

Is This a Hospital or a Hotel?

By [ELISABETH ROSENTHAL](#)

As the new St. Joseph's Hospital in Highland, Ill., prepared to open in August, its chief executive exulted, "You feel like you could be at the Marriott."

In the \$63 million community hospital, patients all enjoy private rooms, with couches, flat-screen TVs and views of nature. Its lobby features stone fireplaces and a waterfall.

Some hospitals in the United States, like Cedars-Sinai in Los Angeles, have long been associated with deluxe accommodations, and others have always had suites for V.I.P.'s. But today even many smaller hospitals often offer general amenities, like room service and nail salons, more often associated with hotels than health care.

In the current boom of hospital construction, private rooms have become the norm. And some health economists worry that the luxury surroundings are adding unneeded costs to the [nation's \\$2.7 trillion health care bill](#).

There are some medical arguments for the trend — private rooms, for example, could lower infection rates and allow patients more rest as they heal. But the main reason for the largess is marketing.

In a highly competitive field, patients — sometimes now referred to as "guests" — appreciate amenities. The tactic works. "We found that patient demand correlates much better to amenities than quality of care," said [Dr. John Romley](#), a research professor at the Leonard D. Schaeffer Center for Health Policy and Economics of the University of Southern California, who has studied the trend. That means that hospitals can improve their bottom line and their reputation by focusing more on hospitality than health care — offering organic food by a celebrity chef rather than lowering medication errors, for example.

As a result, American hospitals are looking less and less like their more utilitarian counterparts in Europe, where the average hospital charges per day are often [less than a quarter](#) of those in the United States, according to the International Federation of Health Plans.

The Henry Ford health system in Michigan caused a stir after it hired a hotel industry executive, [Gerard van Grinsven](#) of the Ritz-Carlton Group, in 2006 to run its new hospital, Henry Ford West Bloomfield. He had opened 20 hotels and his “focus on people and service excellence” has helped the hospital thrive in a competitive market, said Nancy M. Schlichting, Henry Ford’s chief executive, who decided to hire him. The idea was to take care of patients’ needs, she said, clinical and otherwise.

While no one is getting nostalgic for traditional hospital food, open wards or revealing gowns, some worry that hospitals are going too far with the creature comforts. They are particularly concerned since most hospitals are nonprofit, so construction — directly or indirectly — is subsidized with public money.

With the prospect on the horizon of the Affordable Care Act’s lowering reimbursement, and interest rates rising, the hospital construction boom appears to be slowing. And, in choosing a hospital, patients should probably think beyond room service anyway. Many years ago, when I was a doctor-in-training, I was assigned to work on a hospital floor with V.I.P. rooms. Though the views were spectacular, the cardiac arrest team could not get there as quickly as it could to the regular wards. We called it “a hotel near a major teaching hospital.”

Can you tell the difference between a hotel and a hospital? Take the quiz.

[Take the quiz.](#)

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