

Written Testimony to the Senate Health Care Committee on April 1, 2025 at 3:00pm SB1162: In support of a Hospice Certificate of Need in Oregon

Chair Senator Patterson, Members of the Committee,

Thank you for the opportunity to write a testimony on the importance of creating a Certificate of Need (CON) requirement for hospice services in Oregon. I am writing as a concerned citizen and as the CEO of Housecall Providers Hospice, one of a dwindling number of nonprofit hospice organizations in our state. Housecall Providers' mission is to honor the dignity of every patient we serve and to support families through their most challenging times, while always putting people over profit. Despite achieving some of the best quality and patient satisfaction outcomes in the region, it has become increasingly difficult to remain viable in a rapidly evolving hospice landscape where a lack of regulatory oversight is leading to oversaturation of hospice providers in the urban regions across the state.

For families and patients facing a terminal illness, finding a trusted hospice provider to help navigate an incredibly sensitive time is paramount. Hospice Conditions of Participation require and prioritize honoring the patient's choice of hospice provider. Nevertheless, locally and nationally we are observing troubling trends of fraud and abuse in the hospice industry. In far too many cases we are learning that patient choice is irrelevant as profit-motivated hospices are offering inducements from community partners for patient referrals. When a community has more hospice capacity than its population requires, competition becomes fierce and this behavior, unfortunately, more common.

I'd like to offer one of many examples we have witnessed in our local community. On January 30th of this year, we learned that a patient enrolled in our home-based primary care program was hospitalized with end stage COPD. The hospital's palliative care team explained hospice care to this patient and emphasized his rights to choose a hospice provider. Having developed a long-standing, trusted relationship with Housecall Providers, the patient wished to receive hospice care from our organization. A hospice liaison from Housecall Providers Hospice met with our primary care patient several times while he was hospitalized to develop rapport, ease his anxiety, and help bridge his care prior to discharge.

The next day he was discharged to his adult care home who informed the patient and his family that to remain in residence at the care home, he would have to choose a different hospice provider; in fact, the only hospice provider that this care home would allow. In this sensitive moment our patient made the difficult choice to stay at the care home and choose a hospice provider that he had no reason to trust. Patient choice was not honored, hospice regulations were disregarded, and the deep-rooted relationship between our care team and this patient was abruptly severed.

A well-designed CON program will not only prevent unethical behavior, as well as fraud, waste and abuse —it will also protect our nonprofit hospice providers who are finding it increasingly difficult to sustainably serve their missions. Oregon already has a strong history of using CON programs in other areas of health care. By extending this framework to hospice care, we can ensure that our most vulnerable residents continue to receive care that is safe, compassionate, and truly needed. The proposed legislation is a call for balance—a balance between healthy competition and the ethical, patient-centered service that our community deserves.

Thank you for your time and consideration. I am available to answer any questions you may have and can be reached at Housecall Providers Hospice, 971-202-5534.

Sincerely,

R & Eecca Ramsay

Rebecca Ramsay, MPH Chief Executive Officer