

INCENTIVIZE COORDINATED CARE DECREASE ED WAIT TIMES, IMPROVE PATIENT CARE SUPPORT HB 4978 (Rep. Gabel)/SB 3374 (Sen. Gillespie)

IHA Position: Medicaid Managed Care Organizations (MCOs) continue to cause delays transferring patients in need of post-acute care. These delays, known as patient boarding, result in clogged emergency departments (EDs) and patients lingering in inpatient beds longer than medically necessary. In response, IHA supports HB 4978/SB 3374, which would incentivize MCOs to coordinate care for those awaiting proper placement by increasing reimbursement for stays Beyond Medical Necessity when MCOs fail to make timely determinations on post-acute placements. We urge Illinois lawmakers to co-sponsor and vote YES on HB 4978/SB 3374.

Background: Hospital patient boarding is a common problem, largely driven by MCO discharge and transfer delays. Delayed MCO determinations further stall post-acute placement of patients who no longer require acute in-hospital care. For example, a patient may need to be transferred to a rehabilitation or behavioral health facility, but their specialty care is delayed while hospitals wait for MCO approval to transfer that patient. These delays can lead to days-long waits for transfer to receive appropriate, non-emergent care, placing additional pressure on hospital bed availability. These determination delays negatively impact both patients and caregivers, contributing to increased risk of adverse health events, stalling patient access to clinically appropriate treatment, clogging emergency rooms and increasing the risk of hospital by-pass and further exacerbating healthcare worker burnout.

- The **American College of Emergency Physicians has deemed ED boarding a public health crisis**, with research showing that boarding leads to worse patient outcomes, including increased mortality.
- An American Medical Association survey found **more than nine in 10 physicians (93%) report care delays while waiting for insurers to authorize necessary care and 89% saying prior authorization has a somewhat or significant negative impact on patient outcomes.**
- In a 2022 U.S. Surgeon General Advisory **MCO prior authorization inefficiencies were cited as a factor in healthcare worker burnout.**
- A 2023 study by The Joint Commission found that **boarding highly contributed to the perception of burnout, as well as high rates of perceived verbal and/or physical abuse from boarding patients.**

Key Provisions: HB 4978/SB 3374 incentivizes MCOs to better coordinate care by making timely determinations on post-acute placements to address hospital patient boarding. This will decrease ER wait times, free up available inpatient beds and ensure patients are getting the care they need at the right time and in the right setting. **Notably, increased reimbursement rates can be avoided by proper timely placements.**

PLEASE CO-SPONSOR AND SUPPORT HB 4978/SB 3374