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STATE UPDATE: FLU Declared Prevalent in New York

On February 11, 2016, New York State Health Commissioner Dr. Howard Zucker declared the flu virus prevalent in New York State. That initiated the state's public health law that requires all healthcare personnel who have not received a flu vaccine for this flu season to wear a protective mask while in areas where patients or residents are typically present. This is a comprehensive endeavor to protect patients, visitors, and employees from exposure to the flu virus.

While an annual flu vaccine remains the single best method for preventing the flu, a surgical face mask, worn by employees, provides added protection to patients, employees, and visitors. All member hospitals of the Suburban Hospital Alliance of New York State offer the flu vaccine to employees. For employees choosing to forego vaccination, surgical masks are provided.

As a matter of standard practice, all Suburban Hospital Alliance hospitals enforce universally-recognized precautions to prevent the flu. These include hand washing, the use of hand sanitizers, placed conveniently throughout the hospital, as well as goggles, and gowns. In addition, all hospitals adhere to rigorous infection control guidelines and policies every day to ensure a clean environment for patients, staff, and visitors. Antiseptic wipes are located in patient rooms, work stations, hallways, and other treatment areas and are easily accessible to hospital employees responsible for sanitizing medical equipment and surface areas.

"Flu prevention is a priority at all hospitals on Long Island and in the Hudson Valley. Hospital employees work every day to lessen the spread of flu virus by adhering to strict infection control practices and prevention guidelines," said Kevin Dahill, president/CEO of the Suburban Hospital Alliance of New York State. "In addition, hospitals, nursing homes, and other facilities must document the number and percentage of personnel vaccinated against the flu to state and federal authorities." Most hospital offer flu clinics. Contact a local hospital for more information.

FEDERAL UPDATE: Obama Budget Calls for Cuts

The 2017 budget process got underway on February 9, 2016 when President Obama released his federal fiscal year 2017 budget request to Congress. The hospital industry is once again dismayed that the proposal calls for billions in Medicare and Medicaid provider reductions. Taking a large hit is the Medicare Graduate Medical Education (GME) program. GME helps fund teaching hospitals that are training the next generation of healthcare professionals. The budget also proposes reduced payments to post-acute providers, including inpatient rehabilitation facilities, home health agencies, hospices, skilled nursing facilities and long-term care hospitals. Congress often looks to the administration's proposed budget as a guide when the House and Senate develop their budget resolutions.

Meanwhile, the Centers for Medicare and Medicaid Services (CMS) is gearing up to release, by the summer of 2016, rules that will put into effect the payment cuts to hospital-based outpatient departments that were outlined in the Bipartisan Budget Act of 2015. That legislation precludes hospitals from receiving the higher hospital outpatient reimbursement rate for off-campus hospital-owned clinics that opened after November 2, 2015. The law establishes a "site neutral" payment policy; that is, care is reimbursed at the same rate regardless of whether the care is delivered in a physician office or hospital-based clinic. This is despite the substantially higher cost of overhead and skilled staffing mix in the hospital setting. The rule restricts patients' care options and the hospital industry is asking CMS for more flexibility in the final regulations.

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