Madison Hospital Loses Medicare Aid

By FRANCES CERRA

Madison Avenue Hospital, a 117-bed profit-making facility, has been informed that because of life-threatening fire and health violations, it is no longer eligible to receive Medicare funds. The cutoff of funds, effective June 8, is expected to result in the closing of the hospital, which has been targeted for closure by city and state officials for years.

Donald Rubin, president of the Consumer Commission on the Accreditation of Health Services, hailed the decision as proof that withholding Federal funds was potentially the most effective means of closing substandard hospitals that have persistent violations. In an interview, Mr. Rubin criticized the New York State Health Department for not initiating the Federal procedure, which could result in the loss of those funds.

Mr. Rubin said that com-plaints he made to the United States Department of Health, Education and Welfare's Bureau of Insurance had directly re-sulted in the loss of funds to Linden General Hospital, Wadsworth Hospital and now Madison Avenue Hospital. Linden General and Wadsworth have closed.

All three hospitals were repeated sources of frustration to State Health Department officials who have stated in the past that their efforts to close such hospitals- by such means as withdrawing their operating certificates-led to lengthy legal battles in which the state was hampered by lack of staff.

Single Exit Cited

In the case of Madison Avenue Hospital, the major violation that led to the loss of Medicare funds—the existence of only one exit from each of the 16 floors instead of twohas been known to state officials for years. A memorandum in the files of the State Health Department, dated January, 1969, said, "The [Fire Safety dated January

Advisory] Committee was unan-imous and emphatic that a single means of egress is wholly unacceptable and should not be permitted."

The hospital's administrator, Frederick P. Hans, was informed of the decision to terminate its Medicare funds in a letter mail-

ed last Wednesday.

An inspection of the hospital, which is situated at 30 East 76th Street and was built in 1928, found numerous violations of sanitary and life-safety codes. Among them were dead end corridors, the existence of only one elevator large enough to accommodate patient beds an inadequate emergency room and a dirty and inadequate kitchen with grease encrusted on ventilating fans.

Over the last year, officials of the hospital negotiated with the Bureau of Health Insurance over proposals to correct the

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A secretary in Mr. Hans's of-fice said that both he and Dr. Imre Weitzner Sr., one of the principal owners of the hospital, were both unavailable for comment on the prospective clos-ing of the facility. In 1975, the hospital received \$1.5 million in Medicare funds. Loss of Medicare funds usually leads to a cutoff in Medicaid and Blue Cross reimbursements, which would make it economically unfeasible for the hospital to stay in business.

Dr. Frank Cicero, second deputy commissioner of health within the State Health Department, defended the depart-ment's handling of Madison Avenue Hospital mainly on the ground that the department did not have legal jurisdiction over proprietary hospitals in the city until September 1973.

Mr. Rubin complained about the hospital to the Federal Government in June 1974, using a procedure under which

anyone-a private citizen or government agency—who pro-vides evidence of deficiencies in a hospital can cause the bureau that administers Medicare to have a full inspection made.

The evidence upon which he based his complaint was a survey of the hospital completed by the New York State Health Department in May 1974. At the same time, Mr. Rubin used other State Health Department inspection reports, which are open to the public; to substantiate complaints about seven other hospitals in the city.