



NEW YORK STATE'S HOSPITALS:

TRANSFORMING LIVES AND COMMUNITIES

2010 HOSPITAL ECONOMIC AND
COMMUNITY BENEFIT REPORT



Healthcare Association
of New York State

SEPTEMBER 2010



New York State’s hospitals are vital to the economy and quality of life of communities throughout the state, but their ability to continue to provide needed care is threatened by an alarming array of forces.

Our hospitals are agents of positive change in the lives of people and communities, bringing new life into the world, saving lives with “24/7” emergency care, and offering hope and healing through compassionate, high-quality care. Hospitals reach out to the community to offer preventive care, screenings, and education that transforms the lives of people who might not otherwise have contact with the health care system. New York’s hospitals are the front line of community preparedness for natural and man-made disasters. Hospitals transform communities by driving commerce, attracting businesses, hiring people at all skill levels, and providing career ladders that enable people to improve their lives. New York’s hospitals contribute nearly \$108 billion to the economy annually.

However, our hospitals are in crisis. Reductions in government reimbursement for the care hospitals provide to the neediest in our communities, insurance company efforts to deny or delay payment for care, onerous and duplicative regulations, skyrocketing medical malpractice costs, and the effects of the recession are squeezing New York’s hospitals, forcing them to lay off workers and eliminate needed services.

The weakened financial condition of our health care system leaves providers without the funds necessary to build infrastructure and manpower for the future. It also hinders providers’ ability to implement the profound changes that health care reform is bringing and deliver on the promise of health care for all through expanded coverage.

Some hospitals have already succumbed to these forces, closing down altogether, leaving communities scrambling to find needed health care services.

To protect and strengthen our hospitals and health systems, we must spread the word about the key, irreplaceable role they play in building healthy communities and a strong economy. *HANYS’ 2010 Hospital Economic and Community Benefit Report* illustrates why New York State’s hospitals and health systems are so important to our communities and the state as a whole, and why investment in our health care system is necessary.

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COMMUNITY AND ECONOMIC BENEFIT

New York's hospitals provide health care services every day around the clock, offering not only needed medical interventions and life-saving emergency care, but also hope and comfort to millions of New Yorkers each year.

Hospitals transform lives, and not just the lives of patients who are admitted to the hospital. Hospitals reach out beyond their walls to improve the health of communities through many programs that aim to foster healthy lifestyles; detect, prevent, and control disease; and educate and empower members of the community to take a leadership role in improving their own health.

Hospitals hire people from the community at all skill levels. Many hospitals offer career ladders and training programs that enable members of the community to attain new levels of education and improve their incomes and lives. The economy and community benefit from the opportunities hospitals offer to employees to build their skills, achieve a better standard of living, and follow their dreams.

Hospitals make a major contribution to the local and state economy through expenditures for payroll, supplies, utilities, etc. This economic impact is magnified by employee spending and tax contributions. Using economic modeling software developed by the U.S. Department of Commerce, Bureau of Economic Analysis, the Healthcare Association of New York State (HANYS) calculated the full economic value of hospitals in New York. HANYS' analysis identifies and measures the direct involvement of hospitals in the local economy and demonstrates the "ripple" effect of this involvement, contributing to the overall vitality of the economy (see Technical Addendum). HANYS' analysis also shows the significance of hospitals as large purchasers of goods and services; the tax collections they contribute to the state and local economies; and the community benefit they provide to create safe, stable, and healthy communities.

HANYS' analysis finds that New York's hospitals generate about \$108 billion for state and local economies each year—about 9.4% of the Gross State Product.

HANYS estimates hospitals' impact on the local economy based on regional multipliers from the Regional Input-Output Modeling System (RIMS II). RIMS II is a model developed by the Bureau of Economic Analysis of the U.S. Department of Commerce that provides an accounting of "inputs" purchased and "outputs" sold by industry, by region. The spending of one industry will have several rounds of "ripple" influence throughout the local economy—this is known as the multiplier effect. RIMS II regional multipliers measure both the direct and indirect impact on the regional economy from a specific industry.

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There are multipliers for output (total economic impact), earnings, and employment. HANYS used all three multipliers to estimate the impact of hospitals on the economy, job creation, and tax contributions. These multipliers are applied to hospital spending and employment data from the Institutional Cost Report (ICR) to derive HANYS' estimates. If 2008 ICR data were unavailable for a hospital, the most recent ICR data available were used and updates were requested from the facility. New York State's hospitals, as a matter of mission, go above and beyond the delivery of core health care services, providing countless services to ensure healthier children and families, safer environments, earlier detection of disease, and enhanced access to health care.

HOSPITALS' TOTAL IMPACT ON NEW YORK STATE'S ECONOMY	Direct Annual Impact on Economy of Hospitals and Their Employees	Direct and Indirect Annual Impact With "Ripple" Effect on Economy
<u>Economic Impact</u> (minus taxes)		
Full-time Equivalent Employees	370,140	686,610
Payroll	\$30,176,896,000	\$61,959,216,000
Supply Purchases	\$19,274,845,000	\$39,575,131,000
Capital Purchases	\$3,101,239,000	\$6,367,460,000
	<u>\$52,552,980,000</u>	<u>\$107,901,807,000</u>
<u>Impact on State and Local Taxes</u>		
State Income Tax	\$1,381,306,000	\$2,332,166,000
Local Income Tax	\$533,261,000	\$774,714,000
State Sales Tax	\$505,104,000	\$806,695,000
Local Sales Tax	\$549,266,000	\$878,388,000
	<u>\$2,968,937,000</u>	<u>\$4,791,963,000</u>

These data include hospital-based nursing home, home care, and other services, where applicable.

FACTS

HOSPITALS CARE FOR THEIR COMMUNITIES

Through screenings, outreach, prevention, and other community health programs outlined in their Community Service Plans, hospitals save individuals and their communities millions of dollars in treatment costs and lost earnings.

Communities rely on hospitals for much more than medical care and services. New York's hospitals are the lifelines of their communities and are integral to community emergency preparedness and public health infrastructure. Community expectations of hospitals have changed since the September 11, 2001 terrorist attacks—communities see hospitals as places of refuge that provide food, shelter, and information in times of crisis.

New York's hospitals are the leading source of community and public health care outreach. They invest countless dollars in community wellness, disease prevention, and outreach programs. Through screening programs, hospitals are able to detect medical conditions earlier in the population, lowering the cost of treatment. The state's hospitals continuously try to find innovative ways to intervene and improve the health care status of under-served populations.

HOSPITALS ARE ECONOMIC ENGINES

Hospitals are economic engines in their communities not only because of the jobs they provide, but because accessible health care is necessary for productivity. A strong and convenient health care system is important to retirees, whose spending can be a significant source of revenue for the local economy, and just as important to young families who are a source of future growth and vitality.

Hospitals create a safe and comfortable environment and serve as a stimulus for new businesses. They attract other businesses to the community, including retail outlets, banks, grocery stores, family restaurants, tourism, and drug stores. When businesses look to relocate, they typically consider four factors: a strong economic base, good schools, accessible emergency care, and quality health care.

Hospitals and health systems are critical components of any economic development strategy because they offer jobs of all skill and salary levels, they serve as a magnet to attract more health care businesses, and there is reliable and growing demand for health care services.

Each year, New York's hospitals:

- treat 2.6 million inpatients;
- provide 47.1 million outpatient visits, including 7.9 million emergency room visits;
- provide \$1.9 billion in uncompensated care and provide an array of health and service programs, many at no charge to their communities; and
- deliver more than 262,000 babies.

(Source: 2008 ICR Data and estimated indigent care pool distributions, DOH)

Every day, in communities throughout the state, New York's hospitals are touching lives—in ways the public might not expect.

In addition to being among the largest employers in their communities, hospitals' purchasing patterns provide important secondary income and job benefits to the local economy. Hospitals build relationships with vendors and other businesses in the community.

EMPLOYMENT

New York's hospitals employ more than 370,140 full-time equivalent (FTE) workers, with a total payroll of more than \$30 billion in direct wages and fringe benefits per year.

Dollars earned by hospital employees and spent on groceries, clothing, mortgage payments, rent, etc., generate nearly \$62 billion in economic activity for local economies.

Hospital payroll expenditures generate and support jobs throughout the economy. All together, hospitals support some 686,610 jobs in New York—nearly twice the number directly employed. These job holders pay \$4.8 billion in state and local income and sales taxes and contribute nearly \$108 billion to the economy.

PURCHASING

New York hospitals spend about \$19.3 billion per year on the goods and services they need to provide health care—for example, medical supplies, electricity for buildings, and food for patients. Funds spent to buy goods and services flow from the hospital to vendors and businesses and then ripple throughout the economy.

This spending on goods and services generates \$39.6 billion in the economy each year.

In 2008, New York hospitals spent \$3.1 billion on buildings and equipment. This capital spending generates nearly \$6.4 billion in the economy each year.

The dollars hospitals spend in New York generate approximately \$108 billion throughout New York's economy and \$4.8 billion in state and local personal income and sales taxes.

NEW YORK STATE'S
HOSPITALS PROVIDE
OTHER IMPORTANT
ECONOMIC BENEFITS

Medical Education: New York's 11 academic medical centers and 95 teaching hospitals train thousands of doctors—about 15% of the nation's medical residents—advance state-of-the-art medicine, and provide free care to New York's most vulnerable residents.

Nursing Education: Nurse and nurse aide education programs serve a wide variety of people in the community, including those struggling to pull themselves out of poverty and dependence on public assistance.

Research and Grants: New York's hospitals are an integral part of medical research throughout the state. Research programs and grants at hospitals statewide draw significant funding from sources outside the community, and often outside the state.

CONCLUSION

In communities across New York, hospitals are both a reassuring presence and a powerful economic engine.

The public's demand for high-quality hospital and health care services will continue to grow as "baby boomers" age and as federal health care reform expands insurance coverage. Hospitals are a key ingredient to New York's quality of life, keeping communities healthy and vibrant while contributing to the economy. Taxes paid by hospital employees support local schools, police and fire departments, parks, and community centers. When there are cutbacks in health care, the negative effects ripple throughout local economies.

HANYS' analysis provides strong evidence of the significant economic and community benefit hospitals provide to their communities, and to the entire state. To continue to attract industrial firms, businesses, retirees, and families to New York State, it is crucial to protect providers of high-quality health care services and ensure access to care.

Because hospitals are so vital to New York State's economy and quality of life, it is troubling that many are financially precarious, unable to invest in needed upgrades and technology, and forced to cut jobs and services. Repeated government reductions in reimbursement for care, along with a faltering economy, burdensome regulations, and managed care tactics are taking New York's hospitals to the brink of collapse.

It is critical that our state's legislators, members of Congress, and community leaders recognize that hospitals are instrumental in supporting state and local economies, and that it is necessary to invest in and protect our state's health care system.

From rural communities to inner cities, hospitals are a vital part of life in New York State. Every minute of every day, thousands of people throughout New York receive care in our hospitals.

INFORMATION ABOUT THESE COMMUNITY HEALTH PROGRAMS WAS OBTAINED IN SUBMISSIONS FOR HANYS' 2009 COMMUNITY HEALTH IMPROVEMENT AWARD. EACH PROGRAM WAS DEVELOPED TO MEET SPECIFIC COMMUNITY NEEDS THAT WOULD NOT OTHERWISE BE MET, AND DEMONSTRATES THE ONGOING COMMITMENT OF NEW YORK STATE'S HOSPITALS TO MAKING THE STATE A BETTER AND HEALTHIER PLACE TO LIVE AND WORK.

Albany Medical Center's Sexual Assault Forensic Examiner (SAFE) Program

trains health care providers in the best techniques and approaches for delivering compassionate and effective care to victims of sexual assault and for conducting professional forensic examinations on these patients.

Albany Memorial Hospital created its **Community Wellness Initiative** to provide an ongoing series of community education programs to raise awareness of cardiovascular disease and diabetes, with a special focus on the link between them.

Alice Hyde Medical Center in Malone began its **Franklin County First Response Agency (FC-FRA)** to provide a New York State-certified basic emergency medical technician to volunteer fire department-based ambulance units in northern Franklin County. Response times of ambulances decreased due to the availability of FC-FRA's emergency medical technician, and the community expressed appreciation for receiving the service at no cost.

Bassett Healthcare in Cooperstown offers the **Kick-Start Childhood Obesity Program**, which identifies children between the ages of seven and 13 who are at risk from being overweight and/or obese, and provides them with a free weight intervention program that includes nutrition education, exercise, and behavior modification.

Bellevue Hospital Center in New York City offers the multi-faceted **Improving Heart Failure Care With the Implementation of Care Management Model** that involves intensive in-hospital care enhancements combined with a robust system of post-discharge support. The program reduced emergency visits by 40%, readmissions by 41%, readmission days by 36%, admissions by 49%, and admission days by 48% of enrolled heart failure patients.

Brookdale University Hospital and Medical Center in Brooklyn offers **The Healthy Families Program**, an early prevention program that provides an intensive, voluntary, home visiting service focused on promoting healthy parent-child interaction and effective parent-child bonding; promoting positive child health and development; and enhancing overall family functioning. Data show that mental health problems, stress/emotional issues, homeless/inadequate



housing, and social isolation/inadequate social support were reduced significantly through this program.

Catholic Health System of Western New York's It Takes a Brain to Save a Brain—Stroke Awareness Program for Middle School Children educates middle-school students on stroke risk factors and prevention, how to recognize the warning signs of stroke among older relatives, and how to respond appropriately. Ten out of 12 Catholic schools participated in the program—819 children and 118 adults.

Cayuga Medical Center at Ithaca's Urgent Rx Program provides free prescriptions and outreach follow-up to people without health insurance who have an urgent health need. Since its inception in 2006, Urgent Rx has grown steadily and has provided 1,500 vouchers for 2,600 prescriptions. More than a third (36%) of participants reported using the referral information to access health-related services, and nearly a quarter (23%) reported that they have health insurance as a result of the program.

Champlain Valley Physician's Hospital Medical Center's North Country Diabetes Project builds upon ongoing community collaboration to increase access to diabetes care through the development of a physician referral network, establishment of an American Diabetes Association-recognized diabetes self-management education program, and expanding the availability of medical nutrition therapy. The project reduced the impact that diabetes has on the community by increasing awareness, improving health outcomes, and enhancing patient quality of life.

Claxton-Hepburn Medical Center's Let's Clear the Air program addresses tobacco use within the Medical Center and community. The program led to implementation of a smoke-free campus in 2006, and patients who express an interest in quitting smoking are given access to available resources including a smoking cessation specialist.

Clifton Springs Hospital and Clinic in Ogdensburg designed the **Total Joint Replacement Program** to improve patient satisfaction by enhancing the traditional hospital experience and focusing on a wellness approach to recovery. It also provides basic educational materials that set realistic expectations for patients. Ninety-nine percent of all patients attended the pre-operative education class prior to surgery. The program saw an overall increase in total joint replacement patient volume by 32%, with 67% of these patients discharged directly to home from the hospital.

Columbia Memorial Hospital in Hudson offers the **Preventing Obesity Program** to improve collaboration with the local Healthy Heart Coalition and other





organizations and schools to promote exercise and nutrition education in after-school programs, community events, and health fairs. The educational presentations provided by two local cardiologists attracted 600 participants. More than 1,300 pedometers were provided for community residents of all ages in a variety of settings.

Cortland Regional Medical Center's (CRMC) Telemedicine Program collaborated with **SUNY Upstate Medical University** in Syracuse to offer the Cortland region access to prompt, effective stroke and neurological care. Forty-five Cortland residents received neurology consults via telemedicine in CRMC's emergency department. Since the program's implementation, 27 patients with stroke diagnoses were admitted to CRMC for acute care through the emergency department.

Eastern Long Island Hospital developed the **Geriatric Mental Health Integration Project** to improve access to mental health services and screening, assist health providers with patient mental health needs via assessment and linkage, promote local residents' independent living and sense of self-sufficiency, increase the integration of physical and mental health systems, and decrease hospitalization and deterioration of physical health through early intervention. The success of the program resulted in the creation of a Geriatric Center of Excellence to serve seniors' health care needs.

Erie County Medical Center designed **The Focus on Health Series** to address a variety of health and wellness needs through an array of educational and outreach programs. The series has been enormously successful, with more than 55 events held in 2008.

Ellis Hospital's Unification and Restructuring Program merged the existing Schenectady hospitals to achieve fiscal stability, retain important health care jobs in the community, rationalize bed capacity, minimize duplication of services and capital investment, and enhance its viability. Having started with three distinct, competing hospitals struggling to survive financially, Schenectady now has a unified hospital system that is financially stable.

Good Samaritan Hospital Medical Center's To Your Health Community Lectures Series offers the West Islip community seminars focusing on health concerns, services, and programs, and provides free cholesterol/glucose/blood pressure screenings on a regular basis. During the first two years, the community lecture series reached more than 400 people.

Harlem Hospital Center's Healthy Eating and Living program is a unique collaborative of elected officials, health care organizations, the local Chamber of Commerce and its business members, educational institutions, community

sports and recreation organizations, and media partners, working together to reduce the incidence of obesity and obesity-related diseases in Harlem. The Oral Health Walk event, providing oral cancer and general dental screenings, drew 1,000 participants and the Family Walk-a-thon attracted more than 2,000 walkers.

The New York City Health and Hospitals Corporation/Woodhull Medical and Mental Health Center Geriatric Outreach Program provides health education, prevention, and psycho-social support services to the elderly in comfortable and familiar surroundings. The program partnered with 36 senior centers and housing developments to ensure access to health education and prevention services, and provided 199 health screenings that reached 4,852 seniors and resulted in 802 referrals to the hospital. The program provided 133 educational events that reached 5,129 seniors and resulted in 422 referrals.

The Long Island Health Network Home Care Agencies' Promoting the Continuum of Care through Telehealth used the home health agencies within the Long Island Health Network to create a telehealth project to decrease the number of emergency room visits and re-hospitalizations. The expansion of the telehealth program, from less than seven admissions per quarter for the first two years of the program to 26 per quarter for the last six months of 2008, substantially decreased 30-day readmissions. For example, for the last six months of 2007, the overall chronic obstructive pulmonary disease readmission rate was 26.1%. During the last six months of 2008, it dropped to 19.7%.



Lutheran Healthcare in Brooklyn developed the **Shoot for Better Health Program** in response to the rising rates of pediatric diabetes and obesity in the patient population and a confluence of risk factors that portended a crisis in the service area. This program encourages students to follow the “5-2-1-0” wellness model developed by the American Academy of Pediatrics. The model calls for children to eat five or more fruits and vegetables daily, cut daily screen time (TV, computer, video games, etc.) to two hours or less, participate in at least one hour of moderate physical activity every day, and restrict soda and sugar-sweetened drinks. The initiative directly affected 4,940 students during the school year.

Mount St. Mary's Hospital/Catholic IPA WNY in Lewiston developed its **Office-Based Care Coordination Program** to improve the care of patients with chronic health conditions in the clinical office setting. Early results show improvement in practice adherence to evidence-based medicine, high levels of participant satisfaction, and alignment with the patient-centered medical home model.

New York Downtown Hospital's Chinese Community Partnership for Health offers preventive medicine and health education programs to the Chinese com-



munity, especially to elderly residents and to newly arrived immigrants who are not yet comfortable with the English language or the American health care system. The program revolutionized the delivery of health care to New York's Chinese community. Its success in reaching, detecting, and preventing chronic disease has helped more than 140,000 people in the Chinese community.

North Bronx Healthcare Network developed the **Harvest Home Farmers Market Program** to create a hospital-based farmers market to provide high-quality, regionally grown, and reasonably-priced produce, coupled with an engaging and informative nutritional education program and health screenings for the community. Consumer demand for the market resulted in an extension of the market season. Approximately 1,500 people attend the market each week. A healthy nutrition/health education and screening program was developed to enhance outreach at each market. In the 2008 season, 4,450 people received nutrition education and counseling, 833 had blood pressure screening/counseling, 110 received smoking cessation counseling and nicotine patches, 94 obtained domestic violence information, 83 received medication safety information and counseling, and 51 received influenza shots.

North Shore-Long Island Jewish Health System's Rosen Family Wellness Center provides education regarding behavioral health issues during pre-deployment, deployment, and post-deployment and crisis counseling for military personnel and their families. The Rosen Wellness Center also develops educational materials for dissemination to prospective support and treatment providers. Since its establishment in 2007, the Rosen Center has provided no-cost confidential mental health treatment to more than 75 veterans and their family members and 39 law enforcement personnel and their families; and has conducted nearly 1,660 sessions of individual, couples, and family therapy.

Nicholas H. Noyes Memorial Hospital in Dansville created the **Seniors Get Moving Program** to highlight the importance of exercise and increased physical activity for the senior population and to get seniors moving. The entire program averages 50 seniors each week and attendance remains consistent.

Nyack Hospital's Lose to Win Weight Loss Program is an eight-week program for adults interested in losing weight, improving their nutritional intake, and learning to increase their physical activity safely. This community-based program is led by facilitators from various organizations who have attended a free training course at Nyack Hospital. The program teaches how to incorporate an individual's existing ethnic, cultural, and religious food preferences into healthier meal plans. In 2008, the average weight loss per participant was 5.2 pounds. All participants increased fruit and vegetable servings per day, and increased minutes of physical activity per week.

Phelps Memorial Hospital Center's Hispanic Health Day provides the Hispanic community in the Sleepy Hollow community a wealth of basic medical information on a variety of health topics, using a practical and directed delivery methodology. More than 100 people were screened for hypertension, blood glucose levels, breast abnormalities, dental health, and depression. Families were able to sign up for medical insurance, glucometers were provided to people with elevated blood sugars, and there was a referral source for those in need of mammography and/or other medical conditions.

Roswell Park Cancer Institute's The Witness Project is a culturally competent, community-based breast and cervical cancer education program designed to meet the specific cultural, educational, knowledge, and learning needs of under-served African American women in the Buffalo area. Outcomes include: from 2006-2007, the program conducted 72 programs and educated 886 women. In 2008, 68 programs educated 653 women. The Witness Project navigated 205 women to mammography, 213 for clinical breast exams, and 50 for Pap tests.



Saint Francis Hospital and Health Centers/Saint Francis Home Care Services in Poughkeepsie created the **Annual Conference on Caregiving: Caring for the Caregiver** to bring awareness to caregivers and any person who provides care to a loved one, and provide assistance on how to understand and meet the needs of those they care for through offering information of various products, resources, and services that are available in the community.

Samaritan Hospital's No Woman Left Behind—Navigating the Difficult World of Breast Cancer Education, Screening, and Treatment is an education, outreach, and navigation program designed to give medically under-served women in Troy and surrounding communities the skills they need to get the health care they deserve. The program has consistently reached more than 900 women yearly with breast cancer education, and more than 100 women each year with breast cancer screening at no cost, with digital mammography and/or breast ultrasound.

Seton Health in Troy created the **Defy Diabetes Program**, a comprehensive strategy for diabetes detection and management in adults that is improving public health, engaging primary care practitioners, and reducing medical costs in six low-income communities in three counties. The program provides church talks, screenings, and health fairs in the six targeted parishes. A Healthy Living Class curriculum was developed and classes are delivered within the faith communities.

Sound Shore Medical Center of Westchester's Diabetes Education Program helps patients develop the necessary knowledge and skills for successful



self-management and promotes professional education and community and public awareness of diabetes. Outcomes include: 197 patients (excluding women with gestational diabetes) entered the program in 2008; of these, 146 received comprehensive education.

South Nassau Communities Hospital created the **Pediatric Asthma Management Program: Changing Community Outcomes** to decrease the rate of asthma-related emergency room visits, decrease the rate of hospital readmissions for asthma, and decrease missed school days for pediatric asthma patients of school age. Program outcomes include: missed school days decreased 89.7% (from 29 days to 3 days), emergency department visits for asthma decreased 92.3% (from 39 to 3), and hospital admissions for asthma decreased 95.5% (from 22 to 1).

South Nassau Communities Hospital Home Health Agency developed the **Fall Prevention: A Community Outreach Initiative** to increase awareness and access to fall prevention programs in the community for vulnerable populations. The program also improved identification processes and collaboration with community partners and expanded services to high-risk community members. From 2006 through 2008, 684 people were identified to be at a high risk for falls and were referred to the fall prevention program. Of these, 274 were referred from the community. After receiving the program interventions, 249 of the community participants, or 91%, did not fall.

Southern Tier Health Care System designed the **Southern Tier Child Advocacy Center and Sexual Assault Forensic Examiner Program** to promote justice, foster healing, and empower victims of child abuse and sexual abuse. In its first year, the Center helped 186 abused children and their families. To date, the Center has helped more than 240 children from Cattaraugus and Allegany counties. From September 2008 to February 2009, the program conducted 13 examinations.

St. Elizabeth Medical Center in Utica created its **Facilitated Enrollment Program** to contact 100% of the self-pay population and initiate applications for all those eligible for services. In 2008, the program's account specialists saw more than double the number of accounts (compared to 2007). The program also saw a 43% increase in Medicaid applications.

St. Luke's Cornwall Hospital's Teddy Bear Clinic was developed by emergency nurses and physicians to improve outcomes for pre-school and grade-school children in the Newburgh area who go to the emergency department. By alleviating children's fear of the emergency department, providers are able to provide care faster to a child who is less fearful and anxious.

St. Mary's Hospital at Amsterdam's Health Care that Leaves No One Behind

Program assists individuals and families in enrolling in state-sponsored health insurance programs such as Family Health Plus, Child Health Plus, and Medicaid. Since the program's inception in 2003, nearly 2,000 uninsured individuals have been enrolled in health insurance. The program outreaches to nearly 1,000 and enrolls 500 individuals annually in health insurance in this service area. Additionally, local "Cover the Uninsured Events" have reached nearly 300 people since 2006.

St. Peter's Hospital in Albany developed the **Tobacco Recovery Coalition of the Capital District** to establish tobacco-free facilities and grounds and to encourage abstinence from tobacco products for the community. The Coalition provided three annual conferences that educated more than 250 participants. The program also was able to achieve tobacco-free campuses for 14 facilities.

Saint Vincent Catholic Medical Centers in New York City created the **Homeless Women's Health Initiative** to enable homeless women to use the health care system effectively for management of preventive care as well as illness, while involving patients directly in the health plan and decision-making process. Outcomes of this program include: 1,042 homeless women received services at the shelter, 248 received Pap tests, and 331 were referred for mammograms. Additionally, 897 women received tuberculosis skin testing, and 840 received complete history and physical exams. (St. Vincent Catholic Medical Centers closed in 2010.)

St. James Mercy Health System's Community Health Awareness Fair brought together health care agencies, community organizations, and service lines for a day of education, exhibits, and screenings offered free of charge to community members. Two hundred residents attended the two Community Health Awareness Fairs and, consequently, the health system developed and hosted 15 free seminars in 2008 and early 2009 targeting specific chronic diseases.

Staten Island University Hospital in Hornell developed the **Breastfeeding Initiative** to establish a data collection system to track rates and statistics of breastfeeding for research purposes. The prenatal education programs were revamped based on current research and knowledge, and are marketed to prenatal health care providers. Fifteen registered nurses have been trained to be Certified Breastfeeding Consultants, outreach to outpatient clinics and private offices to provide support to encourage exclusive breastfeeding for the first six months has begun, and computerized data input for breastfeeding information was implemented.

SUNY Downstate Medical Center and University Hospital of Brooklyn developed the **Center for Community Health Promotion and Wellness** to promote wellness,



prevention of illness, early detection, and appropriate access to care to address health disparities. This past year, the Center has seen 13,000 community members, participated in more than 100 community health events, provided numerous referrals, and followed up with many community members.

SUNY Upstate Medical University and University Hospital's Fit Families, The Healthy Lifestyle Family Program assists overweight children and their families in the Syracuse region by offering a family-centered approach to healthy eating and physical activity. Program outcomes suggested that the children enrolled in Fit Families had a decreased body mass index (BMI) change compared to the children who were not enrolled. The children enrolled in the program had an average BMI increase of 0.0294 units/month. The children not enrolled in the program had an average BMI increase of 0.1191 units/month.



Thompson Health's Get Up! Fuel Up! Program combats the rising prevalence of childhood obesity and its associated health risks by helping children develop a firm sense of self-esteem and a savvy understanding of media/societal influences. The program also helps schools in the Canandaigua region recognize the clear connection between the health of their students and the students' academic success. By the end of the 2008 school year, 1,640 second through seventh graders in four districts participated in the program. Improvements in nutrition knowledge, media literacy, and self-efficacy in making healthy behavior changes were achieved among these students.

University of Rochester Medical Center's Health-e-Access Telemedicine Network enables health care for children when and where they need it, by providers they know and trust. Health information technology is used to connect the children at these sites to a clinician in the child's own primary care medical practice. Outcomes include: 7,000 telemedicine visits among children in childcare and schools; 96% of telemedicine visits were successfully completed at the child site and did not require a follow-up referral to a primary care practice or emergency department.

Upstate Medical University/University Hospital created **Amaus Health Services** to address a dangerous gap in local (downtown Syracuse) medical care. During 2007-2008, more than 350 Upstate Medical University students volunteered at the clinic, providing more than 1,900 service hours, while two Upstate faculty members volunteered more than 500 hours. They saw 750 people, providing physical examinations, taking histories, prioritizing needs, and paving the way for treatment.

WCA Hospital's Chautauqua County Witness Project is an evidence-based, culturally competent, and faith-based breast and cervical cancer education and

screening program. It is designed to increase the number of African American women who practice regular cancer screening through clinical breast and cervical exams, mammography, and self-breast exam. Outcomes include: 545 women age 20 and older were educated on breast/cervical cancer, 200 women participated in Witness Project programs, and 25 women in need who participated in the Witness Project completed their mammogram and cervical screenings.



Westchester Medical Center's Hudson Valley Shaken Baby Prevention Initiative

educates parents of newborns about normal infant crying, how to deal with it, and the terrible consequences of shaken baby syndrome—before they take their baby home from the hospital. Follow-up interviews were conducted with several hundred parents, and 89% of parents interviewed indicated that they remembered the information about how to calm a crying baby and that shaking was bad.

HANYS BASED ITS ESTIMATES OF HOSPITALS' ECONOMIC BENEFITS TO COMMUNITIES ON THE REGIONAL INPUT-OUTPUT MODELING SYSTEM II (RIMS II) DEVELOPED BY THE U.S. DEPARTMENT OF COMMERCE, BUREAU OF ECONOMIC ANALYSIS (BEA). THIS MODEL CALCULATES THE "RIPPLE" EFFECTS THROUGHOUT THE LOCAL ECONOMY OF ANY ECONOMIC SECTOR'S SPENDING. THIS IS KNOWN AS THE MULTIPLIER EFFECT.

REGIONAL MULTIPLIERS

RIMS II regional multipliers measure both the direct and indirect effects on the regional economy from a specific sector. RIMS II includes multipliers for hospital output, earnings, and employment. HANYS used all three multipliers to estimate the impact of a hospital on its local economy, job creation, and tax contribution.

BEA produces two types of multipliers: direct-effect multipliers and final demand multipliers. The choice of which multiplier to use depends on the availability of data. In general, the direct effect multipliers reflect the regional relationship between output and earnings, while the final demand multipliers reflect the national relationship.

After consultation with BEA, HANYS used the final demand multipliers for output (total economic impact), the direct effect multipliers for employment to ascertain job creation, and the direct effect multiplier for earnings to determine tax contribution.

ECONOMIC REGIONS

Multipliers are available by region and by state (see Table 1, page 18). The choice of the region depends on the purpose of the study. For example, if the user wants to estimate the economic impact of a specific industry in a specific county, the multiplier for the county should be used. If the sector under study buys goods from adjacent counties and a significant percentage of its employees also live in other counties, the true economic impact of that industry can only be measured by using a larger geographic area. Generally, the impact of inter-regional commerce can only be measured by using a larger area.

In deriving the economic impact of a particular region’s hospitals, regional multipliers are applied to hospital data. However, to determine the economic impact for the state as a whole, statewide multipliers are used to capture the impact of inter-regional commerce.

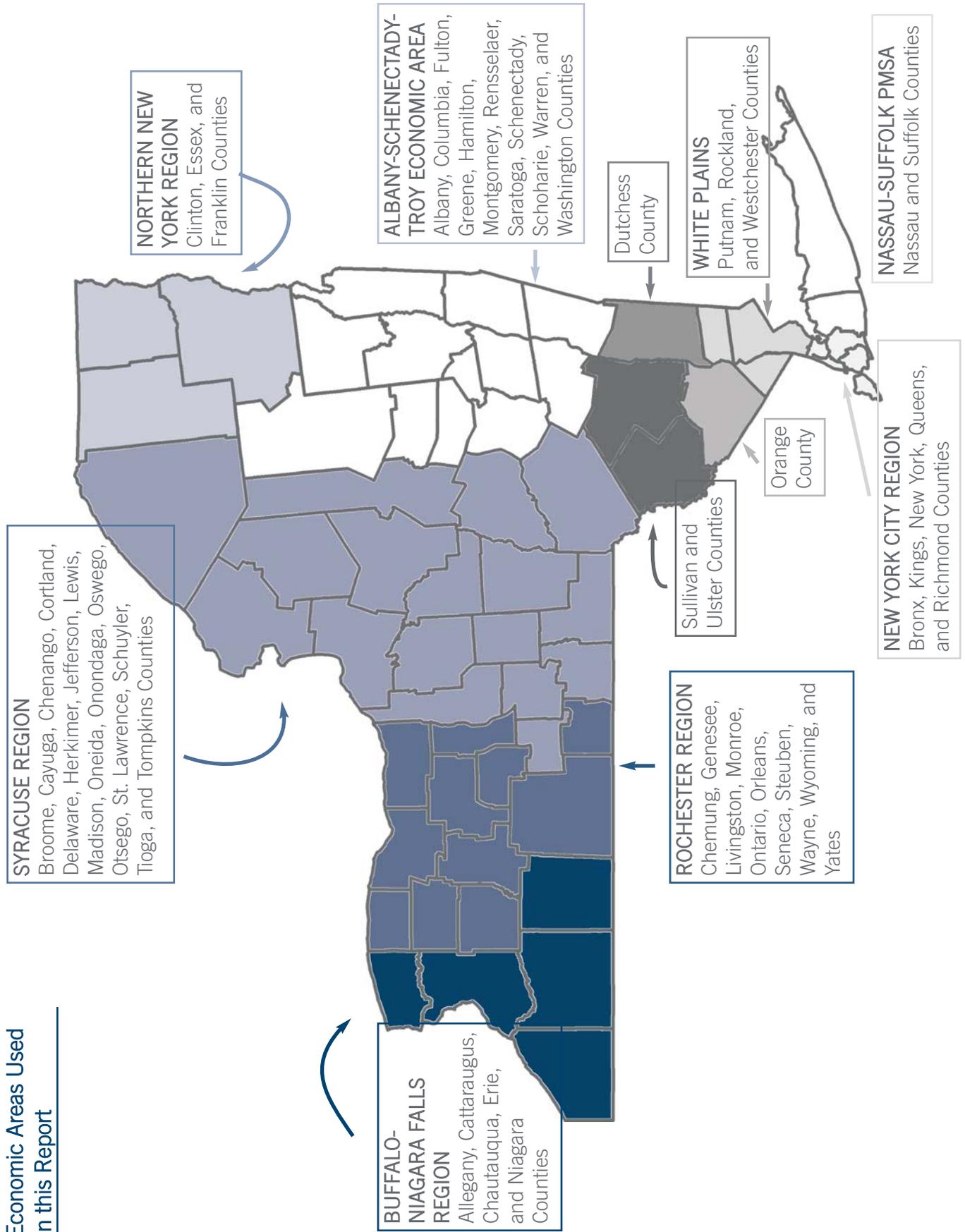
The multipliers used in this study reflect only impacts on counties within New York State and exclude the ripple effect on areas outside the state. Within New York State, HANYS used multipliers for each BEA-defined economic area to estimate each hospital’s impact on its economic area. The 14 downstate counties are divided into several sub-areas to reflect their unique geographic and economic conditions (see map, page 19).

Table 1
RIMS II Multipliers*—Hospitals

ECONOMIC AREA	Final Demand Multipliers	Direct Effect Multipliers	
	Output	Earnings	Employment
New York State	2.0532	1.6656	1.8552
Albany-Schenectady-Troy Economic Area	1.8795	1.6034	1.7944
Buffalo-Niagara Falls Region	2.0569	1.7205	1.9421
Northern New York Region	1.5572	1.3733	1.5304
Dutchess County Primary Metropolitan Statistical Area	1.5371	1.3983	1.6137
Nassau-Suffolk Primary Metropolitan Statistical Area	2.0257	1.7223	1.9374
New York City Region	1.6859	1.4179	1.5616
Orange County	1.6647	1.4653	1.6282
Rochester Region	1.8298	1.5677	1.7640
Sullivan and Ulster Counties	1.6202	1.4176	1.6060
Syracuse Region	1.8559	1.5808	1.7814
White Plains Region	1.8733	1.5522	1.7136

**Note: RIMS II Multipliers are based on year 2007 regional data.*

**Economic Areas Used
in this Report**



HOSPITAL DATA

HANYS applied Institutional Cost Report (ICR) data for hospital total expenditures and jobs to the BEA multipliers to arrive at the impact estimates. ICR data generally lag the economic report by two years.

Since 2009 ICR data were not available from the New York State Department of Health at the time this report was generated, HANYS used 2008 data and asked hospitals to update their data. HANYS sent available ICR data to hospitals for verification. Some hospitals submitted changes and those changes were incorporated into the supporting database.

ESTIMATES ON STATE AND LOCAL TAXES

Personal income and sales taxes are estimated based on information from the New York State Department of Taxation and Finance. The local income tax contribution is estimated for New York City hospitals and those in the City of Yonkers. This tax is levied on both residents and non-resident workers and, due to the limitation of the multipliers, cannot be accurately assessed using this methodology.

For the first time, we are including the impact attributable to the metropolitan commuter transportation mobility tax. This is a new tax, effective March 1, 2009, imposed on certain employers and self-employed individuals who have a business in the metropolitan commuter transportation district. This district includes the counties of New York, Bronx, Kings, Queens, Richmond, Rockland, Nassau, Suffolk, Orange, Putnam, Dutchess, and Westchester.

Dividing the tax collections by the reported adjusted gross income (from income tax returns) derives tax contribution ratios. These ratios are then applied to the earnings from our multiplier study to estimate tax contributions.

