

Meeting Community Need Through Oversight of Mergers and Closures

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COVID-19 hit NYS hospitals and nursing homes hard in 2020

Inside a Brooklyn hospital that is overwhelmed with Covid-19 patients and deaths

New York City's hospitals are filling with coronavirus patients as the pandemic hits the city.

More Than 4,300 COVID-19 Patients Sent to New York Nursing Homes

On shift in a New York hospital overwhelmed by coronavirus patients



What did the pandemic expose about our health “system”?

- Inequitable distribution of hospital beds across geographic regions of the state.
- Disproportionate impact on people of color who live in the very areas where there are too few hospital beds.
- Lack of any real process for health system planning in New York State.



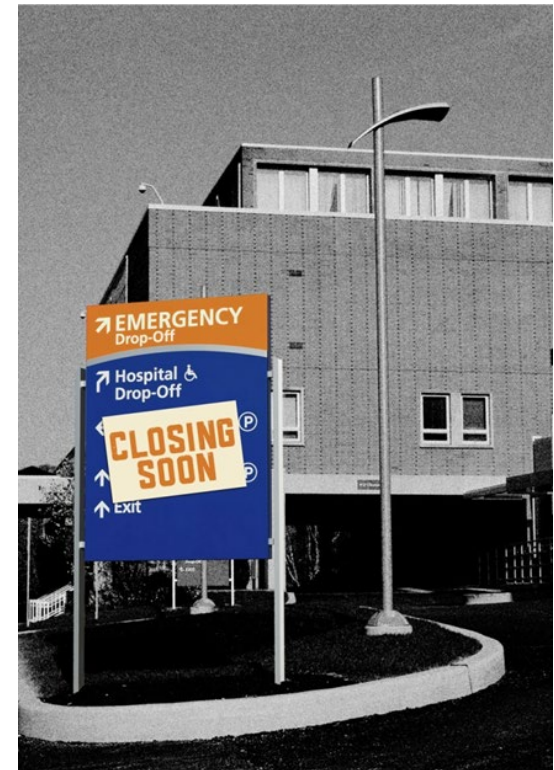
Too few hospital beds in hardest hit places

Borough	Bronx	Brooklyn	Manhattan	Queens	Staten Is
Population	1,432,132	2,582,830	1,628,701	2,278,906	476,179
Acute care hospitals	7	14	16	9	2
Beds per 1,000 pop.	2.70	2.20	6.40	1.50	2.50
COVID19 hospitalized	11,911	14,712	7,823	16,625	5,187
% confirmed COVID 19 cases	22%	28%	13%	30%	7%



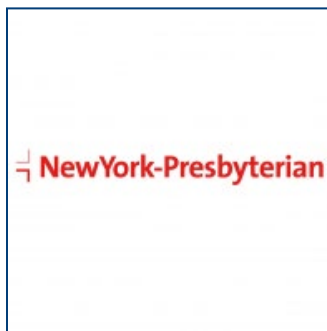
What's causing these inequities?

- **41 acute care hospitals have closed across NYS over the last 20 years.**
 - **Queens:** Mary Immaculate Hospital, St. John's Queens Hospital, Peninsula Hospital, Parkway Hospital
 - **Brooklyn:** LIC Hospital, Victory Memorial, St. Mary's Hospital
- Others have downsized, closing ERs, ICUs, maternity units and other vital services.



Many remaining hospitals have joined large regional health systems

- **12 large systems now control more than half the acute care hospitals** and 70% of the beds in the state
- **Four mega-systems** have acquired multiple hospitals, physician practices and outpatient centers.



Inequities would be worsened by pending hospital actions

Mount Vernon Hospital is threatened with closure, even though that city had the 3rd highest rate of COVID19 cases in Westchester.



Kingsbrook Hospital in Brooklyn will close for inpatient care, removing 200 plus beds from under-bedded Brooklyn.

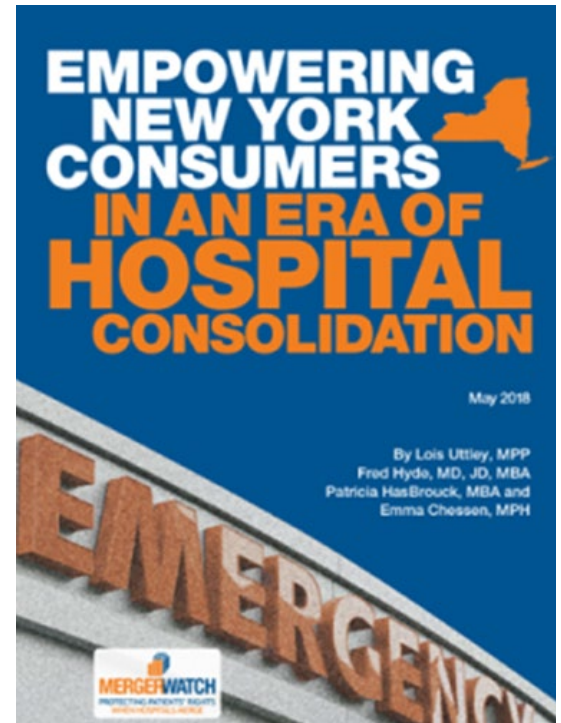
Meanwhile, **Lenox Hill Hospital** in the over-bedded Upper East Side of Manhattan would get a \$1 billion upgrade by the Northwell Health System.

Who decides how many hospital and nursing home beds are needed, and where?

- Big health systems and corporate owners of nursing homes are the primary initiators of proposed changes.
- There is no system of regional health planning to forecast the need for beds and encourage/reward proposals that meet those needs.
- State health officials largely respond to what health systems and owners propose. State review occurs through a Certificate of Need (CON) process.

State oversight through CON is inadequate to serve community needs

- State oversight of consolidation through the Certificate of Need (CON) process **lacks transparency and consumer engagement.**
- Consumers have **little or no notice or say** when their local hospitals are downsizing, closing or joining large systems.
- Representatives of big health systems dominate state review board.



COVID-19 has shown state oversight must be reformed

- We need to **pause hospital downsizing** and reconsider community needs, especially when pandemics strike.
- We need to **give consumers and communities a greater voice** when hospitals are proposing closing or consolidation.
- We need to **restore health planning** with an eye to addressing health inequities and ensuring fair distribution of hospital and nursing home beds.

What can we do?

- **A first step:** Add a **Health Equity Assessment** requirement to all CON applications by hospitals, nursing homes and other health providers.
- Require applicants to demonstrate how their proposed transaction would improve health equity in the communities they serve.
- For downsizings and closings, require applicants to demonstrate how affected consumers would be able to continue to get needed services.
- Require meaningful engagement of affected communities, especially medically-underserved people.



Health equity assessment bill has been introduced!

- **S9035:** Prime sponsor is Senate Health Committee Chair Gustavo Rivera.
- **A11072:** Prime sponsor is Assembly Health Committee Chair Richard Gottfried.
- Help them gain more co-sponsors for their bill. Ask your Assemblymember and Senator to sign on!



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Change the CON process to give consumers a greater voice

- **Increase the number of consumer representatives** on the state CON review board. **A9530/S7304** would add two consumer seats. It awaits the Governor's signature.
- **Engage the public if** a hospital plans to close entirely or eliminate the ER or maternity care. **A2986-A/S5144A** would require 90 days advance notice, a public hearing and a closure plan that addresses consumer concerns.
- **A1148/S1856** would **require every hospital to have a consumer advisory board**, and involve that board in review of proposed consolidation.



Restore state health planning

- **For example, consider the Michigan model:**
 - Every two years, the state Department of Health must determine the number of needed hospital beds in each region of the state.
 - Proposed changes to hospitals are evaluated against the identified number of beds needed in each region.

Create a statewide consumer voice



Coalition calls to halt downsizing at Beth Israel, Mount Vernon hospitals

As New York works to drastically increase its hospital capacity, community groups and the state's largest nurses union are calling for the governor to halt projects that would reduce beds at Mount Sinai Beth Israel in Manhattan and Montefiore Mount Vernon in Westchester County.





CVHSA Community Voices for Health System Accountability

- Statewide Senior Action Council
- Children's Defense Fund-NY
- NY Immigration Coalition
- Empire Justice Center
- March of Dimes NY
- Community Catalyst
- Metro NY Health Care for All
- Community Service Society-NY
- Center for Independence of the Disabled-NY
- Commission on the Public's Health System
- Neighbors to Save Rivington House



Want more information? Want to join CVHSA?

- Contact me at luttley@communitycatalyst.org
- Or leave a message at my office at 212-870-2010. I'm there 3 days a week.

