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Hospitals "Deeply Disappointed" by Appropriations Committee Budget

WALLINGFORD – Jennifer Jackson, President and CEO of the Connecticut Hospital Association (CHA), made the following statement after the Appropriations Committee released a state budget that leaves hospitals with \$550 million less to take care of patients over the next biennium, and continues to include a tax on hospitals as a way to balance the state budget:

We are deeply disappointed by the decision of the Appropriations Committee to present a budget that includes the unprecedented decreases to hospital funding proposed by Governor Malloy. Cuts of this magnitude threaten care for all of us. The immediate effect will be devastating cuts to hospital staffing, services, and programs.

Let us be explicit: If the budget passes with \$550 million in hospital cuts, people will lose jobs. Patients and communities will be hurt when hospitals are forced to shutter critical programs and services, and postpone investments in lifesaving technology and infrastructure that are required to maintain the best, most up-to-date, quality care. It will also shift healthcare costs to businesses, resulting in higher premiums for workers.

Taxing hospitals and the patients they serve as a way to balance the budget doesn't reduce the cost of care. It increases it, causing patients, businesses, employees, and communities to pay more.

Hospitals want to work with legislators to find long-term solutions to make hospital care better, more efficient, and less costly. We welcome real, targeted reforms, not sweeping cuts that do nothing but slash holes in the safety net and shift costs.

We urge the legislature to either eliminate the cuts or eliminate the tax.

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About CHA

The Connecticut Hospital Association has been dedicated to serving Connecticut's hospitals since 1919. Through state and federal advocacy, CHA represents the interests of Connecticut's hospitals on key healthcare issues in the areas of quality and patient safety, access and coverage, workforce, community health, diversity, and hospital reimbursement.