



APPENDIX E:
LETTER FROM STEPHEN BERGER

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Dear Bruce:

You asked me to review the 2006 Berger Commission report on the health needs for the Long Beach community in particular with regard to what has happened to Long Beach Memorial Hospital. While the report is nearly 10 years old, in many ways it anticipated the dramatic changes that are taking place in New York State today with regard to the shape and structure of health care delivery. It is abundantly clear that we are moving to an increased reliance on primary and preventive care delivered in outpatient settings and a reduced reliance on inpatient and acute care facilities. This approach is driven by evidence of the ability of preventive and primary care to reduce the need for costly and unnecessary inpatient capacity, the weakness of episodic (emergency room) rather than systemic care in maintaining and improving people's health, and dramatic improvements in a wide range of therapies including pharmacological breakthroughs.

Changes to the delivery system are being supported by changes in health care reimbursement. Public payors, like Medicaid and Medicare, and commercial payors alike are shifting away from fee-for-service payments that reward volume to reimbursement arrangements that reward value and health outcomes. A multitude of New York State Initiatives – including the Delivery System Reform Incentive Payment (DSRIP) program, the Advanced Primary Care model under development, and the integration of physical health and behavioral health through Health and Recovery Plans (HARPS) – are aligned on these goals and approaches.

While the Berger Commission report did not anticipate all of these changes, our recommendations with regard to Long Beach Memorial Hospital were clearly on this path. In stating that the city of Long Beach needed a health care facility, we pointed out that the focus should be on emergency and ambulatory care with a limited number of clinical services. We also talked about the concept that the local facility should focus on stabilizing patients and transferring them to appropriate facilities. It would be a mistake, at this point, to conclude that having access to health services automatically requires a hospital facility. The Commission's recommendations from 2006 are consistent with present efforts across the State to deliver more health care in outpatient facilities and to rely upon fewer and very different 21st Century acute care institutions.

Sincerely



Stephen Berger