

COMMENT ON PROPOSED HOSPITALS

Name:

Brenna Chell

Do you represent an organization? If yes, please specify:

Courage Kenny Rehab

Proposed hospital(s) that you would like to share comments. Please select all that apply:

Nobis Rehabilitation

Whether the proposed new hospitals are needed to provide timely access to care:

The access to inpatient rehabilitation is already available at our MN non-profit hospitals. Most patients come through the hospital system first. It would not be cost effective to the patient or simple transitions to move the patients from a hospital to another facility when they can access inpatient rehab care within the same hospital they are already at.

The financial impact of the new hospitals on existing hospitals that have emergency departments:

The new inpatient rehabilitation would threaten the existing inpatient rehab facilities. The existing inpatient units operate within hospitals that have ED's where patients are often first treated. This would be a loss for the non profit hospitals as well as a larger expense for patients to go from system to system. With for-profit systems being able to pick and choose their patients based on their payors, it will likely shuffle all low-reimbursement patients to the local non-profit hospitals, making those systems strain and suffer more.

How new hospitals would affect the ability of existing hospitals to maintain staff:

All non-profit health care organizations are suffering with short staffing. To add another facility to a market that is already short staffed in the hospitals, will only make the situation worse. Thus, compromising safe patient care.

The extent to which the new hospitals would provide services to nonpaying or low-income patients:

For profit health care systems are notorious for picking and choosing the patients they want to serve in order to receive the most profit. This is a direct threat to those who are unhoused, low income, disabled, or elderly and under Medicare/Medicaid. They would not receive high reimbursement from these patients, leading them to likely denying their capability to receive care. This approach threatens discrimination to patients based on their socio-economic status. The state of MN should hold itself to being non-discriminatory towards all peoples. Patients should be able to access the same care regardless of their income status. It is also well known that BIPOC patients are at higher risk of being low-income. The question is, does MN want to welcome a place that could discriminate against these communities. Further, the non-profit health systems are extensive in the specialties they offer and community services to meet those patients needs. This new hospital would not be able to offer those same services.

Please share other thoughts on the proposals including, but not limited to, views on new models of for-profit care in Minnesota:

If we want to expand healthcare within MN we should be supporting the systems that already provide care. MN needs to ask itself, what kind of care do we want to provide, and do we want to allow room for discrimination to take place when wanting to access that care?