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MEMBER HOSPITALS

Brookhaven Memorial Hospital Medical Center
East Patchogue

Catholic Health Services of Long Island

- **Good Samaritan Hospital Medical Center**
West Islip
- **St. Catherine of Siena Medical Center**
Smithtown
- **St. Charles Hospital**
Port Jefferson
- **St. Francis Hospital**
Roslyn
- **Mercy Medical Center**
Rockville Centre
- **New Island Hospital**
Bethpage

East End Health Alliance

- **Eastern Long Island Hospital**
Greenport
- **Peconic Bay Medical Center**
Riverhead
- **Southampton Hospital**
Southampton

Long Beach Medical Center
Long Beach

John T. Mather Memorial Hospital
Port Jefferson

Nassau University Medical Center
East Meadow

North Shore-Long Island Jewish Health System

- **Glen Cove Hospital**
- **North Shore University Hospital**
- **Plainview Hospital**
- **Syosset Hospital**
- **Franklin Hospital**
- **Huntington Hospital**
- **Southside Hospital**

Stony Brook University Hospital
Stony Brook

Veterans Affairs Medical Center
Northport

Winthrop South Nassau University Health System

- **South Nassau Communities Hospital**
Oceanside
- **Winthrop-University Hospital**
Mineola

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Nassau-Suffolk Hospital Council, Inc.

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Long Island Hospitals Assess Health Reform Impact

\$2.4 million in cuts in year one

It's been nearly a month since the historic health care reform legislation became law. Components of this landmark legislation will take effect at different times. Small business tax credits, extending coverage to young adults under parents' insurance plans, and \$250 rebates to Medicare enrollees who fall into the prescription drug "doughnut hole" are just a few of the changes that lie ahead this year. Also among this year's changes is a \$2.4 million loss in Medicare/Medicaid reimbursement to Long Island's hospitals.

While the Long Island hospital industry generally applauds most measures in the legislation, the industry is having a hard time swallowing the cuts that begin slowly, with \$2.4 million in cuts in the remainder of the fiscal year, but climb steeply in future years. Meanwhile, coverage expansion happens incrementally each year for the next decade, until the law's coverage of about 95 percent of Americans is reached.

The nation's hospital industry originally agreed

to cuts of about \$155 billion over 10 years when it sat down with the Obama administration and Senate Finance Committee early last summer. The reimbursement cuts were to coincide with pre-determined expansion targets up to 97 percent of the uninsured population.

"The dilemma that hospitals face is that full reimbursement cuts kick in right away, while the increased numbers of insured outlined in the original agreement do not," said Wendy Darwell, chief operating officer for the Nassau-Suffolk Hospital Council (NSHC). This organization represents the interests of Long Island's not-for-profit and public hospitals.

More insured patients mean less uncompensated care provided by hospitals.

The uninsured often turn to hospital emergency rooms for routine care. In such a setting costs are substantially higher. Health reform legislation is designed to eventually balance access to and cost of care.

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State Budget Still Unknown Region's hospitals implore legislators to reduce cuts

Long Island's hospitals await the outcome of the 2010 -2011 state budget that right now sits in limbo. The state is operating under a bare bones temporary budget, while legislators and the governor's office work to design a budget that closes a \$9 billion hole and meets the needs of varied constituencies.

Long Island's hospitals face \$46.8 million in Medicaid cuts and new taxes under the plan proposed by the governor. Plans forwarded by both state chambers also contain cuts and new taxes, although not to the magnitude proposed by the governor.

"The fact remains," said Kevin Dahill, presi-

dent/CEO of the Nassau-Suffolk Hospital Council (NSHC), "that these proposed cuts come on top of \$180 million in state Medicaid cuts and taxes that Long Island's hospitals have endured in the past two and a half years. Added to these are the cuts looming on the federal reform agenda."

According to Dahill, the Long Island hospital industry has had to be innovative in its budgeting, staffing needs, and services and programming. There are dozens of maintenance and facility upgrade projects on hold, as well program enhancements that have been unable to move forward. Despite these trying times, says Dahill, the quality of patient care has never been compromised.