



THE SOUTH VALLEY HEALTHY COMMUNITIES COLLABORATIVE

Bernalillo County is seeking public comment on a final draft of its lease agreement with UNM Hospitals. This agreement addresses UNM Hospital's responsibilities as a safety net hospital in exchange for \$96 million per year taxpayers give to help cover costs of taking care of Bernalillo County's most vulnerable people – those with low-income who need medical care and have no insurance.

The public has until Oct. 8 to submit written comments online at bernco.gov/unmh

EleValle has analyzed the draft agreement and is recommending the following improvements to ensure that UNM Hospital is held accountable as our Public Hospital for providing medically necessary care to all Bernalillo County residents who cannot afford to pay.

Overall, EleValle is calling for 1.) Affordable access to medically-necessary care for all people living in Bernalillo County; 2) A community health oversight board, and 3.) Expansion of the Pathways to a Healthy Bernalillo County Program, a community-based navigation program.

Recommendations:

Bernalillo County should adopt a resolution that outlines what it expects from UNMH as a public safety net hospital in terms of county health improvement goals and indicators and to require UNMH to report progress on its attainment of the county's goals and on the evidence-based strategies that it is implementing to achieve those goals and objectives.

When it comes to providing financial assistance and payment policies, the agreement uses the word "endeavor," which means to "make an effort." This is UNACCEPTABLE. In many other places, the agreement says that UNMH "shall" and "will" do certain things. Throughout the agreement, replace the word "endeavor" with the word "shall."

In Exhibit A, Section D. FINANCIAL ASSISTANCE, Replace Items 3. 4. 5. 6. 7. 8. with the following:

3. As a Public Hospital and a Safety Net Institution, UNMH is responsible for providing medically-necessary care to Bernalillo County patients who are unable to pay. This is the definition of a safety net hospital. While UNMH will make every effort to assist patients with obtaining medical coverage, it will not require low-income residents to purchase health insurance prior to being screened for and enrolled in UNMH financial assistance programs. Forcing people to seek coverage delays care, and forces people deeper into poverty.

4. As a Public Hospital and Safety Net Institution, UNMH is responsible for providing medically-necessary care to all people residing in Bernalillo County, regardless of their insurance status or their ability to pay. UNMH shall establish patient payment policies and co-pay, down payment and sliding fee schedules that are reasonable and affordable to people based on income and family size.
5. UNMH, as a Public Hospital and Safety Net Institution, shall establish patient payment policies for low-income patients who are not eligible for financial assistance that do not create a barrier to such patients' access to medically-necessary health care.
6. The payment plans shall be based on income and family size and be reasonable and affordable, as determined by a percentage of monthly income not to exceed 5%.
7. UNMH shall proactively work with non-emergency patients before they incur bills to determine their financial status and eligibility and to inform them of their rights to seek financial assistance and to make payment plans, rather than waiting until demand for payment has been made.
8. The hospital shall not send financial assistance and self-pay discount patients to collections. The hospital by its own admission only collects 25 cents on the dollar from collections efforts against extremely poor, vulnerable patients, and harms the economic stability of families and the community as a whole through unnecessary collections tactics. If patients default on payment plans, they should receive credit/debt counseling and have the opportunity to restructure their payment plans to make them affordable.

In the agreement, Section II. MUTUAL COVENANTS, Replace ITEM B.2. with:

UNMH shall use \$1.2 million in proceeds from the UNM Hospital Mill Levy (property tax revenue) to fully fund expansion of the Pathways to a Healthy Bernalillo County Program. Funding shall be increased each year to scale the program commensurate with the verified need in Bernalillo County for community-based resource navigation and advocacy assistance.

As it reads now, the final draft of the MOU fails to specify Pathways as the navigation program. This failure to specify Pathways makes it possible for the hospital to take funds from Pathways and reallocate those funds to other programs. Pathways is a nationally-recognized, proven model that is community-based and accountable for results. In 2008, Pathways was specifically designated in the MOU as the program to be funded for the purpose of expanding "community-based outreach and navigation support in the health system through community-based programs." Pathways shall be designated by the 2017 MOU as the navigation program.

**Comments Regarding Exhibit A,
SECTION A. REPORTING AND INTERACTION**

1. The draft accountability measures are wholly inadequate, as they are described as simple numbers at a point in time, without any context or tracking of trends. The denominators for many of the measures are known and should be included, such as number of patients on UNM Care as a percentage of the number of Bernalillo County patients whose incomes meet financial eligibility guidelines. Likewise, the Number of UNM Care enrollees tells us nothing about their

utilization rates or patterns, and whether UNM Care is the payor of last resort second to a primary payor source, and the cost of the care covered by UNM Care financial assistance.

2. The mechanisms currently in place at UNMH for providing public input on planning, development and operations are wholly inadequate. The negotiation of the MOU, behind closed doors, for more than a year, is indicative of UNM Hospital's lack of capacity to engage stakeholders in planning. Another recent example of UNMH's propensity to dismiss public input is its refusal to incorporate all of the County's Health Care Task Force's recommendations. Further, the hospital administration recently reinstated a draconian 50% upfront policy, without informing or involving its own board of trustees, and while the administration was negotiating this MOU with Bernalillo County. At its July 2017 meeting, the UNM Hospital Board of Trustees scolded former CEO Steve McKernan for failing to involve the board in development and consideration of this new 50% upfront policy before it was implemented. The board has continued to wrestle with the consequences of this poorly thought out and rationalized policy for the past four months, in meetings that have been closed to the public without citing an exception to the Open Meetings Act.
3. The mechanism for collaboration on community health initiatives between UNMHSC and BernCo envisioned in this section is vague and neglects to involve the community whose health is at stake. As a national leader in community-based participatory practice, UNMHSC should be cognizant of the need to involve the community in planning community health initiatives.
4. Item 4 gives the county and IHS the opportunity to provide input and comments on semi-annual goals, yet there is no mention or mechanism for involving the community impacted by the attainment or lack of attainment of these goals. Community members who have concerns about accountability or transparency or actions of UNMH have nowhere to go. County representation on board is not enough, as county appointees, for example, didn't have information about the 50% up front payment policy.

SECTION B ACCOUNTABILITY AND TRANSPARENCY

4. The pie chart that UNMH is accustomed to using in its existing quarterly financial reporting to the County is meaningless and wholly invented. UNMH has long asserted that all its revenue goes in to one account to cover operations and maintenance of the hospital, and that any allocation by UNMH Department of how mill levy money is spent is artificial and made for illustrative purposes only.
8. UNMH's Grievance process is wholly inadequate given that so many people experience barriers before they are considered patients and/or are unaware of the grievance process, afraid to register complaints and don't seek help.

Bernalillo County should require the Public Hospital to develop a comprehensive, proactive public education campaign, like it has done in the past, to educate potential patients about the financial assistance programs available at UNMH and to implement those policies consistently and fairly, to reduce the burden on people to come forward with complaints when the system has failed them. A Bernalillo County-appointed oversight board would be the best place to receive and take action on system-level complaints.

Recommendations In summary:

FINANCIAL ASSISTANCE AND PATIENT PAYMENT POLICIES

- NO low-income county resident shall be excluded from UNMCare for their medically necessary care.
- Low-income residents shall not be required to purchase health insurance prior to being screened for and enrolled in UNMH financial assistance. Such a requirement causes delays which can be harmful to people's health and cause financial hardships.
- UNMH financial assistance programs shall have simple qualification rules based on county residence and financial need. The programs should be proactively promoted before people receive hospital bills and they should be affordable.
- No uninsured, low-income residents shall be required to pay medically-necessary surgery costs upfront. The Hospital shall reinstate affordable down payment policies and allow patients to pay the balance after they receive medically-necessary care.
- No uninsured, low-income residents shall have hospital or medical bills sent to collection. Payment plans should be reasonable based on a person's income, family size and ability to pay over time. Reasonable payments shall be defined as a percentage of a person's income not to exceed 5%.
- All policies will be in writing and readily available to the public both in electronic and printed formats. Policies will be clearly identified and all written material will be in language understandable to the general public.

PATHWAYS NAVIGATION PROGRAM

- The Pathways to a Healthy Bernalillo County Program shall be fully funded at \$1.2 million per year, and shall be expanded each year to more adequately meet the needs of low-income, uninsured residents of Bernalillo County.
- Pathways should be specifically described in the agreement through a separate exhibit, like it was in previous agreements. The exhibit on Pathways should clearly state the purpose of the program, which is to “expand community-based outreach and navigation support in the health system through community-based programs.”

OVERSIGHT AND ACCOUNTABILITY

- The County Commission’s 2015 Health Care Task Force recommended the establishment of an entity for the County to: 1) Administer and monitor mill levy funds; 2) Engage in safety net planning and evaluation; 3) contract with other providers to fill gaps and test innovative models; (4) Create a defined

system of health planning and accountability for mill levy funds that measures health outcomes; and (5) Establish a public participation process, including the creation of a community health board.

- The County should include these community-led recommendations in the final agreement with UNMH.
- Bernalillo County should establish and appoint a community health oversight body, comprised of community leaders and public health professionals who understand health indicators and operational metrics. Such a body would be able to ascertain the efficacy of UNMH in meeting community-identified health improvement goals/objectives.
- Bernalillo County should adopt a resolution that outlines what it expects from UNMH as a public hospital in terms of county health improvement goals and indicators and to require UNMH to report progress on its attainment of the county's goals on an annual basis and to report on the evidence-based strategies that it is implementing to achieve those goals and objectives.
- Bernalillo County and UNMH should strengthen the accountability measures contained in Exhibit B ACCOUNTABILITY MEASURES
- Measures shall be broken down by race, ethnicity, primary payor source, income quintile, zip code, and other factors that provide meaningful context in terms of health equity. Data shall be reported over time to show trends.