

Special Report: Long Island's Health Care Industry

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The State of our Hospitals

An Island of Opportunity

By Karen Jones

With one out of every four Long Islanders working in some facet of the health care field, the industry spells big business for Nassau and Suffolk counties. The future of health care and how physicians and hospitals approach prevention, diagnosis and treatment will depend on factors such as rapidly shifting demographics, the health care reform bill, "wellness" initiatives and a new medical school set to open its doors in 2011.

A silver lining in an economic downturn that has crippled many small businesses, employees and their families, health care has shown to be one of the few "recession-proof" industries on the Island, says Dr. Pearl M. Kamer, Chief Economist of the Long Island Association. "Between 2000 and 2009, the health care sector, such as hospitals, ambulatory care services, doctors, dentists, therapists, nurses and residential care facilities, added 30,500 jobs. That is a gain of 25% with payrolls increasing by 69%."

She adds that by the middle of 2009, the health care industry employed more than 154,000 people, generating payrolls of nearly \$7.9 billion. Businesses that support health care accounted for another 183,000 jobs with a whopping \$11.4 billion payroll. The combination of the two accounts for 28% of all jobs on Long Island, says Dr. Kamer.

With 24 hospitals offering a full range of patient services, health care is considered excellent on Long Island and "contributes to the quality of life here," says Dr. Kamer. She believes that demographics are key. "I think it is fair to say that we have a high percentage of health care

workers in part because we have an aging population that has a need for it and a fairly affluent population that is insured and able to access it.”

Given the diverse demographics and economics across the Island, she also observes that “quite a few uninsured people are using the emergency room for primary care. That is hurting hospital finances.”

Kevin Dahill, President and CEO of the Nassau Suffolk Hospital Council, which represents Long Island’s hospitals, concurs: “It’s a little schizophrenic, to use a medical term. On the positive side, health care continues to thrive in a recession, but a lot of people have lost their jobs and insurance. So they have taken to using the ER as a means of accessing the system.” Many are not true emergencies, says Dahill, adding “Quite frankly the things they come in for could be handled in a doctor’s office such as colds, kids with ear infections, etc.”

Victor Yick, Chief Strategy Officer at Stony Brook University Medical Center says he too has seen a significant increase in ER traffic. “Because of the economic downturn, we were concerned that fewer patients would come to us, but like most hospitals on Long Island, we had a surge of people coming through the emergency room from last summer on.” He offers that hospitals operate much better with planned admissions rather than “everyone crashing through the ER.” Still, he confirms they do their best to accommodate all.

Stony Brook also has seen more government-paid patients coming in, says Yick, which also means less money for the hospital. He advises that the hospital industry as a whole needs to “learn how to take care of more patients more effectively by lowering costs and improving efficiency.”

Theoretically, improved efficiency should be jumpstarted by the newly-passed health care reform bill, though opinions vary as to its trickle-down effect. “The positive part of the bill is having almost universal coverage. That is good from the human point of view,” says Michael Dowling, President and CEO of North Shore-LIJ Health System. “That is also good for the hospitals. If you come to a hospital and have some insurance, we don’t have to worry too much about not getting paid.” However, he thinks people should lower their expectations a bit. “The devil is in the details” with this tome-like legislation, advises Dowling. “Too many people are jumping to the conclusion that this will be phenomenally successful. We have to be careful. It is going to take ten years to implement and a lot can happen in ten years.”

Because there are no mandates in the current legislation that would force the industry to control costs, Dr. Kamer calls the bill “health insurance reform, not health care reform.” Dowling takes another view. “Health care costs are driven by two things—technology and behavior. For technology, our ability to come up with new innovations is a key driver. We can do knee surgery today we could not do before. We can do brain surgery today we could not do before. Should we retard the development of new cures? I don’t think so. The second driver is behavior and lifestyle. We like to eat too many processed foods. We are too sedentary. We smoke and we don’t like to exercise. In many ways, providers have to respond to that. Remember, people come into the hospital with their problems, we do not go out and get them. Many illnesses are due to their own behaviors. We do not like to be told this.”

Helping educate Long Island communities about wellness techniques and preventive behavior is a major initiative at many area hospitals including Southampton Hospital says Marsha Kenny, the hospital's Director of Marketing and Public Affairs. "We recruit directors from our medical staff and other clinical providers to lecture year-round about issues of interest to the community such as diabetes, nutrition, obesity and breast cancer." The hospital opened a comprehensive breast cancer center in 2009 to respond to the high rates of breast cancer on the Island.

Kenny offers that the East End is "a unique geographical area" and people living way out east are pretty much isolated from immediate health care. "The South Fork extends from Westhampton to Montauk. There is a medical practice in Montauk, but any emergency such as a stroke or heart attack, they are brought to us. Still, it's a long ride."

As all year-round residents know, the population in the Hamptons triples during the summer as tourists and seasonal revelers come to drink in the fun and sun. However, cost of living inhibits many new physicians from setting up practice there. "The cost of living out here means we have a shortage of physicians," says Kenny. "A lot of doctors on the East End are close to retirement and a lot have left because the cost of practicing out here is more than they can handle. The malpractice rates are sky high in New York State."

Though the cost of setting up shop may seem daunting to new physicians, Dowling is convinced newcomers will quickly learn to "love Long Island" once they settle in. "Sometimes we beat ourselves up by just looking at the negatives. I think people love the facilities here. They love access to the beaches and New York City." Spoken like a true advocate, he has a stake in the appeal of this part of the Northeast. North Shore-LIJ is partnering with Hofstra University to open The Hofstra University School of Medicine, the first medical school on Long Island since Stony Brook opened in 1971. "It will raise the brand of the entire region by having another medical school," says Dowling.

With a target date of Fall 2011, the school is expected to have an economic impact exceeding \$100 million per year once it becomes fully operational. Dr. Lawrence G. Smith, Dean of the medical school, says the impact on the local community could be significant. "For the medical school to be a success, it will have to positively influence the health of the entire community surrounding us. The new model of excellent doctoring is that a physician is concerned not only with the individual patients who seek out his or her care but also the health of the community surrounding their individual practices. This dual responsibility will be taught right from the beginning of the Medical School and will be emphasized in every clinical experience. This will hopefully make students eager to be patient caregivers, to take on the responsibility of being someone's personal physician, and as such, be more drawn to fields such as primary care, which we are in desperate need in our community."

The school could join the ranks of other prestigious institutions and research facilities that have put Long Island on the national radar screen. "Cold Spring Harbor Laboratory, Stony Brook and Brookhaven National Laboratory, plus North Shore-LIJ are all well recognized no matter where you go. They constantly rank amongst the upper quarter of our national research centers in many of their programs," says Dr. Georges C. Benjamin, Executive Director of the American Public

Health Association, which represents a broad array of health providers, educators, environmentalists, policy makers and officials.

Even though research is a key component to the future of health care and bestows recognition on the institutions that excel in it, the “linkage” between research and community is also key, says Dr. Benjamin. “Health care research is a high impact development activity. When a research organization gets a grant from the National Institute of Health, it provides economic development in the community and everyone from physicians and nurses to those that work in the laundry benefit from it.”

After World War II, the surge to settle in suburbia was a major factor in the development of Long Island. That generation, and the baby boomers who followed, are now aging, which is going to create yet another medical challenge for hospitals and physicians, says Joseph Conte, Executive Vice President for Catholic Health Services of Long Island, which runs a number of health care facilities on the Island including Mercy Medical Center in Rockville Centre. “The demographics are changing on Long Island. There is an older aging population in place and the demand for care of chronic conditions such as diabetes, pulmonary diseases, cancer, is going to be dramatically increased over the next few years.”

Catholic Health Services is a faith-based organization that advocates for the poor and underserved and serves the common good, says Conte. “Consistent with the law and our orientation, we do not distinguish between citizens or the undocumented. If there is a need, it is met.”

As to the future, NSHC’s Dahill is optimistic. “By virtue of the fact that we are an Island creates an opportunity. We want to work very hard to make sure we are providing every level of care here so that patients feel they do not have to leave to seek care elsewhere, such as New York City. This is why we are so excited about the new medical school at Hofstra. When you bring about a new academic facility that is going to have research capabilities, that ultimately leads to bringing additional faculty to the Island.” He adds that a “sound and modern” infrastructure of education and health care works for everyone and is a great incentive to attract top professionals and hopefully more businesses. “We need to recruit the best talent.”

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A Long Island native, Karen Jones, is a freelance lifestyles journalist who has covered travel, food, technology, arts & entertainment and non-profits for over ten years. Her byline has appeared in The New York Times, The New York Daily News, Newsday, Super Lawyers, Parade Magazine, Reader's Digest and more.