2697 as currently written.

As Oregon's only academic health center, our clinicians and staff have been at the nexus of challenges facing the health care profession both from an academic and professional perspective. Over the last three years, the health care system in Oregon and across the nation has been challenged in numerous ways, and at the frontline always are the dedicated nurses and staff who provide care and support to everyone who visits our hospitals and health care settings. Clinicians and staff at OHSU provide vital care available nowhere else in Oregon and many patients come from hospitals across the state to OHSU. The incredible people at OHSU do everything they can to care for the Oregonians who need them.

Holes in our health care system have always existed. Clinicians and staff at OHSU have long filled in where no one else could or would. After years of patching, the strain of the pandemic has led to catastrophic challenges that many assert have broken the health care system all together. Our clinicians and staff shouldn't bear the cost of this broken system.

Before the pandemic, OHSU was at capacity with almost every bed often full and many patients from across the state waiting to be transferred into the hospital. Over the last three years that capacity has reached a tipping point and toppled over. More than 30 patients every day sick enough to be in our hospital wait in the emergency department, a space not designed to care for admitted patients. Patient beds line our halls, our conference rooms, and our auditoriums. None of these spaces are designed to provide patient care, making doing so much more difficult for our clinicians and staff.

More than 6,000 Oregonians are waiting months or even more than a year for surgery at OHSU, and the list grows longer every day. As patients wait to access care at OHSU, many who are ready to move to the next phase of their care in post-acute settings, which would free up a space for other patients in acute care settings, are unable to do so. In 2022 alone more than 8,000 patient hospital bed days could have been used for someone who needed OHSU hospital care but instead those bed days, we've hired contract nurses and support staff which has allowed care to continue but creates unsustainable costs.

All this waiting means patients are getting sicker. More Oregonians are coming to our emergency department than ever before, more are sick enough to be admitted and more end up in high-acuity units like the ICU. Sicker patients are often more complicated to care for adding strain on our nurses and staff. Sicker patients also die more often. Most nurses and clinicians will tell you that every death impacts them. As a broken health care system continues to deliver preventable deaths the undeniable moral harm happening to our clinicians and staff continues to grow.

Recently, OHSU had to declare a staffing crisis in order to deviate from our staffing plan and provide access to patients. These decisions are not easy and they are not taken lightly. I will never forget the commitment and tenacity of our nurse managers as they went through the call list name after name to find someone to come in so that we could admit and care for a child who needed OHSU. We are grateful for the swift action by the Oregon Health Authority to provide additional staffing for a limited time but we know that this is not a solution we will likely see again.

OHSU agrees that improving the work environment in hospitals is critical if we hope to attract new nurses and care team staff to fill the gaps left behind by

retiring nurses and those choosing other care settings or other professions. HB 2697 aims to fix one part of this system by increasing the required number of clinicians and staff working in hospitals, while failing to address the underlying issues. The bill as written would be very difficult for OHSU to implement on the timeline proposed and is unlikely to achieve its goals at OHSU without additional action by the Legislature to invest in and address the numerous other holes in the system.

OHSU appreciates our labor partners and their willingness to discuss this proposal, hear our concerns and continue to work toward a package that is both practicable and impactful. We know that changes to this law alone will not solve the numerous challenges facing both nurses and the health systems and hospitals where they work.

One of the biggest impacts on hospital work environments is capacity constraints throughout the system that keep patients waiting – waiting for primary care, waiting for surgery, waiting in the emergency department, waiting for post-acute care and waiting for behavioral health care. We must work together to find ways to help Oregonians access the care they need when they need it. Some of the things we should focus our efforts on this legislative session include:

- Improving access to skilled nursing facilities for Medicaid patients and patients with complex needs by addressing administrative and payment barriers, improving reimbursement and wages to ensure qualified staff are available, and encouraging data driven innovative partnerships between SNFs and hospitals.
- Requiring insurers to have some skin in the game to improve and provide access to post-acute care for vulnerable Oregonians including paying for care no matter where its provided.
- Investing in health care workforce development including loan repayment, loan forgiveness and scholarships; reducing costs for applications, tests and licensure; funding proven partnerships between labor and hospitals for workforce development; addressing the wage gap for nurse faculty; and incentivizing clinical education in hospitals and health care settings across the state.

- Reducing administrative burdens on our clinicians and staff and ensuring innovations sparked by the pandemic that can improve capacity like safe use of alternative spaces and telehealth are not stymied.
- Allowing Oregon to continue to have well-paid health care and support staff teams but removing barriers to allow hospitals to pay and be reimbursed at increases that reflect the critical nature of the work hospital staff provide.
- Improving access to behavioral health care by maintaining investments in community providers, support collaborative and data driven approaches to care, reducing administrative burden, and increasing capacity in acute and residential treatment and supportive housing.

In addition to the discussion on hospital staffing, we hope there continues to be a focus on exploring other pathways to improving the environment. The reality is, addressing just one of these issues will not only not solve our broken system, it could exacerbate the other existing challenges. We may have moved into a new phase of the pandemic but the challenges facing our health care system are bigger than ever.

I want to thank Chair Nosse and the members of the committee for their work on this legislation, as well as stakeholder groups, including the ONA, SEIU, AFSCME, OFNHP and OAHHS for their continued work to find agreement and a path forward. We know this work has not been easy. Continued positive, productive engagement on this and other issues are the only way we can move forward and OHSU is committed to this work.

Sincerely,

A handwritten signature in black ink that reads "Lori Ellingson". The signature is written in a cursive, flowing style.

Lori Ellingson, M.S.N., RN, CNS, NEA-BC
Associate Chief Nursing Officer, Acute Care Services
Oregon Health & Science University