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Deidre Gifford, MD, MPH
Executive Director, Office of Health Strategy
State of Connecticut
450 Capitol Avenue
P.O. Box # 340308
Hartford, CT 06134

Re: Docket Number: 22-32612-CON
Johnson Memorial Hospital Termination of Labor & Delivery Services

July 11th, 2023

Dear Dr. Gifford:

I hope that my written testimony finds you and finds you doing well.

I am writing to strongly ask the Office of Health Strategy not to accept the proposal (Certificate of Need application) by Johnson Memorial Hospital (JMH) to end labor & delivery services.

I am providing my testimony as the State Senator for the 35th District. I represent people in thirteen towns in northeast CT: Ashford, Chaplin, Coventry, Eastford, Ellington, Hampton, Stafford, Thompson, Tolland, Union, Vernon, Willington, and Woodstock. JMH covers a number of these towns in its patient care service area. I have heard from and met with many people concerned about the loss of labor & delivery services in their community

I am providing my testimony also as doctor who has been caring for people for over 30 years, including in the northeast part of Connecticut. I know firsthand about and have a plethora of direct patient care experience regarding patient care in the rural part of our great state. I have also been a medical staff physician leader at several community hospitals, and I understand about the delivery of health care to people in the communities in which they live.

I know that because of the changing health care climate in Connecticut and in our country, there is an ongoing consolidation of hospital services whereby larger health care organizations buy or otherwise own small hospitals and private practice offices. I have seen this occur during my many years as a doctor in Connecticut and during my time as a state physician leader through the Connecticut State Medical Society (I am a past President). Often times, as we have all witnessed, large hospital systems close various inpatient service lines at the community hospitals they own. This is driven mostly by financial concerns because inpatient services are not as profitable as outpatient services can be, even at times losing money. We all know that there is a business aspect to running a hospital or a health care organization. I understand that there is a need to have a positive inflow of revenue in order to keep the

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lights on at a hospital, to buy equipment and material, pay salaries for employees, etc. However, in this calculus that is undertaken, the valuable aspect of patient care being an available and accessible service for people in a local community cannot be overlooked and cannot be underestimated.

I commend and thank very much Johnson Memorial Hospital for providing the care that it provides to the people in its service area and to its ongoing efforts to expand outpatient services to people. I support these efforts. Johnson Memorial Hospital has been and remains an important part of the community in which it is located in Stafford and the surrounding towns. This is great legacy. It is a legacy that can continue by providing labor & delivery services for women. It would be a big loss to the local communities and to the people who live in them if the labor & delivery services were allowed to end.

I have read through the available documents about the CON application and public hearing. Let me provide comments about some aspects of the proposal.

The proposal cites "*The clear public need*" for ending labor & delivery services. Part of what is cited is a decreasing patient volume. Documents cite an average of 172 deliveries of babies each year for fiscal years 2017 to fiscal year 2019, but also cites the number of deliveries of babies within its primary service area from 543 in 2017 to 509 in 2022. If the labor & delivery services at Johnson Memorial Hospital were allowed to end, then what would happen to the 172 annual average number of women seeking local care? The labor & delivery needs of these women are a clear public need.

The proposal states that these women could be cared for elsewhere, citing labor and delivery services at Day Kimball Hospital in Putnam, CT, Manchester Memorial Hospital in Manchester, CT, Mercy Medical Center in Springfield, MA, and Saint Francis Hospital and Medical Center in Hartford, CT. With all due respect to the proposal, the statement contained within it about the driving distances and times from the towns served by Johnson Memorial Hospital and these other hospitals do not make real world sense. Northeast Connecticut is a rural part of the state without much in the way of public transportation and with no direct, easy road connection between the various hospitals cited and Johnson Memorial Hospital. If anyone has driven these roads between these hospitals, including at night, and especially during bad winter weather, it would be readily apparent that there is much more to the driving conditions and times involved. I know this from firsthand experience driving in such conditions in the towns of the 35th State Senate District. Additionally, one has to factor in a woman might be feeling ill or in labor, which adds complexities to the travel connections. And, even more additionally, regards to Mercy Medical Center, located in Massachusetts, there are many insurance policies in Connecticut that do not include care in Massachusetts as in network. I know this as a doctor who has been licensed to practice medicine for many years in both Connecticut and Massachusetts.

One of the important challenges of rural health care, including here in Connecticut, is transportation access and availability. Losing labor & delivery services in the local community that Johnson Memorial Hospital serves would add an adverse impact upon patient care.

I side with patient care. I side with labor & delivery care for women. I side with women's health care.

I thank Johnson Memorial Hospital for its efforts to try to recruit OB/GYN doctors and nurses to provide labor & delivery care. I understand the difficulties in trying to recruit and retain such health care professionals. However, although cited in the CON proposal, this issue must not overflow the overriding concern and importance of providing the people of the communities served well by Johnson Memorial Hospital with the opportunity of labor & delivery care. Relying upon emergency care locally and non-emergency care at distant locations (sometimes urgent care that could become emergency care if not attended to in a timely manner) for labor & delivery services are not in and of themselves a good solution.

Throughout my career as a doctor and throughout my service as a state physician leader, including now as a State Senator, I strongly support patient care and the health care professionals and hospitals in Connecticut who provide the care. Although I do strongly support the care and expansion of services offered by Johnson Memorial Hospital, I cannot support the CON proposal to end labor & delivery care at Johnson Memorial Hospital. The people of my part of Connecticut deserve such care in their local community, care which they have had for many years available to them. They have supported Johnson Memorial Hospital since its founding in 1912. They will continue to do so.

In summary, I strongly ask the Office of Health Strategy not to accept the proposal (Certificate of Need application) by Johnson Memorial Hospital (JMH) to end labor & delivery services.

Sincerely,

Handwritten signature of Jeffrey A. Jordan, MD. The signature is written in cursive and includes the initials "MD" at the end.