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My Turn

When a hospital is no longer a hospital

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After reading Andrew Oxford's article about the changes taking place at Holy Cross Hospital (HCH) and listening to a presentation by Peter Hofstetter regarding HCH's financial condition, I have become very concerned about health care in Taos.

The changes at Holy Cross will have a negative impact on our quality of life and our economy. When measuring a community's quality of life, having a hospital that provides high quality and broad inpatient and emergency medical services is a key measurement; a quality inpatient hospital is important for retaining and attracting businesses and working age families.

While it is true that health care is shifting toward more efficient outpatient and preventive medicine, it is equally true that demand for quality inpatient care is increasing — demand for health care in general has been increasing since the '90s.

Our nation has record numbers of people reaching the more fragile age of 60 and older driving the demand for inpatient and emergency care and Medicare coverage increases daily. Medicare pays for inpatient and emergency care and this is a growing market.

The amount of unpaid care will reduce as the Affordable Care Act is implemented as more people will have insurance and can pay for inpatient and emergency care.

It would appear that an unacknowledged and substantial impact to Holy Cross is the loss of paid inpatient care to competing area hospitals in Los Alamos, Espanola and Santa Fe. This loss of paying inpatients is logically linked to Holy Cross' focus on developing outpatient care instead of focusing on being the best area hospital at providing its core services of inpatient and emergency medical services.

Holy Cross was established to provide health care to all of Taos regardless of economic circumstances. Taos Health Systems and Holy Cross are granted nonprofit status and receive public funds and the use of public facilities from the federal, state and local governments in return for providing emergency and possibly inpatient medical care to anyone who arrives at the hospital.

The public funding of emergency and inpatient care is to help the hospital break even since not everyone has insurance or can afford the cost of hospital care. In short, inpatient and emergency medical care are why Holy Cross Hospital exists and the challenge for all publicly funded hospitals is to balance the unpaid care of indigents with paying inpatient care.

There are two ways to bring balance to unpaid and paid emergency and inpatient care — attract more paying patients to the hospital for inpatient procedures; or reduce or eliminate emergency and inpatient care.

Holy Cross Hospital has chosen to do the later and is on track for reducing inpatient and emergency medical services until only the minimum amount of services are provided and still receive public funding and use of public facilities. This action will affect the indigent the most; as Holy Cross shrinks its core services the indigent will at best be stabilized before being sent elsewhere.

Holy Cross was established to ensure that even the poorest among our community would be able to receive the care they need when they need it the most. It is unfortunate that Holy Cross has chosen to cut services and capacity for inpatients further driving paying inpatients away and taking away the safety net we as a community provide for the less fortunate.

The administration has chosen to take the easy way out to solve its financial woes instead of focusing on the core business of the hospital and this is not a recent choice. The hospital is abandoning its core services and shifting further into outpatient services to increase its profits.

While it's true that some of the hospital's proposed outpatient services will be new to the community (oncology for example), others will be in direct competition with local private medical practices (such as occupational medicine and outpatient physical therapy).

Competition is a good thing but only when the competition is fair. As long as Holy Cross Hospital receives public funding and the use of public facilities the hospital will compete unfairly with local private medical practices.

Perhaps all of these downsides have been discussed, analyzed and answered or perhaps not — we will never know since the decisions were made behind closed doors without any interaction with the community that provides its facilities and supports it through our tax dollars. If the current trend continues, Holy Cross Hospital will be a hospital in name only and will really be a publicly subsidized medical practice that competes unfairly with local health care providers.

Matthew Spriggs is a resident of Taos.