



Updated Talking Points: HB 350

- 1) The bill is effectively a state takeover of Delaware's nonprofit hospitals and will lead to rationing of care without regards to equitable access or health care quality for our growing population.**
 - *Control of our budget = significant functional control of the hospital/health system.*
- 2) The bill has no provisions to ensure quality, safety, and equity, or flexibility to make changes as healthcare experts deem it necessary.**
 - *Takes away authority from hospital boards comprised of local community leaders and puts decisions about access, employment of thousands of Delawareans, and quality of care into the hands of five political appointees.*
- 3) The bill is based on the Vermont model of hospital governance and the healthcare costs are out of control in Vermont while hospitals continue to be unable to make any substantive changes because of the oppressive government oversight.**
 - *Vermont still has the fifth highest costs of care in the nation almost 13 years later; quality of care has steadily declined over time since the Green Mountain Care Board was formed in 2011.*
 - *Vermont's hospitals cannot expand nor invest in needed infrastructure or their workforce due to their state-run board's takeover of hospital decision making.*
 - *Vermont is far less diverse than Delaware, with a 94% white population. Vermont's population is shrinking, Delaware's is growing.*
 - *11 of Vermont's 14 hospitals operate in the red and lack needed predictability at an already uncertain time in healthcare.*
- 4) The State is setting this up as a volunteer board without any thought about the resources and funding necessary to achieve its stated objectives.**
 - *The resources that the state would need to invest to establish this board would be better used for shared priorities around strengthening Delaware's healthcare workforce, ensuring and further expanding access to primary care, substance use disorder treatment and behavioral health care, home care, school-based care, acute hospital care, physician services and advancing health equity.*
 - *The bill is not written to follow the Administrative Procedures Act requirements or in accordance with standard due process mechanisms. Significant legal problems in current bill.*
- 5) There has been no conversation nor collaboration on this proposal to fundamentally disrupt the health care system.**
 - *Delaware's hospitals worked collaboratively with Senator McBride for nearly a year to reach a historic agreement to tax hospitals- a non-starter originally- so that the state gets over \$100 million in additional federal dollars to invest in shared priorities around workforce, behavioral health, access, reproductive care, and equity. When policymakers work collaboratively with Delaware's hospitals, there are positive outcomes that move our state forward.*