



Give Communities a Greater Voice in Determining the Future of Our Hospitals!

Community Voices for Health System Accountability (CVHSA) invites you to join a new alliance created to raise the voices of people in affected New York communities when health systems are proposing major changes, such as mergers, downsizings and closings. We seek to ensure that health systems are held accountable to their non-profit missions of service to the community. We are particularly concerned with protecting access to care for those patients who are often underserved because they are low income, people of color, women, people with disabilities, immigrants, LGBTQ+ people, rural residents, uninsured or reliant on Medicaid insurance.

Across New York State over the last 20 years, more than 40 community hospitals have closed. As a result, we were left with not enough hospital beds when the COVID-19 crisis struck! Many of the remaining community hospitals have joined one of the regional health systems that now control more than 70 percent of the acute care hospital beds across our state. Sometimes, these systems remove categories of services (such as maternity care) from local hospitals, expecting patients to travel to other hospitals within the system. For example:

- The Mount Sinai system plans to [replace the 700-bed Beth Israel Medical Center](#) in lower Manhattan, which it acquired in 2013, with a 70-bed facility and send patients to uptown Mount Sinai facilities for acute care no longer provided downtown.
- The Montefiore system plans [to close the Mount Vernon hospital](#) it acquired in 2013, replacing it with an emergency department and ambulatory care center. The system would send patients to other Montefiore facilities for care no longer available in Mount Vernon.
- Eastern Niagara Hospital [closed its Newfane campus](#) and the maternity unit at the remaining campus in Lockport, while [Columbia Memorial Hospital](#) in Hudson stopped delivering babies.

The COVID-19 crisis has demonstrated the negative impact of hospital consolidation on consumers and communities. Yet, [consumers have almost no voice](#) in determining the future of our hospitals. State oversight of proposed hospital consolidation is not consumer friendly.

That's why we have created CVHSA. We invite you to join us! What are we doing to give communities a great voice? Read on to learn about some of the initiatives we have underway:

- **Getting more seats for consumer advocates at state decision-making tables.** There is only one consumer representative among the 24 members of the NYS Public Health and Health Planning Council (PHHPC), which reviews and votes on proposals from hospitals and other health providers to merge, downsize or make other significant changes to the facilities. A bill we have supported (A9530/S7304) would add two more consumer seats. This bill has already passed both house of the state Legislature in 2020. We will be urging the Governor to sign it and immediately appoint two more consumer advocates to the PHHPC, which is dominated by representatives from hospitals, health systems, nursing homes and other health providers.
- **Ensuring consumers have a voice when hospitals are planning to close entirely, or eliminate the ER or maternity services.** A bill we are supporting (A2986-A/S5144A) would require hospitals to give 90 days' advance notice to the community, hold a public hearing and address consumer concerns in a closure plan that must be approved by the NYS Department of Health. Since the COVID-19 crisis emerged, we have important questions about whether a hospital closing or downsizing will leave enough beds in a community to handle such a pandemic.
- **Requiring every hospital in the state to have a community advisory board (CAB).** Shockingly, many hospitals around the state do not have community advisory boards that could provide insights from affected consumers *before* hospitals propose to merge, downsize or close. We are supporting a bill (A01148/S1856) that would mandate every hospital have a CAB.
- **Monitoring posted agendas for meetings of the NYS Public Health and Health Planning Council and flagging items of concern for affected communities.** The PHHPC posts agendas for its meetings only one week in advance, and written comments are due at least 72 hours in advance of the meeting. That's a really short turnaround for the public to scrutinize complicated applications and prepare comments. We are working to flag selected items for affected communities and, when requested, provide assistance in drafting comments.
- **Urging creation of regional health planning capacity to 1) identify problems consumers are experiencing obtaining timely access to care, including COVID-19 treatment; 2) assess the potential impact of proposed health system changes and 3) work with health systems and public officials to address existing or potential gaps in services.** In New York City, we are supporting a proposal to create an Office of Consumer Health Advocate to fulfill this function.

Which organizations are currently participating in the CVHSA alliance? As of March 15, 2020, the alliance includes: the Center for Independence of the Disabled-NY, the Children's Defense Fund-NY, the Commission on the Public's Health System, the Community Service Society-NY, the Empire Justice Center, the March of Dimes NY, Medicaid Matters-NY, Metro NY Health Care for All, the New York Immigration Coalition, the Statewide Senior Action Council and the Women's Health Program of Community Catalyst.

Would you like to learn more about what CVHSA is doing and/or how to join our alliance? We'd be happy to talk with you! Contact Lois Uttley, Women's Health Program Director for Community Catalyst at luttlely@communitycatalyst.org to arrange a conversation.