



**Request for Federal Grant, American Rescue Plan Act31 CF Part 35
RIN 1505-AC77 Coronavirus State and Local Fiscal Recovery Funds
Applicant (Organization): Hoboken University Medical Center
Address: 308 Willow Ave, Hoboken, New Jersey 07030**

The COVID-19 pandemic has had profound consequences on not only the health of our population, but also on the well-being of our nation’s healthcare system. Despite ample efforts of local and national government support programs, there have been deficiencies of overall care infrastructure in the nation to combat the pandemic. As healthcare systems learn and adapt to a Covid and post-COVID world, new emphasis on infection control capabilities and facilities enhancements, optimal staffing coverage, PPE supply chain improvements, healthcare technology integration, and expanded local epidemiological expertise will be vital to emerging from the COVID-19 pandemic.

In an effort to enhance our response, health security, and physical plant capabilities of this Hospital, we submit the following for grant consideration. All resources will be applied to (1) Improving infection control capabilities for both patient and Health Care Worker; (2) Enhancing clinical capabilities to meet the evolving needs of our patient population; (3) Expanding acute psychiatric, cardiac, and newborn service capabilities in response to demonstrated access demand from an at-risk population; (4) Maintaining healthcare facility infrastructure and operations with sustainable access to critically needed services.

Majority of the hospitals in the US have sustained significant losses, and the number of healthcare facilities closing their doors to the sick population has increased significantly over the last 18 months. Hospital funds, normally allocated towards facility improvements, are now essential for routine operations, while as they sustain significant pandemic-related losses.

Total Ask: \$26,650,000

Support for Agency Nursing Costs

Ask: \$8,000,000

One of the direct consequences of the COVID-19 pandemic is the high cost of agency nurses. The pandemic caused many Emergency Department, Critical Care, Operating Room, Behavioral Health, Medical-Surgical, and inpatient Registered Nurses (RN) to leave the profession resulting in a severe shortage of clinical resources. In order to address the dire nursing shortage and continue delivering care to the underserved populations of Hudson County, the hospital was forced to engage with agency nurses. The agency nurses cost over twice the cost of full time employed RNs and there is no incremental payer or other reimbursement for these added expenses. Many other hospitals in New Jersey (NJ) and in the country are receiving government support to help offset the costs of the agency nurses to these institutions so that they can continue providing high quality care.

During the last 24 months, Hoboken University Medical Center incurred 70,000 hours of agency nurses costing \$8.0m. Hoboken University Medical Center is requesting support for these costs.

Delays in achieving nonprofit status

Ask: \$6,000,000

While CarePoint Health's Chief Executive Officer advances the hospital to non-profit status, thereby returning the hospital to the community, there have been a series of delays. These delays resulted in excessive cash disbursements for property taxes, sales taxes, as well as a loss of 340b rebate benefits. The inability of Hoboken University Medical Center to receive the protections and benefits of non-profit status resulted in over \$6m of incremental disbursements. Hoboken University Medical Center is requesting support for these delays.

One Time Subsidy Supporting Hospital Transition in Network with all Payers

ASK: \$2,000,000

Problem: Hoboken University Medical Center (HUMC) offers acute care and emergency services to a large, under insured population in Hudson County. Hudson County is among the top communities for percentage of adults and children living at and below the national poverty level. As a result, the mix of patient population is heavily weighted towards Medicaid, self-pay, and charity care patients.

About 25% of inpatient services, Emergency Department visits, clinic visits, and surgeries, are provided to patients that cannot afford to fully pay for the cost of these services, and because of the payer mix and significantly lower patient volumes, the hospital temporarily operates at a deficit position.

Until recently, HUMC had a hybrid payer strategy, with certain payers in network and others out of network. In 2021 HUMC signed network participation agreement with all payers. The result of signing network agreements with all payers is a temporary reduction in reimbursement while inpatient and outpatient volumes increase through referrals and clinical programmatic growth initiatives. This funding will provide a one-time bridge for HUMC to achieve organic profitability through clinical service line expansion and related volume growth.

For HUMC to continue treating covid and other patients in this significantly under insured community, this grant is necessary.

Dedicated Secure Psychiatric Treatment Area in ED

Ask: \$2,650,000

Challenge

Hoboken University Medical Center is a significant provider of mental health and psychiatric services. The pandemic has seen an exponential increase in mental health disease and ailments related to drug abuse. Our Emergency Department has frequently experienced aggressive and disruptive patients struggling with mental health issues; these encounters accelerated in our facility as the nation confronted both health and economic hardships brought on by COVID-19.

At Hoboken University Medical Center, we have provided care to more than 18,000 emergency psychiatric visits over the last 5 years. While overall psychiatric visits saw a slight drop for 2020, they were a larger percentage of our overall patient population. Pre-COVID, ED visits for Mental Health Conditions would average 4-6% of overall ED patients, but during the pandemic it became 9-14% of overall volume, with higher acuity and expanding clinical and socioeconomic needs. Psychiatric visits increased approximately 30% since 2015. Need for substance abuse treatment also expanded, currently averaging approximately 8% of overall ED volume. **HUMC has the only adolescent psychiatric inpatient center (CCIS) in Hudson County, resulting in >1,100 child/adolescent psychiatric visits / year (pre- COVID).**

The pandemic has caused significant stressors to society, manifesting in increased frequency and acuity of behavioral health needs. Per JAMA, patients seeking care for Mental Health Conditions, Overdose and Violence increased nationwide.¹ We expect this trend to continue, especially as economic conditions place pressure on social determinants of health. Homelessness increased more than 9% last year in New Jersey², and for 2020, almost **2.5% of our overall ED volume was homeless**. This presents significant challenges not only for a pandemic, but for overall health outcomes and costs.

Solution

Mitigation of the impact of COVID-19 and other widespread health crises through enhanced environmental and structural changes designed to maintain hospital operations and essential services has become a necessary focus. We propose expanding physical plant capabilities to better care for acute psychiatric patients. This will be accomplished via a dedicated, professionally designed secure space which can be utilized for primarily psychiatric and respiratory isolation purposes. This will add a total of 8 new beds to our serviceable capabilities, reduce the risk of workplace violence and communicable diseases, enhance outcomes via improved throughput, and ultimately allow for improved safety of patients and staff in the psychiatric unit.

Construction: \$1,200,000
Staffing: \$1,450,000
Total Cost: \$2,650,000

Telemetry Central Monitoring System

Ask: \$2,400,000

Challenge

When the first wave of COVID hit in spring 2020, shortages of hemodynamic monitoring were the rate limiting step for decisions on EMS diversion. As critical patients arrived, availability of cardiac monitoring became a key driver of resource management, and decision making. Pandemic planning requires rapid expansion of advanced hemodynamic monitoring. At peak of COVID, we had 35+ patients requiring ICU and advanced telemetry monitoring, vastly outpacing current capabilities.

Solution

Installation of modern hemodynamic monitoring systems, remote telemetry will enable rapid expansion of this critical monitoring capability without the higher cost of brick & mortar infrastructure work. This

capability would empower improved critical patient capacity for future pandemics, in addition to providing better patient safety for non-COVID patients.

Equipment/IT: \$2,400,000

Total Cost: \$2,400,000

Cardiac Catheterization Lab

Ask: \$3,100,000

Challenge

Studies have shown increased morbidity in COVID patients with neurovascular and cardiac disease. Hoboken University Medical Center had applied for a cardiac catheterization lab with the Department of Health. The money that was earmarked to set this up was diverted for care of indigent patients and patients who needed emergent care without insurance during the height of the COVID pandemic.

Solution

Neurovascular and cardiac catheterization is critical in diagnosing and treating neurovascular and cardiovascular disease and has become the standard of care for these illnesses.

Currently Hoboken University Medical Center cannot provide this standard of care to the population we serve. The addition of a catheterization lab at HUMC will provide critical access to an expanding at risk population.

Construction: \$1,200,000
Equipment: \$950,000
Annual Service: \$500,000
Staffing: \$450,000

Total Cost: \$3,100,000

Installation of Second CT Machine

Ask: \$2,500,000

Challenge

Hoboken University Medical Center currently has one CT scanner. Throughout our COVID experience, most of our COVID inpatients required CT imaging. CT imaging is standard of care for stroke, trauma, abdominal and many cardio-respiratory clinical presentations. Infection control and mitigation of exposure risk are critical, and this risk became more difficult to manage with only one CT scanner available in the hospital.

Solution

We propose the installation of a second CT machine with direct access the Emergency Department for expedient clinical services.

Construction: \$1,300,000

Equipment: \$1,200,000

Total Cost: \$2,500,000

About Hoboken University Medical Center

Founded in 1863, Hoboken University Medical Center (HUMC), the oldest continually operating hospital in New Jersey, is a 348-bed acute care hospital with a 34-bay emergency room including a dedicated OB/GYN emergency department. HUMC is home to a primary stroke center, a Women’s Health Institute, centers of excellence for minimally invasive GYN surgery and robotic surgery, an innovative orthopedics program, and an A-grade TCU. HUMC has received Joint Commission Gold Seal accreditation and is an American Heart Association Silver Plus Award recipient for stroke.

In order for Hoboken University Medical Center to continue treating COVID-19 patients, provide emergency response and sustainable access and infrastructure capabilities in this significantly underserved community, this grant is critically necessary.