News



Hospital staff walk outside then-newly named Pope Francis Emergency Care Center at Providence Health System in northeast Washington Sept. 18, 2015. The hospital is slated to be closed in mid-December. (CNS photo/Catholic Standard/Jaclyn Lippelmann)

by Eileen Markey

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November 12, 2018

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The largest Catholic healthcare system in the world is preparing to shutter the hospital it operates in Washington, D.C., in mid-December, withdrawing services from a patient base that is largely poor, elderly and black.

Ascension Healthcare can no longer afford to operate Providence Hospital in the Brookland neighborhood of Northeast D.C. because the facility is losing money, a spokesman said in a statement. St. Louis-based Ascension, which took in \$1.6 billion in net income in 2017, is shifting away from emergency and acute care throughout its network in favor of preventative and primary care.

The hospital system said in a statement that it wants to "re-envision" Providence's role in the community it has served since the Civil War to better "dedicate our resources toward creating a new healthcare model to address the changing health needs of DC residents."

Critics say the hospital is abandoning vulnerable patients and its Catholic mission while its leadership collects exorbitant salaries and Ascension enjoys deep profitability. Eighty percent of Providence patients use Medicare or Medicaid.

"It's one thing to be making money and to be compensated, but to claim to be carrying out your mission when you are closing a hospital, that is really counter to what you should be doing," said Jason Miller, director of campaigns and development for the Franciscan Action Network, which opposes the hospital closure. "I don't think it's complicated to see that Ascension has made a business decision, and they need to dialogue to find a way to keep the hospital open, at least temporarily."

Ascension's chief executive officer Anthony Tersigni took home a salary of \$13 million in 2015, the last year for which financial records are publicly available. A total of \$11 million of that was bonus. The previous year, because of a \$10 million bonus and \$5 million in other compensation, he earned \$17.6 million, making him the nation's most highly compensated non-profit healthcare executive in 2014. The top three executives at Ascension take home bonuses far larger than their salaries.



Ascension's chief executive officer Anthony Tersigni earned a salary of \$17.6 million in 2014, including a \$10.2 million bonus, making him the nation's most highly compensated non-profit healthcare executive that year. (AP/Aijaz Rahi)

Critics say Ascension is abandoning this mission by closing a full-service hospital and making no firm commitments for what will replace it. A spokesman for Ascension declined to answer questions about budgeting,* future plans at the Providence site and profitability, instead issuing a statement that blamed operating losses and declining patient use as reasons for the closure.

The District of Columbia City Council, the National Nurses United union and other unions, health equity advocates, the Franciscan Action Network, Pax Christi USA and others are fighting to keep the hospital open, calling its continued operation a prolife issue. A few representatives of those organizations spoke at a public hearing on the hospital before the City Council Nov. 2.

"I am here because I am afraid that people may get the impression that when we Catholics say 'pro-life' that we are not including black and brown babies and mothers or lower income families in our definition of life worth defending," said Fr. Patrick Smith, pastor St. Augustine Catholic Church. "I am afraid that when we as Catholics repeat the truth that 'The Lord hears the cry of the poor' (Psalm 34), that that truth may fall on deaf ears if we close one of the only two hospitals on the east side of the district knowing that all but one of the seven other hospitals are concentrated in the

wealthiest neighborhoods of the city."

The people of the east side of the city, in the wards served by Providence, are poorer and sicker than the rest of D.C. They have the city's highest rates of arthritis, asthma, high cholesterol, hypertension, diabetes, COPD, heart disease and depression, according to a Community Needs Assessment developed in 2016 by a coalition of hospitals, including Providence.

"It's the hospital that takes care of a population other hospitals don't, whether you can pay or not," said nurse Elissa Curry who has worked at Providence for five years.

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In an effort to prevent the hospital from closing, the D.C. Council passed legislation in early November requiring that any healthcare facility seeking to cease operations must win approval from the State Health Planning and Development Agency before it can close. The State Health Planning and Development Agency is an entity independent of city government that evaluates approval for the opening of medical facilities in Washington, D.C. The agency will meet on Nov. 16 to gather information about Providence's planned closure.

Providence Hospital was founded at the beginning of the Civil War by the Daughters of Charity of St. Vincent de Paul. Its charter was signed by Abraham Lincoln. For more than 150 years Providence has served the poor of Washington. Several orders of women religious are listed as participating entities on Ascension's financial statements, but a spokeswoman for the Daughters of Charity said, "the Providence story isn't our story to tell any longer." She referred all questions to an Ascension spokesman.

It is known as a place that won't turn anyone away, said nurse Elissa Curry who has worked at Providence for five years.

"It's the hospital that takes care of a population other hospitals don't, whether you can pay or not," Curry said. Closing the hospital in favor of providing preventative and primary care would leave already sick people without services, she said.

"They are talking about care of people who are not yet sick, because that's the healthy, working population that is going to have private commercial insurance. It would cut out the services for sick people and indigent people. I think they want to totally get rid of that population that has Medicaid and Medicare."

Catholic healthcare entities have a particular obligation to serve poor and vulnerable populations, according to teaching of the U.S. bishops. <u>The Ethical and Religious Directives for Catholic Health Care Services</u>, sixth edition, issued by the U.S. Conference of Catholic Bishops in June spells it out.

"In Catholic institutions, particular attention should be given to the health care needs of the poor, the uninsured, and the underinsured," say the directives. "In accord with its mission, Catholic health care should distinguish itself by service to and advocacy for those people whose social condition puts them at the margins of our society and makes them particularly vulnerable to discrimination: the poor; the uninsured and the underinsured; children and the unborn; single parents; the elderly; those with incurable diseases and chemical dependencies; racial minorities; immigrants and refugees."

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Ascension and the Washington D.C. Department of Health argue the hospital is underutilized and the people of Northeast could be better served by different methods. Many of Providence's beds are empty, it has seen declining admissions in recent years, and residents of its catchment area prefer other nearby hospitals, according to the <u>District of Columbia Health Systems Plan</u> prepared by the D.C. Department of Health in July 2017. Washington General and Washington Children's Hospital, while in a different, whiter and wealthier quadrant of the city are just two miles away from Providence.

The report found D.C. had an oversupply of hospital beds. D.C. Health argues these and the seven other district hospitals could easily absorb Providence's patients.

Curry isn't buying it.

"They say they have empty beds, but that's because they aren't putting people in the beds," she said. "They are keeping Medicaid and Medicare patients in the E.R. instead of admitting them because they want commercial insurance patients in the beds."

At the Oct. 10 hearing, the medical directors of Howard University Hospital and Washington General Hospital testified quite differently than the D_.-C_.- Health Systems Plan would indicate. They said their facilities would be overwhelmed without Providence.

Providence had an operating loss of \$23 million in 2016, the last year for which figures are available. The healthcare network saw a 14 percent increase that year in the cost of providing care to patients unable to pay. Still, Ascension is in strong financial shape. It owns Providence and 150 other hospitals and 50 senior care centers in 22 states, mostly in the Southeast and Midwest. While Providence Hospital has struggled, the parent company is among the most financially successful nonprofit healthcare organizations in the country. It reported net revenues of \$17 billion and an operating income of \$281 million for fiscal year 2018 (which began in July 2017), according to financial statements and reporting in healthcare industry publications. The vast majority of its 2017 \$1.7 billion income was from investments.

Tersigni's salary was a frequent topic of outrage in a public hearing on the planned closing held Oct. 10. More than 100 people spoke in favor of keeping the hospital open. Though invited, representatives from Ascension or Providence Hospital did not attend. The City Council's health committee continued the meeting Nov. 2. The president of Providence Hospital, Keith Vander Kolk, attended that hearing, invoking the hospital's commitment to "walk where Christ walked," while he defended the decision to close the hospital.



Cardinal Donald W. Wuerl, then archbishop of Washington, D.C., leads a prayer during the dedication Pope Francis Emergency Care Center in the Providence Health System. The dedication coincided with the pontiff's visit to D.C. in September 2015. "Just as Pope Francis sees the inherent dignity in every person — Providence is here to serve those same individuals," Wuerl said at the time. (CNS photo/Jaclyn Lippelmann)

"It became clear the best way to redeploy resources and better serve the community was to transition from hospital-based services to primary behavioral and community-based services," said Vander Kolk. "We are committed to serving all persons, especially those who are poor and struggling. That mission will never change."

In September 2015, a week before Pope Francis' visit to Washington, D.C., Providence renamed its emergency room the Pope Francis Emergency Care Center. Providence " 'walks with Francis' through its dedication to mercy, service to all, and quality care for our brothers and sisters in need — especially those on the margins

of society. Just as Pope Francis sees the inherent dignity in every person — Providence is here to serve those same individuals," Cardinal Donald Wuerl said during the emergency room's dedication ceremony. Francis speaks frequently on the right to healthcare and the sinfulness of accumulation of excess wealth.

"It's unconscionable that an organization that is supposed to do service in the church's name would allow this to happen," said Corey Lanham, mid-Atlantic collective bargaining director for National Nurses United. "Like many health care executives, the salaries at Ascension are bloated," he said pointing out that Tersigni has earned \$50 million in the past six years. "There is a lot that I think you could do with that kind of money."

After public opposition to the closure mounted in late September and October, Washington D.C. mayor Muriel Bowser asked the Archdiocese of Washington D.C. for assistance. While a spokesman for the archdiocese declined to comment on the responsibility Ascension has to the people who rely on it or the size of its executive compensation packages, communications director Edward McFadden said the archdiocese was willing to help communicate with Ascension.

According to the U.S. bishops' Directive for Catholic Health Services, local bishops should, "encourage the faithful to greater responsibility in the healing ministry of the Church. As teacher, the diocesan bishop ensures the moral and religious identity of the health care ministry in whatever setting it is carried out in the diocese." The archdiocese of Washington, on its heels over the charges of coverup and collusion against Cardinal Wuerl revealed in the Pennsylvania grand jury report, has not been vocal in the Providence debate.

Asked to comment this week, McFadden issued a statement Nov. 5.

"The Archdiocese of Washington ... understands the unique and crucial role the Catholic Church and her teachings play in meeting the needs of our most vulnerable among us, particularly in the area of health care provision," McFadden wrote. "We have expressed this perspective with Ascension and Providence Hospital in our interactions with them, and throughout their review of the future of the hospital in northeast Washington, DC. We look forward to meeting with District of Columbia officials later this week to discuss how the Archdiocese can be of assistance in this matter to ensure that our underserved neighbors receive the care they require and deserve."

[Eileen Markey is the author of A Radical Faith: The Assassination of Sr. Maura, a biography of one of the churchwomen of El Salvador. She teaches journalism at Lehman College of the City University of New York.]

*Editor's note: This story has been updated to correct an inaccurate sentence, removing the word "specific" and replacing the phrase "executive salaries" with "budgeting." NCR asked the spokesman for Providence Hospital for an interview with Ascension CEO Anthony Tersigni and explained that we would like to ask Tersigni questions about the decision to suspend services at Providence, future plans for the site and budgeting issues. Included in these "budgeting issues" would have been specific questions about operating losses at Providence versus Dr. Tersigni's high salary and the overall strong financial health of the Ascension network.