

More homeless in N.J. using hospital ERs for shelter and food

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With nowhere else to go, many of the homeless in North Jersey head to hospital emergency rooms, racking up costs for the institutions as they gain a brief respite from life on the streets.

At hospitals, the homeless know they can get a hot meal and escape the cold or rain for a few hours when shelters are full. Emergency rooms have become such a lifeline that some return to the same ER every few weeks, while others rotate among hospitals so they don't show up too often at the same facility, advocates who work with the homeless say.

"Some definitely know how to work the system — which hospitals will give them clothing, which ones might admit them," said Julia Orlando, director of [Bergen County](#) Health and Human Services.

Hospitals know the homeless use them as temporary shelters but can do little to break the pattern because federal law dictates that every hospital must evaluate and treat anyone who shows up in an emergency room. And most, in fact, need some kind of care because of their hard lives on the streets. A number have chronic illnesses, doctors say.

"Sometimes we see the same people every month. They're in and out on a regular basis," said Janeth Bedoya, a social worker supervisor at St. Joseph's Regional Medical Center in [Paterson](#). "They're very familiar to us, and some have serious illnesses that they are unable to manage."

But hospital officials say homeless patients impose a significant — and growing — financial burden on hospitals. Statewide, hospitals spend \$2.2 billion annually caring for the homeless and others who can't pay for treatment, according to the New Jersey Hospital Association.

The exact toll homeless patients take on hospitals is unknown because the costs of their care aren't separated from other charity patients — and hospital officials are reluctant to discuss the services they provide to the homeless because they fear becoming known as a haven for the needy.

David Borgstrum has been homeless in [Bergen County](#) most of his adult life, a result of what he described as decades of drug and alcohol abuse. He said he went to a local hospital not long ago with a raging fever and a hacking cough, but a doctor released him without treatment, he said.

When he didn't improve, he went to a bus station and had a friend call for an ambulance. Borgstrum said he ended up in Bergen Regional Medical Center in [Paramus](#) for three weeks with a serious case of pneumonia.

"They treated me good in Bergen Regional," said Borgstrum, who is now staying at a friend's cluttered [Maywood](#) apartment with several other people.

Those who work in shelters and soup kitchens say they try not to send homeless people to hospitals, but often, they have no alternative. "Sometimes we have to use hospitals because the people need more care than we can give them and there's nowhere else they can go," Orlando said.

Many of the area shelters don't allow the homeless to stay during the day. And there aren't enough beds for all the people who need them when the shelters open at night. Homeless advocates say there is little they can do to help a homeless person who is chronically ill.

"For someone, let's say, who had a transplant and needs to rest during the day and can't be near people because they're immune system has been suppressed, this doesn't help them," Orlando said.

The plight of chronically ill homeless people was underscored in February when Stanley Kowalski's car burst into flames while he was stopped at a traffic light in [Hackensack](#). Kowalski, 83, has emphysema and needs oxygen round the clock. He also smoked incessantly. His car exploded when a cigarette ash fell on one of the tanks he had in his car. He was rescued by an onlooker.

After the accident, he was evicted from the motel room where he had been staying. With nowhere else to go, he landed in Holy Name Medical Center in [Teaneck](#), where he had been treated multiple times for his illness.

This time, however, the hospital had to keep him because he had nowhere else to go.

State law demands that hospitals make sure all patients have a "safe discharge" plan, which includes a place to stay, follow-up care at a clinic if necessary and access to medications. Medical centers are frequently faced with homeless patients who have been treated but can't be released.

"This is one of our biggest problems, especially since there isn't a medical home in [Passaic County](#) for people without insurance," said Dr. Eileen Clifford, medical director of care management at St. Joseph's. "The shelters fill up so fast, and many times we have to send them to a place in Newark."

Kowalski remained at Holy Name for a week before a bed was found for him at the Care One nursing facility in [Westwood](#). When reached there by phone recently, he said he was doing well.

But there are too many people like Kowalski still on the streets, advocates say. The homeless population increased 6.6 percent from 2009 to 2011, bringing the number of people in New Jersey without a place to live to 12,825 according to the Corporation for Supportive Housing. In [Bergen County](#), where affordable housing is increasingly hard to come by, hospital officials say they are spending more caring for the homeless.

In the first two months of 2012, charity care at [Englewood](#) Hospital and Medical Center was up 66 percent over the comparable period in 2011, said Maria Margiotta, a spokeswoman. And that was on top of a nearly 15 percent increase between 2010 and 2011. In 2011, the hospital provided nearly \$15 million in charity care but was reimbursed only \$1.4 million from the state's charity-care fund, Margiotta said.

So many homeless patients have come through [Hackensack](#) University Medical Center, that management put together a team to try to find a safe place for them after discharge.

“We work closely with shelters, nursing homes, and, of course, try to find family,” said Susan Giordano, administrator for capacity management.

Sometimes a nursing home or rehab bed is an option, but it can be difficult to meet the criteria for aid.

“Medicaid won't pay for a nursing home unless a patient has been in a hospital for three nights,” said Robin Reilly, an [Oradell](#) resident who works with the homeless in [Bergen County](#) and is the founder of the non-profit FAITH Foundation. “Many times it's difficult for a hospital to keep a patient for three nights — they don't qualify for that type of intense care.”

Jacqueline Kates, a Holy Name spokeswoman, said the institution has an obligation to treat everyone who comes through its doors, regardless ability to pay. The hospital's capacity to solve underlying issues when a patient is homeless or chronically in need of lodging, however, is limited, she said.

“We don't turn away any sick people whatever their circumstance is,” Kates said. “But the hospital is not the solution for the homeless problem.”

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