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**Testimony before the  
Council of the District of Columbia  
FY2019 Budget Oversight Hearing  
for  
DC Health**

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**Presented by  
Jacqueline D. Bowens  
President and Chief Executive Officer  
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Good Morning Chairman Gray and members of the Committee on Health, my name is Jacqueline D. Bowens and I am the President and Chief Executive Officer of the District of Columbia Hospital Association. I appreciate the opportunity to present testimony in support of DC Health's Fiscal Year 2019 Budget. Mr. Chairman, I want to once again acknowledge you for your unwavering commitment and leadership to ensuring equitable access to quality health services for all, regardless of their zip code.

As you know, DCHA member hospitals serve a vital role in contributing the health and well being of our City. Those contributions extend beyond the four walls their institutions to all aspects of the community. Together we employ over 27,000 people, representing a consolidated payroll of \$2.2 billion.

When examining our total investment in the District, DC hospitals economic output is \$5.5 billion. In addition to being an

economic driver, our hospitals are all committed to ensuring residents and visitors provided with the highest level of quality care, regardless of ability to pay. Each year DCHA members provide millions of dollars in uncompensated care to District residents and our neighbors in Maryland and Virginia, as well.

District hospitals are a key component of the District's health care continuum. In 2017, DC hospitals provided over 1.1 million days of patient care and handled nearly 500,000 visits to our emergency departments. These numbers only tell part of the story when it comes to the delivery of quality health care in the District. Several District hospitals have primary care and specialty physician practices employed by or affiliated with our hospitals. These physicians are an essential part of the system of care that helps to promote preventive health care and reduces unnecessary hospital admissions.

Last year, the DC Hospital Association in conjunction with the Board of Directors redoubled its commitment to quality with the establishment of the DCHA Quality Collaborative, a multidisciplinary group of hospital quality leaders charged with creating collective solutions among DCHA members to target quality improvements and; to document and elevate the quality profile of District Hospitals through facilitating learning, collaboration and communications. A major tenant of this group is that when it comes to quality, we do not compete on quality, we collaborate.

Regarding the Mayor's FY19 Budget, DCHA supports the Mayor and the Department's continued focus on preventing disease, promoting health, expanding access, and increasing health equity as reflected in this budget. DCHA applauds the Mayor, the Department, and the Council's continued

commitment to maternal and infant health. Already in this council period, we have seen work on such legislation as the Maternal Mental Health Task Force Act of 2017, the Maternal Mortality Review Committee Establishment Act of 2017, and now an additional \$1.6 million proposed in the Mayor's budget to support a pre-term birth prevention pilot program. All these initiatives, including this pilot program, should go a long way in improving the lives of mothers and children in the District. We have begun our analysis of the Better Access for Babies to Integrated Equitable Services Act of 2018 and look forward to providing our feedback once it's scheduled for a hearing.

We also appreciate the Administration's heightened focus on the health of District youth as a priority. This is especially true when it comes to the \$4.4 million increase in Community Health Administration funding to increase School Health Services Program to support expanded school-based mental

health program and to promote better integration with the existing school nurse program.

One area we would like to highlight for investment by the Department is the Statewide Health Planning and Development Agency (SHPDA). Our members believe that investments in SHPDA to upgrade their systems and technology to support a fully automated process for on-line submissions of applications, would offer greater efficiencies in the program including ease of submission, improved documentation and status reporting. We are pleased to see that the SHPDA fund balance was not swept in the proposed Budget Support Act and would ask that revenues deposited in the fund be used for these upgrades. SHPDA and the State Health Coordinating Council carry out a tremendous amount of work as they review and approve Certificates of Need (CON) applications. We believe that investments in automation

would be beneficial to the SHPDA staff as well as applicants engaged in the process.

Over the past year, both DCHA and DC Health have made great strides to further strengthen and build upon their existing partnership with both organizations dedicated to improved communication and transparency, working together in a collective effort to solve common problems. In FY19, DCHA looks forward to continuing to partner with the DC Health on major issues including, reducing Healthcare Acquired Conditions, emergency preparedness readiness across the health care sector; promoting healthier food options as well as collaborative strategies to improve the overall health outcomes of the District.

I want to acknowledge Mayor Bowser for proposing these essential investments in health and Dr. Nesbitt's leadership, as the "City's Doc," to create a system of care that is effective, cost-

efficient and well regulated. The FY19 budget for DC Health is an important step in that direction. Thank you, for allowing me to testify today. I am happy to answer any questions you may have.