



March 9, 2016

Via Electronic Mail

Michael J. Dacey, MD
 President
 Memorial Hospital of Rhode Island
 111 Brewster Street
 Pawtucket, RI 02863

RE: *Memorial Hospital Inpatient Obstetrical Service*

Dear Dr. Dacey:

In response to your letter of March 2, 2016 regarding the closure of Memorial Hospital's inpatient obstetrical service, the Department requests the following additional information be provided:

Number	Question/ Comment
1.	For the last three months, please provide occupancy rates, average daily census, and staffing ratios for the obstetrical units at Women & Infants and Kent Hospitals. Please describe the anticipated impact on these staffing ratios related to new patients accessing services at these alternate birthing sites.
2.	<p>Please provide a transition plan, including a time line, detailing all of the events that will transpire in advance of the unit's proposed closure, in the event that the plan is approved. Please include at a minimum:</p> <ul style="list-style-type: none"> • Description of how patients will be triaged, discharged, and/or transferred to other birthing hospitals in a safe, orderly manner; • Inclusion of a specific schedule for the conclusion of clinical activities, including the phase-out of planned Cesarean section births; • Description of how the unit will continue to operate in a safe manner until a date certain, given that clinical operations are proposed to cease; • Description of any provisions related to emergency credentialing at Women & Infants and Kent Hospitals; • Description of how patients will be provided with written notice and opportunity to obtain copies of their medical records or have such records transferred; • Written procedures for the handling of all confidential documents, such as medical, pharmacy, employee records, x-rays and financial documents.
3.	Please indicate if complete patients' electronic medical records from Memorial Hospital are integrated into the electronic systems at Women & Infants and Kent Hospitals. If so, please confirm that the electronic medical records are immediately accessible and available at Women & Infants and Kent Hospitals. If not, please describe how the medical record information will be transferred.

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4.	Please provide a detailed patient-family communications plan that describes how patients and the community will be continually informed during the implementation of the Hospital's plan. Please identify key staff who are responsible for implementing the Hospital's communication plan.
5.	Please describe coordination with the Emergency Medical System (EMS) that includes timely updates on the closure process.
6.	Please provide a workforce reduction plan that describes how categories of staffing will be phased down at Memorial Hospital as the proposed closure date approaches. Please identify by category the number of full-time equivalents who will be affected by the work force reduction at Memorial Hospital. Please provide a detailed plan to assist employees who may be laid off as part of the closure of the unit.
7.	Please provide a financial plan related to staffing and maintaining operations in the birthing center until such time as Memorial Hospital's proposed closure plan is reviewed by the Department and a final decision rendered by the Director of Health.
8.	Please identify each type of notification that is required to be made to all appropriate state and federal agencies that regulate the unit, such as the federal Centers for Medicare & Medicaid Services and confirm that these notifications will be timely.
9.	Please provide a list of all health care providers, by name, in the obstetrical unit of Memorial Hospital who presently deliver newborns and the hospital(s) where they currently have admitting privileges. Please confirm the date certain when all of these providers will be credentialed and receive admitting privileges at Women & Infants and Kent Hospitals. If all of these providers will not be credentialed and receive admitting privileges at Women & Infants and Kent Hospitals, please explain.
10.	Please provide details, with particulars, related to a circumstance in which a patient is unable to locate a new provider who accepts her health insurance coverage and needs perinatal care, particularly with respect to Medicaid patients. Please identify the number of obstetric providers at each of Women & Infants and Kent Hospitals and, of those, please identify the number that are presently accepting new Medicaid patients.
11.	Please describe how the referral relationships between the community health centers and Memorial Hospital will be affected by the closing of the birthing center. Please describe the actions that will be taken in order to ensure continuity of care for the patients of these community health centers.
12.	Please quantify the average increase in: (1) out-of-pocket costs for women who access obstetrical services at Women & Infants and Kent Hospitals, in lieu of Memorial Hospital; and (2) total cost of care for women who access obstetrical services at Women & Infants and Kent Hospitals, in lieu of Memorial Hospital.
13.	Please provide a detailed transportation plan that describes how pregnant women may access services at Women & Infants and Kent Hospitals, if transportation is a barrier to accessing care.
14.	Please indicate how many patients are currently in their second and third trimesters, accessing services at Memorial Hospital, and have expectations of delivering in the birthing center. Please sort this list by zip code.
15.	Please describe the pre/post-natal services at Memorial Hospital and how these services will be affected by the planned closing of the birthing center. In the absence of a birthing center, please indicate if there are expectations that the utilization of pre/post-natal services will decline. If so, please estimate the projected decline over the three (3) years following the proposed closure of the unit.

Please provide a written response to this request by Monday, March 14, 2016 and, furthermore, indicate if you would like any of the responses reviewed by the Rhode Island Office of the Attorney General for purposes of being deemed confidential in accordance with the provisions of RIGL §23-17.14-32.

Sincerely,

 Michael K. Dexter
 Chief, Center for Health Systems Policy and Regulation
 cc: Gerard Goulet, Esq., Care New England Health System