

# NorMet News . . . April 2012

A Monthly Publication of the Northern Metropolitan Hospital Association

*NorMet News* publication is a summary of regulatory and legislative news, advocacy messages, and other relevant issues affecting the delivery of hospital and health care in the Hudson Valley.

## With Health Exchange Order in Place, Hospitals Maintain Legislative Watch

Governor Cuomo's recent executive order creating enabling legislation for New York's health care insurance exchange places the state in compliance with the federal Affordable Care Act (ACA) and allows the state to apply for additional funding from the federal government, as the state moves forward with the exchanges' structure. Hospital leaders will monitor the development of the exchange framework in the coming months, while keeping a close eye on legislative actions regarding such issues as medical malpractice, board governance and executive compensation, staffing/workforce developments, and disproportionate/indigent care, during the remaining weeks of New York's legislative session.

The exchange will operate under the Department of Health in consultation with the Department of Financial Services and other agencies. Governor Cuomo's order calls for the organization of regional advisory groups consisting of consumer advocates, health care providers, insurers, and unions. The order did not set a deadline for the exchange to be operational, but most believe it should be ready for business sometime next year. The ACA requires any state that chooses to operate its own exchange to be ready to accept applications by October 1, 2013 and fully operational by January 2014. If the state had not taken this step to create an exchange, then the federal government would have established one for the state. Such an exchange might not have met the unique health care needs of New York and would have caused the state to lose out in millions in federal grants.

The state health insurance exchange will allow small businesses and individuals to shop competitively for affordable health care insurance. Even if the ACA and/or the individual mandate piece are struck down by the Supreme Court, the state exchanges can remain.

About one million New Yorkers are without health insurance.

Other legislative issues on the radar include: **Medical malpractice** – several proposals are on the table and they do nothing to mitigate exorbitant insurance costs or meaningfully reform New York's current

medical liability crisis. NorMet leadership continues to work closely with state legislators to solve the unpredictability of New York's tort system.

**Board Governance/Executive Compensation** – remains a sensitive issue in the health care industry. Governor Cuomo recently extended the deadline to May 16, 2012 for development of proposals by state agencies related

to implementation of his order on not-for-profit executive compensation. NorMet leadership, in cooperation with HANYS leadership, continues to work with the governor's office and state agencies to arrive at a reasonable and rational policy on this issue and the issue of board governance.

**Staffing/Workforce** – one current proposal is aimed at clarifying the role of nurse practitioners and seeks to ensure that they are allowed to practice to the full extent of their education and training, particularly in the area of diagnoses and treatment. With a worsening primary care physician shortage and more patients expected as a result of federal reform, the nurse practitioner and his/her skill set are in great demand. Another measure seeks to create specific staffing ratios for nurses and other direct-care staff in hospitals and nursing homes. This is an unfunded mandate. Mandated staffing levels do not account for individual patient patterns or volume among the variety of hospitals and varied services they offer

**Disproportionate/Indigent Care** – remains a highly sensitive issue. New York must be brought into compliance with changing disproportionate share (DSH)

*A recent study by the Commonwealth Fund found that more than a quarter of adults ages 19 to 64 in the United States lacked health insurance in 2011. About 70 percent of these individuals had been without coverage for more than a year.*

funding rules that are occurring as a result of the ACA, in order to ensure that the state optimizes federal funding. Hospitals in New York have demonstrated inconsistent compliance with New York State's 2006 Hospital Financial Assistance Law. This has focused additional attention on the issue. – *Janine Logan, [jllogan@normet.org](mailto:jllogan@normet.org)*.

## Fight to Protect Hospitals Continues in Washington

Hospital advocates are wasting no time reminding federal law makers about budget and policy decisions that the nation will face as we head into election season this fall. At year's end, the Bush tax cuts will expire, the Social Security Payroll Tax holiday ends, and a fix, hopefully permanent, for the physician Medicare payment formula comes due. Otherwise, the nation's doctors will face a steep pay cut. Hospitals remain highly vulnerable to additional cuts to offset any "doc fix."

Additionally, sequestration cuts to Medicare, that were triggered last fall by the Super Committee's failure to reach a deficit reduction agreement, kick in January 2013. Hospitals in Westchester County and the six counties in the mid-Hudson Valley region will face a two-percent across-the-board cut in Medicare reimbursements. Moreover, there will be increased pressure to shift more cuts away from defense and over to Medicare.

"Our efforts to protect the region's hospitals must continue full force. Delivery and system reforms and hospitals' vulnerability to further cuts will also move ahead. These will happen despite the outcome of the Supreme's Court's decision regarding the Affordable Care Act," said Kevin Dahill, president/CEO of NorMet. – *Janine Logan, [jllogan@normet.org](mailto:jllogan@normet.org)*.

### NorMet/HANYS' Federal Briefing/Congressional Reception

Tuesday, May 8, 2012  
Washington DC

**Afternoon Feature:** *Catherine Stetson, Partner, HoganLovells and Co-Director of firm's Appellate practice group.* She is the Counsel of Record for two friend-of-the-court briefs filed with the U.S. Supreme Court on behalf of the American Hospital Association and other hospital groups.

**Early Evening Feature at 5 p.m.:** Reception for New York State Congressional Delegation. This is an ideal opportunity to meet informally with multiple members of Congress.

**Evening Dinner:** For NorMet/HANYS' members follows at 6: 30 p.m. at Charlie Palmer Steak

To register go to: [www.HANYS.org](http://www.HANYS.org). Questions: call 845-562-7520

## ACOs Take Flight

Under the Medicare Shared Savings Program, 27 Accountable Care Organizations (ACOs) have entered into agreements with the Centers for Medicare and Medicaid Services (CMS). Five of the ACOs selected by CMS are located in New York State and **two are located in the NorMet region – Accountable Care Coalition of Mount Kisco, LLC and Crystal Run Healthcare ACO, LLC.**

ACO of Mount Kisco was formed in partnership between Mount Kisco Medical Group, PC, and collaborative health systems – which will provide a range of care coordination, analytics and reporting, technology and other administrative services to enable physicians and other health care professionals to deliver quality health care efficiently. Mount Kisco Medical Group is a multi-specialty medical provider that offers medical care to patients at 25 locations. It is comprised of more than 270 physicians representing 40 different medical specialties throughout the Mount Kisco area.



### Mark Your Calendar for NorMet Events in April/May 2012

- Apr. 27 Board of Directors  
(Lawrence Hospital)
  - May 2 HANYS RAC Program
  - May 15 Case Management  
Committee
  - May 25 Executive Committee
- Meetings for NorMet members only and are held at NorMet offices in Newburgh unless **otherwise** noted. To register/info call: 845-562-7520.

Crystal Run Healthcare, based in Middletown, NY, is a multi-specialty group with more than 200 providers in more than 40 medical specialties, with 15 practice locations. Its treatment decisions are based on nationally accepted, evidence-based guidelines. It is expected to serve nearly 10,000 Medicare beneficiaries in New York and Pennsylvania.



## The Quality Corner

*An update on quality reporting measures*

Mary Jane Milano, Director

**Medicare Spending Per Beneficiary:** On April 19<sup>th</sup>, the Centers for Medicare and Medicaid Services (CMS) added the first data from the new Medicare spending per beneficiary measure to the Hospital Compare website. The “Spending per Hospital Patient with Medicare” measure shows whether Medicare spend more (>1) less (<1) or about the same (1) as the national average per episode of care for patients treated at a specific hospital. The measure includes any Medicare Part A and Part B payments for services provided to a patient three days prior to a hospital stay, during the hospital stay, and 30 days after discharge from the hospital. The Medicare Spending Per Beneficiary Measure is not currently scheduled to be part of the Hospital Value-Based Purchasing (VBP) program. Medicare requires a measure to be reported on Hospital Compare at least one year before it can be incorporated into Medicare’s VBP.

**Avoid Payment Penalty, Complete CMS Quality Reporting Requirements by May 15<sup>th</sup>.** Each year hospitals participating in CMS’ Hospital Inpatient Quality Reporting (IQR) program must answer four questions or face a significant payment penalty. Failure to answer the four questions by May 15, 2012 will result in a 2.0 percent reduction in your operation’s APU for FFY 2013. The questions relate to whether or not your hospital participates in three clinical registries: one for cardiac surgery; one for stroke care; and one for nursing sensitive care and attesting that the data submitted to CMS as part of the IQR program is accurate to the best of your knowledge. (Note: Your hospital is required only to report whether or not it participates in each of these registries and does not have to be using a registry by May 15<sup>th</sup>.)

**National Donate Life Month:** April is National Donate Life Month. Nearly 9,700 New Yorkers are waiting for an organ transplant. Last year, only 1,298 organs from deceased donors were transplanted statewide. **Hospitals are encouraged to distribute informational material about donation at board meetings, community events, and within their health care organizations throughout the year.** Free materials are available from the New York Organ Donor Network (NYODN) at [www.donatelifeny.org](http://www.donatelifeny.org). NYODN is the organ procurement organization servicing hospitals in lower New York State and Long Island. It takes part in *Donate Life America*, a not-for-profit alliance of national organizations and state teams across the United States committed to increasing the number of registered donors. *Donate Life America* recently launched a new initiative, “20 Million in 2012” – geared toward radically increasing the number of people registered on state donor registries. The American Hospital Association is a partner with the U.S. Department of Health and Human Services, Health Resources and Services Administration’s *Workplace Partnership for Life (WPFL) campaign*, a donor registration endeavor. It encourages donor registration within hospitals and their local communities. The New York State Department of Motor Vehicles and State Health Department recently announced that New Yorkers can now easily enroll in the State’s Organ and Tissue Donor Registry online through <https://my.dmv.ny.gov/crm/>. For more information on how NYODN can help you implement these programs in your hospital and community, please contact Margaret Gallagher at 646-291-4445, [mgallagher@nyodn.org](mailto:mgallagher@nyodn.org).

**National HealthCare Decisions Day:** This day of awareness occurs every year on April 16. Hospitals and all health care providers can take a lead role in ensuring that both staff and patients are aware of health care proxy forms and advance care directives. For more information, go to [www.nhdd.org](http://www.nhdd.org).

### ***Hospitals Await Supreme Court Decision on ACA***

For three days last month, justices of the Supreme Court heard arguments for and against the Affordable Care Act (ACA). The ACA became law in 2010. In question is the law’s mandate that every individual carry health insurance, as well as the law’s directive that states must expand their Medicaid programs to help close the gap of the nation’s uninsured. A decision is expected sometime in June.

# NorMet Expands Digital Presence

Breaking news and information related to health and hospital policy affecting hospitals in the seven counties that comprise the lower and mid-Hudson Valley region and the 2.3 million residents served by these institutions can be found on **Twitter @normethospitals** and on the **Northern Metropolitan Hospital Association (NorMet) Facebook page**. NorMet regularly advocates for favorable health care legislation and regulation at all levels for hospitals and patients.

“These social networking tools are a natural fit for us,” said Angela Skretta, vice president of NorMet. “Their immediacy and extensive reach enable NorMet to connect with thousands of concerned patients, health care advocates, hospital workers and administrators, law makers, and the media in just seconds.”

Member hospitals are encouraged to **friend NorMet on Facebook** and follow us on **Twitter @normethospitals**. Please re-tweet important advocacy messages early and often. – Janine Logan, [jlogan@normet.org](mailto:jlogan@normet.org).

## News Briefs . . .

**Magnet Status . . .** was achieved by **White Plains Hospital**. Magnet recognition is determined by the American Nurses Credentialing Center’s (ANCC) Magnet Recognition Program, which ensures that rigorous standards for nursing excellence are met. With this credential, White Plains Hospital joins the Magnet community – a select group of just 392 out of nearly 6,000 total health care organizations in the United States, and one of only 19 in New York State to receive the designation.

**National Recognition for Top Diabetes Education . . .** went to the Orange Regional Dunkelman Diabetes Center, part of **Orange Regional Medical Center**, by the American Diabetes Association. Programs that achieve recognition status have a staff of knowledgeable health professionals who provide up-to-date information about diabetes management to their patients and participants of support groups.

**Hospital-Affiliated Nursing School Participates in National Initiative . . .** to support and honor America’s service members and their families – Joining Forces. Hopfer School of Nursing in Mount Vernon, an affiliate of **Sound Shore Health System**, continues its long standing tradition of providing special assistance to veterans interested in a career in nursing. The school plans to add a special curriculum component that will ensure Hopfer graduates are competent in identifying and meeting health care needs of those who have served our country through the military.

**Healthcare Trustees of New York State (HTNYS) . . .** is accepting nominations for its 2012 Trustee Leadership and Advocacy Award through May 14. Since 1985, HTNYS has honored exemplary trustees each in recognition of leadership and advocacy contributions to their health care organizations and communities. Formerly presented as two distinct awards for leadership and advocacy, this year the award has been combined into a single award. The nomination process has been simplified, and nominations must be received online only. Go to the HTNYS website for more information or contact Jennifer Carter at [jcarter@hanys.org](mailto:jcarter@hanys.org).

**Auxiliaries Recognized . . .** by the Healthcare Association of New York include **Benedictine Hospital Auxiliary; Auxiliary of Hudson Valley Hospital Center; Northern Dutchess Hospital Auxiliary; Saint Francis Hospital and Health Centers; Vassar Brothers Medical Center Auxiliary; Putnam Hospital Center Auxiliary;** and **Samaritan Hospital Auxiliary**. These auxiliaries were recognized for their commitment of significant time and effort to serving as advocates for their health care facilities and communities during 2011.

## Member Hospitals

Benedictine Hospital  
Blythedale Children’s Hospital  
Bon Secours Community Hospital  
Burke Rehabilitation Hospital  
Catskill Regional Medical Center  
Ellenville Regional Hospital  
Good Samaritan Hospital  
Helen Hayes Hospital  
Hudson Valley Hospital Center  
Keller Army Community Hospital  
The Kingston Hospital  
Lawrence Hospital Center  
The Mount Vernon Hospital  
The New York Presbyterian Hospital Westchester Division  
Northern Dutchess Hospital  
Northern Westchester Hospital  
Orange Regional Medical Center  
Phelps Memorial Hospital Center  
Putnam Hospital Center  
St. Anthony Community Hospital  
Saint Francis Hospital  
St. Joseph’s Medical Center  
St. Luke’s Cornwall Hospital  
St. Vincent’s Westchester (Division of St. Joseph’s Medical Center)  
Sound Shore Medical Center of Westchester  
Vassar Brothers Medical Center  
VA Hudson Valley Health Care System  
Westchester Medical Center  
White Plains Hospital Center

## Committee and Other Meeting News . . .

**Communications Committee:** The committee held a meeting via telephone conference call on Monday, April 16, 2012. Dawn French, chair of the NorMet Communications Committee and vice president of marketing and public relations at White Plains Hospital hosted the conference call. Members discussed working on a region-wide public information campaign. Future educational topics were also discussed. Potential topics include dealing with a diminishing media, ROI of social media, and crisis/media training.

**DNV and ISO Accreditation Webinar:** A tri-regional educational meeting was held on March 8, 2012 for members of NorMet, the Nassau-Suffolk Hospital Council, and the Rochester Hospital Association on the topic of DNV accreditation. The DNV Healthcare accreditation program is called the National Integrated Accreditation for Healthcare Organizations (NIAHO). The NIAHO standards integrate requirements based on the CMS Conditions of Participation with the internationally recognized ISO 9001:2008 Standards for the formation and implementation of the quality management system. DNV is an alternative to other accreditation programs. Web attendants gained insight into the DNV accrediting process and how its management system can be an effective approach to improving processes and performance.

**Language Assistance Coordinators Forum:** This program held April 4, 2012 examined the challenges that hospitals are facing concerning their language assistance programs and compliance with the Joint Commission's existing communication standards and new standards for patient-centered communication. Patient-centered communication standards will be included in the accreditation decision on July 1, 2012.

**Medical Directors Committee:** The group met on Friday, March 2, 2012. Topics discussed included New York State facility-specific reporting on percutaneous coronary intervention cases, physician credentialing, and emergency department specialist coverage.

## *Patient Safety Institute Committee Meetings*

**Surgical Site Infections:**  
May 1, 2012

**Patient Falls:**  
May 4, 2012

**Patient Safety:**  
May 4, 2012

*\*In order that your hospital may enjoy the confidential and privileged nature of these discussions, ONLY staff from the 23 hospitals that have fully executed their Confidentiality and Participation Agreements with the Institute will be permitted to participate in these meetings. Contact Angela Skretta for more information*



400 Stony Brook Court  
Newburgh, New York 12550  
845-562-7520 • Fax: 845-562-0187  
[www.normet.org](http://www.normet.org)