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Skyline news

REPORTING ON NEW YORK'S HEALTH CARE NEWS

NYS Senate, Assembly Release Budget Proposals

Last week, the NYS Senate and Assembly released their alternatives to Governor Eliot Spitzer's \$120 billion budget proposal for State fiscal year 2007-08, which begins on April 1, 2007.

The Senate's health care budget, in the

form of a budget resolution, restores nearly all the health care spending cuts the Governor proposed in January, including all the proposed reimbursement rate cuts and tax extensions for hospitals and nursing homes. GNYHA is extremely grateful to Senate

Majority Leader Joseph Bruno and his colleagues for their strong statement of support for New York's health care community. In other actions, the Senate rejects the Governor's proposed reallocation of recruitment

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NY Congressional Delegation Voices Opposition to Federal Health Care Cuts in Meeting With GNYHA and 1199 SEIU

On March 8, 2007, GNYHA President Kenneth E. Raske and 1199 SEIU United Healthcare Workers East President Dennis Rivera met with the New York Congressional Delegation in Washington, D.C. to discuss the impact of President George W. Bush's proposed budget cuts on New York's hospitals. Also in attendance were five members of GNYHA's Executive Committee—Herbert Pardes, M.D., President and CEO, New York-Presbyterian Hospital; Michael Dowling, President and CEO, North Shore-Long Island Jewish Health System; Alan Aviles, President, NYC Health and Hospitals Corporation; Stanley Brezenoff, President and CEO, Continuum Health Partners; and Gary Horan, President, Trinitas Hospital. Albany Medical Center CEO Jim Barba also participated. Additionally, NYS Assembly Speaker Sheldon Silver and Senate Majority Leader Joseph Bruno participated in the Federal briefing, which also included a discussion of the cuts facing hospitals at the State level.

The meeting was held at the request of

Representative Charles Rangel, dean of the delegation and chairman of the powerful U.S. House Ways and Means Committee. It was attended by 24 of the delegation's 31 members, including Senators Chuck

Schumer and Hillary Clinton. Following introductory remarks, the meeting began with a review by GNYHA of the four most devastating proposals advanced by the Bush

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Thousands Protest Health Care Cuts



On March 15, nearly 30,000 health care workers marched 14 blocks in the rain to protest proposed NYS and Federal health care cuts that would harm hospitals and nursing homes. See story in this issue's Special Supplement.

and retention funding.

The Assembly Democrats' health care budget, by contrast, accepts many of the Governor's cuts, restoring half of the proposed cuts to the hospital and nursing home sectors combined. Assembly changes to the Governor's budget proposal include elimination of the Medicaid trend factor cut for hospitals and nursing homes; expiration of the 0.35% hospital gross receipts tax on Mar. 31, 2007, and expiration of the nursing home 6% reimbursable assessment on Mar. 31, 2009 (the Governor would have permanently extended both taxes); elimination of the second round of hospital workforce recruitment and retention funding, enacted in 2005; postponement of proposed changes to the hospital bad debt and charity care allocation methodology and reweighting of the Medicaid service intensity weights until Apr. 1,

2008 (the Governor's proposal would have implemented both changes as of Jan. 1, 2008); and lowering the eligibility threshold for the new public hospital high-need pool and the voluntary hospital high-need pool (formerly the SLIPA/distressed priority restoration pool) from Medicaid inpatient discharges of 35% of total discharges to 25%. The gross amount available in the public hospital pool would increase from \$48 million to \$52 million and the amount in the voluntary pool would increase from \$48 million to \$69 million to accommodate the eligibility change.

Hospital proposals in the Governor's budget that remain in the Assembly proposal include reducing Medicaid graduate medical education (GME) payments "to cost," which will cost a subset of teaching hospitals \$80 million annually; reducing the Health

Care Reform Act GME pool by \$24 million; reducing the first round of hospital recruitment and retention funding by \$37 million and reallocating the funding based on Medicaid volume rather than payroll costs; and freezing Medicaid managed care and Family Health Plus premiums.

The Governor's nursing home proposals that remain in the Assembly proposal include calculating the nursing home case mix based on Medicaid patients only; phasing out nursing home recruitment and retention funding over three years and basing the allocation on Medicaid days rather than payroll costs; and eliminating nursing home quality improvement grants.

Negotiations have now begun in earnest, as the Governor, Senate, and Assembly strive to enact a budget by the Apr. 1, 2007, deadline. GNYHA is working with all parties to the negotiations to protect members from damaging reimbursement rate cuts. ■

Legislators Gather for Regional Health Care Forums on Long Term Care Funding Cuts

The Continuing Care Leadership Coalition (CCLC), GNYHA's long term care affiliate, has been hosting a series of Legislative Town Hall forums throughout NYC and the metropolitan area to educate legislators about the harmful effects of Governor Eliot Spitzer's proposed long term care cuts. The events, being held throughout March, are giving long term care providers, staff, residents, and family members an opportunity to talk about the devastating practical consequences of the proposed cuts with legislators from across the region. A number of NYS legislators have participated, including Senator Eric Schneiderman (D-

Manhattan/Bronx), Senator Suzi Oppenheimer (D-Westchester), and Assemblyman Adriano Espaillat (D-Manhattan).

CCLC also joined GNYHA in discussing the impact of the Governor's Medicaid cuts at a Brooklyn Legislative Discussion with Senate Minority Leader Malcolm Smith; Senator John Sampson, the Ranking Minority Leader

of the Senate Health Committee; Assemblyman Karim Camara; and other legislators throughout the City. The Brooklyn event, hosted at Kingsbrook Jewish Medical Center, provided an opportunity for NYC hospital and nursing home CEOs and administrators to candidly discuss the severe implications of Governor Spitzer's proposed health care cuts.

CCLC will host two additional Legislative Town Hall forums, on Long Island and in Queens. For more information, contact Laura Castelli at CCLC. ■



L. to r.: NYS Assemblyman Adriano Espaillat (D-Manhattan) with CCLC President Scott Amrhein at the Manhattan Town Hall Forum held at Isabella Geriatric Center on March 2.

DOH Releases Draft on Allocation of Ventilators in Flu Pandemic

Last week, the NYS Department of Health (DOH) released "Allocation of Ventilators in an Influenza Pandemic: Planning Document." The draft document was developed by the NYS Workgroup on Ventilator Allocation, which was sponsored by DOH and the NYS Task Force on Life and Law, and on which GNYHA and several of its members served. The document provides suggested guidelines for allocating ventilators during a severe 1918-like pandemic, when—despite advance planning, ventilator stockpiling, and centralized management of ventilator resources—there are not enough

ventilators for the number of people who need them. The document proposes a system with several components for allocating ventilators, including limiting the non-critical use of ventilators as the pandemic spreads; "triage guidelines" for allocating ventilators among patients in acute care facilities; and an appeals process so that physicians and patients may request a review for triage decisions. On Mar. 16, DOH held a videoconference to introduce the document, and GNYHA will hold a briefing on it (see page 3). DOH will next be seeking public input on the draft, which, once finalized, will be offered as voluntary guidelines. ■

Senate Finance Committee Looks at Universal Health Coverage

On March 14, the U.S. Senate Finance Committee held the first of a series of hearings on universal health insurance coverage. Finance Committee Chairman Max Baucus (D-MT) opened the hearing by citing the escalating number of uninsured people in the country—currently 47 million—and proclaimed that “health care is a right. . . . America is rich enough and good enough to guarantee that right.” The Chairman acknowledged that reform would be a lengthy and involved process, but pledged to work through it and affirmed his optimism that consensus could be reached.

Among those testifying before the panel were Professor Stuart Altman, of Brandeis University; John Mongan, the President of Partners HealthCare, a Boston-based health system; John Sheils, from the consulting

firm the Lewin Group; and Richard Frank, the Vice Chair of the Citizens Health Care Working Group, which was created by Congress as part of the Medicare Modernization Act.

While witnesses expressed their varied opinions about how to advance broad health care reform, particular attention was given to the Massachusetts model of a health insurance mandate that is currently under way and that requires all State residents to have health coverage by July 1, 2007. According to *The Washington Post*, recent estimates indicate that, under the plan, the average uninsured Massachusetts resident, who is generally around 37 years of age, could obtain health care coverage for as little as \$175 per month—less than half the amount estimated earlier by some insurers. The State plan would include prescription drug coverage

and basic medical care, such as emergency room visits and outpatient medical care. Prices would depend on an individual’s age and area of residence, and lower-cost plans would be available to young adults.

Senator Ron Wyden (D-OR), a champion of health care reform, took the opportunity to showcase key features of his legislative proposal, known as the “Healthy Americans Act,” and argued that tax increases for universal coverage aren’t necessary. His proposed bill aims to ensure that all Americans can afford high-quality, private health insurance by fostering a competitive environment in which insurers are matched with health care consumers, quality is promoted while costs are driven down, and insurance companies have a financial incentive to cover preventive care.

The Senate Finance Committee intends to hold four more hearings on this issue to explore the key principles of reform, including pooling arrangements, restraining cost growth, preventive care, and “shared responsibility.” ■

UPCOMING GNYHA MEMBER BRIEFINGS

Allocation of Ventilators During an Influenza Pandemic

Date: Thursday, March 22, 2007

Time: 1:30 p.m.–3:30 p.m.

Location: GNYHA Conference Center, 555 West 57th Street, Suite 1500

This briefing is being held to discuss a draft document entitled, “Allocation of Ventilators in an Influenza Pandemic: Planning Document,” which was developed by the NYS Workgroup on Ventilator Allocation, sponsored by the NYS Task Force on Life and Law and the NYS Department of Health (DOH). At the meeting, representatives of DOH will describe the draft document and answer questions. According to DOH, the document will guide hospitals in setting up systems to allocate ventilators in a pandemic crisis. For more information contact Doris Varlese at varlese@gnyha.org, and to register, contact Laurie Sangirardi at sangirardi@gnyha.org.

SunGard Availability Services

Dates: Tuesday, April 3, 2007;

Tuesday, May 22, 2007

Time: 10:00 a.m.–12:00 noon (each session)

Location: GNYHA Conference Center C, 555 West 57th Street, 15th Floor; and via live Webcast

SunGard Availability Services, a leading provider of business continuity and disaster recovery solutions and a GNYHA Services, Inc. contracted

supplier, will be providing two educational seminars both on-site and via live Webcast. Each seminar will be led by a guest speaker from SunGard. The April 3 seminar will address disaster recovery/crisis management on both large and small scales, and the May 22 seminar will focus on best practices for disaster recovery planning and documentation. To register and obtain log-in information, contact Barbara Green at green@gnyha.org or Andrea Giotopoulos at agiotopoulos@gnyha.org.

Coding Issues in Inpatient Rehabilitation

Date: Thursday, April 5, 2007

Time: Registration, 9:00 a.m.; Program, 9:30 a.m.–3:30 p.m.

Location: GNYHA Conference Center, 555 West 57th Street, 15th Floor

GNYHA has scheduled a training session on coding and documentation issues in rehabilitation for clinical staff and personnel responsible for coding the Inpatient Rehabilitation Facility Patient Assessment Instrument (IRF-PAI) in hospital inpatient rehabilitation facilities (IRFs). The session will review correct coding practices for impairment group codes, etiological diagnoses, and comorbidities and complications. Particular attention will be directed to the differences between coding for the IRF-PAI and form UB-04

(the standard, uniform bill for institutional health care providers, which replaced form UB-92 and was created to align the paper form with electronic data standards), as well as processes to ensure complete documentation in the patient medical record. Staff from Uniform Data System for Medical Rehabilitation and the American Hospital Association will provide the training. To register contact Maria Canales at mcanales@gnyha.org, and for more information contact Elisabeth Wynn at wynn@gnyha.org.

DOTmed.com

Date: Tuesday, April 10, 2007

Time: 10:00 a.m.–11:30 a.m.

Location: Web Demonstration

DOTmed.com, a new GNYHA Services, Inc. contracted supplier, will be conducting a Web-based demonstration of its new and used medical equipment auctioning site. DOTmed.com assists health care institutions with buying and selling medical equipment at true market value. The demonstration will give viewers the opportunity to learn more about DOTmed.com’s equipment auctions as well as a variety of other services. To register, contact Barbara Green at green@gnyha.org or Andrea Giotopoulos at agiotopoulos@gnyha.org. ■

GNYHA's "Gap Program" Links Clinical Practice to Academia

On February 28, 2007, GNYHA launched the first phase of its Gap Program, a three-year initiative to address the escalating nursing crisis by bridging the gap between academic nursing programs and clinical practice. The initiative is designed to address the shortage of well-trained clinical adjunct faculty, the need for greater emphasis on practical experiences in academic programs, and the importance of hospital orientation programs in relation to recruitment and retention. The goals of the Gap Program include giving practicing nurses more authority; increasing the number of nursing faculty; enhancing the quality of nurse training programs; and increasing the number of new nurse graduates and the nurse workforce retention rate by improving the experiences and job satisfaction of both new and experienced nurses.

During Phase One, which is now underway, experienced nurses are being trained to become preceptors and clinical adjunct fac-

ulty who will teach student nurses in the hospital setting. The preceptor and faculty trainees will also participate in projects to revamp their hospitals' current nursing orientation programs in order to improve recruitment and retention. Hospitals that are participating in Phase One are Continuum Health Partners (Beth Israel Medical Center and St. Luke's-Roosevelt Hospital Center); Jacobi Medical Center; Mount Sinai Hospital, Queens; Long Beach Medical Center; Lenox Hill Hospital; New York-Presbyterian Hospital; and Long Island Jewish Medical Center. Collectively, these hospitals have agreed to release 33 of their nurses, one day per week, to participate in the 12-week-long program.

During Phase Two of the program, GNYHA will build on the initial phase by developing a "Nursing Clinical Residency Match," in which nurse preceptors and clinical adjunct faculty trained during Phase One will mentor nursing students in the clinical

setting. Each nursing student will be matched to a participating hospital through a competitive application process and will rotate through each of the clinical units in the hospital for two years. The match program is modeled after the physician residency match program and will improve the transition from being nursing students to becoming fully trained clinical professionals. The match program's overarching goal will be to introduce into the hospital setting fully prepared nurses who will be committed to both the nursing profession and the hospital in which they were trained.

The Gap Program was made possible through a grant from the Jonas Center for Nursing Excellence.

GNYHA will continue to update its members on the progress of the Gap Program and inform them of additional training sessions that will be made available. In the meantime, please contact Terri Straub or Zeynep Sumer at GNYHA for more information. ■



Participants in the Gap Program (names listed alphabetically, not in order of appearance): Stacie Akerman, Frances Alfaro, Gertrude Ann Aujero, Andrea Batista, Ouida Blake, Claudine Brown, Marjorie Carey, Diana Colon, Mariefel Dalauta, Jaclyn Dellacorte, Huguette Dempaire (not pictured), Frederick Dunau, Grace Felix, Indra Gharbaran, Kathleen Giovanni, Mary Gleeson-Carr, Susan Ignacio, Francesca Jean, Gwendolyn Lancaster, Anna Lee, Lori Martin, Elizabeth Metz, Nadine Minto, Joan Morrow, Anne Pisciotta, Lynette Scaraglino, Johanna Bannert Sica, Lavern Solomon, Mary Swett, Maria Thompson, Luisa Umali, Jennifer Wade, Jeanine Weber, and Alan Krieger (trainer).

NY Congressional Delegation Voices Opposition to Federal Health Care Cuts *continued from page 1*

Administration: **1**) restricting Medicaid inter-governmental transfers (proposed via regulation in January), **2**) eliminating Federal support for Medicaid graduate medical education, **3**) eliminating indirect medical education payments to hospitals treating Medicare Advantage beneficiaries, and **4**) cutting provider payments through reductions to annual inflationary updates. In response, the delegation members expressed their strong support of hospitals and restated

their commitment to oppose the enactment of the Administration's proposals.

At the briefing, Representative Rangel also expressed his serious concerns about the cuts to hospitals and nursing homes proposed by NYS Governor Eliot Spitzer. Senator Bruno echoed those concerns and pledged to defend health care providers by blocking such proposals in the State Senate. Derek Douglas, the Governor's representative at the meeting and head of his Washington, D.C. office, was also

present at the meeting and noted the concerns raised by members of the delegation related to the impact of both Federal and State cuts. The Governor's Washington office had previously stated its opposition to the Bush Administration's proposals to reduce payments to hospitals.

GNYHA will continue to aggressively advocate at the Federal level to protect against any of the Administration's legislative or administrative proposals. ■