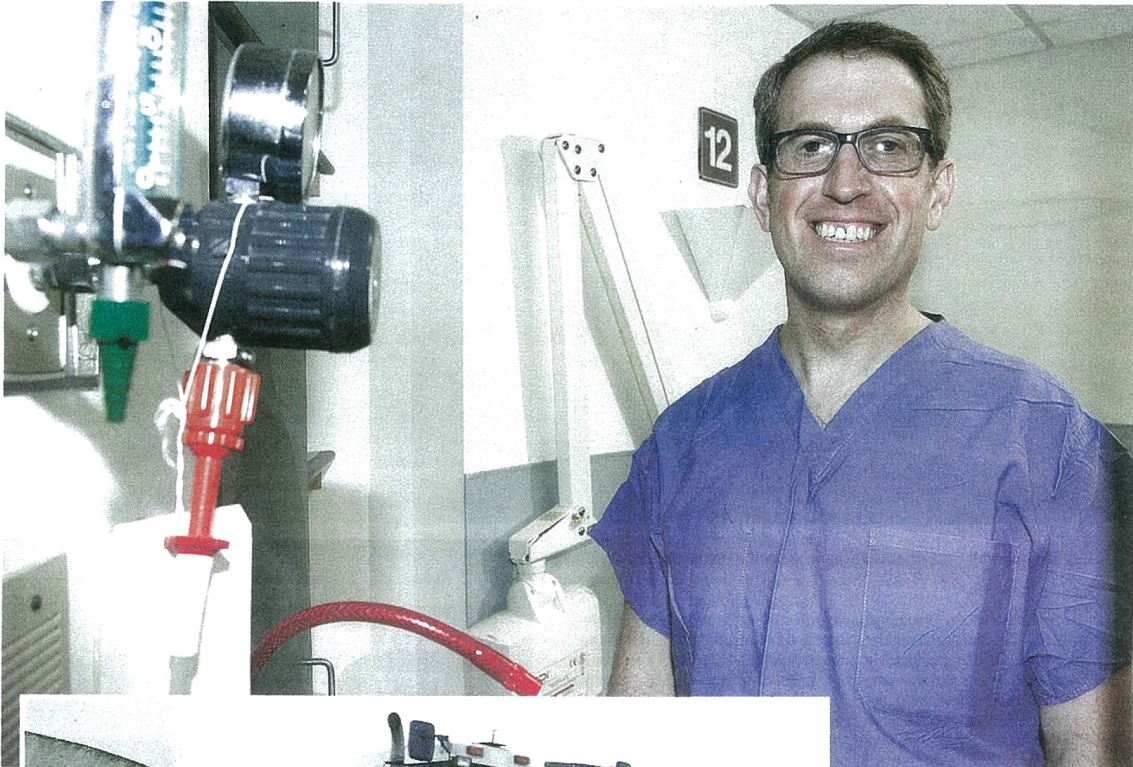


## COVER STORY

# WHEN THE TOURIST HAS AN

*Area hospitals are taking a global approach in ways to market medical specialties*



TOP PHOTO: JIM COURTNEY. BOTTOM PHOTO: COURTESY WANDA LENNOX

*Dr. Michael Stoffman, top, is chief of neurosurgery at Niagara Falls Memorial Medical Center. With dual citizenship in Canada, he has developed a reputation that attracts patients who are willing to cross the border and pay out-of-pocket. That patient base includes Irwin Lennox, a farmer from Manitoba, Canada, who came to Stoffman for a disk replacement. Nearly disabled before, this photo was shot just weeks after surgery when Lennox was back to work full time after eight years of pain.*

BY TRACEY DRURY  
tdrury@bizjournals.com  
716-541-1609, @BfoBizTDrury

**I**rwin and Wanda Lennox traveled 1,500 miles to Niagara Falls twice late last year, flying from their home in Strathclair, Manitoba.

While here, they visited Niagara Falls, gambled at the Seneca Niagara Casino and stayed at the Wingate by Wyndham Niagara Falls.

But the main purpose of their visits was a seven-day stay at Niagara Falls Memorial Medical Center, where neurosurgeon Dr. Michael Stoffman performed minimally invasive surgery to replace a crumbled disk that had left Irwin practically disabled. Total cost of the two visits: about \$52,000 (U.S.), including \$47,000 for the surgery and related hospital costs.

"The back pain started 15 years ago in a moderate way, but the last three to four were excruciating all the time," Lennox said. "It was so bad that I could neither have continued farming, which is my business, nor could I

## COVER STORY

# APPOINTMENT, NOT A CAMERA

have enjoyed retirement. It was so bad that the money became irrelevant."

Just weeks after the surgery, the 54-year-old farmer was able to resume running his business, caring for 2,800 acres of canola, wheat, barley and flax.

"It was worth every dime of it. If I had known how it would have turned out and the price was double, I would have done it. It's completely given me my life back," he said. "Out here in the Western Prairies, a lot of guys farm until they're 75. I don't know if I'll go that long, but at least now I can pick up my grandkids and sit in a fishing boat, which I couldn't do before."

Lennox is among a growing number of patients who are making medical tourism a viable business line for the region's health care industry. Some come because they can't find the specialty services closer to home, while others don't want to wait.

Lennox was told it would take a year to get in and see a specialist, and likely another year after that to schedule surgery. In other cases, people are coming here for specialty training on medical procedures and devices.

In 2014, Western New York hospitals saw more than 1,000 patients from Canada including emergency care, inpatient and outpatient services. Though some came as part of a preferred provider program with the Ontario Health Insurance Plan (OHIP), many paid out-of-pocket for care.

And it's not just Canadians. Patients arrive from other parts of the United States, as well as Australia, Kenya, Pakistan, Saudi Arabia and Malaysia for specialty procedures they can't get back home.

As Western New York's reputation as a center for health care grows, it's likely more people will come from outside the region, said John Bartimole, executive director of the Western New York Healthcare Association.

"I think it's a fertile marketplace for us, both in terms of attracting health care providers and attracting patients to this area," he said. "Let's face it: the reputation of health care in Buffalo continues to grow every day with the medical corridor. I think this is something that will only get better."

When Lennox first pursued care for

his back six years ago with a surgeon an hour from home, he was told there was nothing they could do for him. He toughed it out for another four years until the disk blew out. After being told he'd have a two-year wait before surgery, he and his wife began researching alternatives online and came across a news article on Stoffman, a dual citizen who grew up in London, Ontario.

He said the cost was well worth it.

"If you treat my farm as a business, it's an investment in the farm, no different than if I bought a piece of machinery," Lennox said. "Without doing it, I would not have put another crop in this spring."

Stoffman, who began practicing in the United States after a neurosurgery residency at Yale University, is chief of neurosurgery at Niagara Falls Memorial and a partner at InvisionHealth's Brain and Spine Center in Williams-ville. About 90 percent of his patients are local, but he's seeing more international patients who find him online.

"With the Internet, people are able to do their own research pretty quick-

ly. Canadians felt very comfortable with the fact that I was Canadian and a lot of my education was in Canada, so I think that was one of the draws. It's slowly built over the years. I operate on people from all over the world," he said. "I don't advertise - I just try to take care of people."

The wait times Lennox was quoted are typical, Stoffman said. Though Canada's system of socialized medicine means no one has to pay for health insurance to receive care, it doesn't mean they'll get it when or where they want it. Besides the wait times, patients may have to travel an hour or more to find a specialist.

"If you've got shooting pain in your buttock and radiating down your leg and you can't walk, or you have pain in your neck and can't move your arm and can't work, waiting even a few months to see someone is challenging," he said. "For people who are able to come to the States, they just do it. People get fed up and they want to get better and move on with their lives."

CONTINUED ON PAGE 24



JIM COURTNEY

The Jacobs Institute on the Buffalo Niagara Medical Campus attracts hundreds of physicians and medical device company professionals each year who want to learn about new techniques and devices. Here, Medtronic staffers Lesli Hanlin, left, and Laura Hinzman check out a 3-D printed model of a vascular system to learn about coronary function.

COVER STORY

CONTINUED FROM PAGE 23

Though Stoffman performs surgeries at Kenmore Mercy Hospital and Mount St. Mary's Hospital, the majority are at Niagara Falls Memorial, which saw the total number of Canadian patients increase from 102 in 2014 to 176 last year, including 60 elective surgery patients.

Judi Nolan Powell, Niagara Falls Memorial vice president for foundation and community relations, said the goal is to double or triple that number in 2016. Through February, the hospital saw a 20 percent uptick already, with patients paying between \$12,000 and \$18,000 in cash upfront for neurosurgery and bariatric procedures. More complicated cases can reach \$40,000 or higher.

Besides helping Canadian patients access care, the extra revenue helps Niagara Falls Memorial meet its mission of serving the local community. And it helps fill the gap for charity care and lower government reimbursements that often don't cover the hospital's actual costs.

The hospital has beefed up online marketing efforts and joined the Niagara Falls Ontario Chamber of Commerce. It partnered with the Wingate by Wyndham Niagara Falls for discounted rates and VIP services and is talking with Niagara University and its Global Tourism Institute on how to promote medical tourism in the region. Patients receive concierge services and a personal welcome from hospital executives.

"We see this as a great opportunity," Powell said. "If they have any concerns, we want them to call while they're here if they're looking for recommendations on a restaurant or where churches are. We want them to remember their experience with us. We want to do whatever we can to make their stay enjoyable so the



JIM COURTNEY

Urologic oncologist Dr. Thomas Schwaab treats Frank Pelczar of Erie, Pa., who travels 102 miles to Roswell Park Cancer Institute for bladder cancer treatments. Says Pelczar: "In Erie, they said it was so advanced they wanted to take my bladder out. Dr. Schwaab is unbelievable. He was persistent. He does some amazing things."

patient is comfortable and the family is feeling confident that they're in good hands. Ultimately, they'll go back and tell their friends and neighbors they had a five-star experience."

Concierge services are important for patients and families from out of town. Kaleida Health's Access Center has worked with families from as far away as Australia and Pakistan, helping book hotel rooms and determine costs. Inquiries come in from all over the world about stroke and cardiac ser-

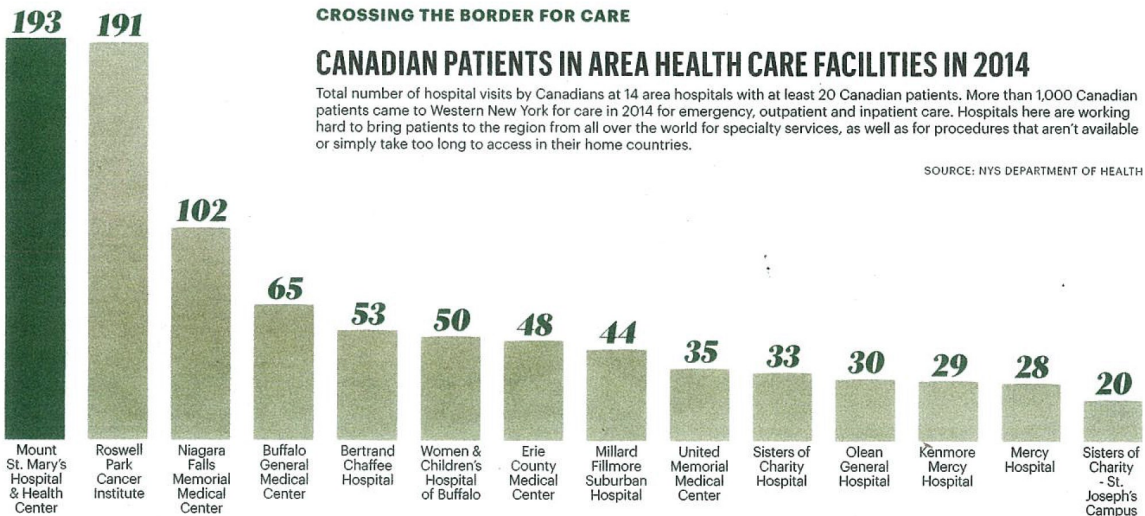
vices at Buffalo General Medical Center, said Jeannie Campese, supervisor of the center.

"We had a family from Australia last year and we were their point person no matter what their need was while staying in Buffalo," she said. "We may work with them on a quote, helping them find accommodations or if they need transportation. And when they check in, we take over a welcome bag and meet them face to face."

Kaleida had 240 Canadians at its

facilities last year including emergency, outpatient and inpatient services. Most of them were private-pay customers. Revenue from those patients is a small but growing business line, said Michael Hughes, senior vice president for public affairs and marketing.

"It's a growing area of our business, and the more and more people hear about these nationally known cardiac and stroke and orthopedics programs, the more we're hearing from people outside Western New York," he said.



## COVER STORY

"It's an important piece of the puzzle and one of a number of ways we're tracking top-line revenue."

Roswell Park Cancer Institute has seen growth in the number of people coming here for treatment, including Canadians through the OHIP program and patients from other countries. Dr. Thomas Schwaab, a urologic oncologist, has cared for patients from Germany, Nigeria and Japan, as well as Canada.

Schwaab, Roswell Park chief of strategy, business development and outreach, said the hospital's reputation is well-known outside the United States as America's first cancer center and for innovative discoveries in prostate cancer testing.

"We tend to forget about that, how big our international name recognition really is," he said. "Roswell has huge name-brand recognition internationally."

Other patients hear about Roswell Park through its collaborative efforts in countries such as Nigeria, where it last year played a major role in the opening of that country's first cancer center. A growing middle class in countries such as West Africa, Ghana and India are financially capable of traveling to find health care that's not available at home.

"That's where those big cancer institutions that are already into med-

ical tourism come in, like M.D. Anderson (Cancer Center), Memorial Sloan (Kettering Cancer Center). They're already present in the Middle East," Schwaab said. "We're kind of focusing on that market, the developing countries, that have a middle class that's able to afford to pay for health care. It's a huge opportunity."

The economic benefit for those visits goes beyond what the hospital is paid. Some patients may come here for a month or longer, leading to residential spending in town by family members.

"Those patients don't just come to Roswell - it's really a community visit. They come with their family and spend a month to several months in town, and not all the time is at Roswell," Schwaab said. "They stay in local lodging like the Kevin Guest House or the Doubletree Hotel. So it really adds to the Buffalo Niagara medical corridor."

The growth of the Buffalo Niagara Medical Campus has attracted interest, as well. Tourism officials in the region said they field more calls from travel planners and individuals who choose to visit the region for medical procedures.

"It's something that we are starting to put a focus on because we have heard from some travel planners who specialize in this," said Patrick Kaler, president and CEO of Visit Buffalo Niagara, the region's tourism bureau.

"We don't get involved in the procedures; we leave that up to the medical professionals. But we're there to supply the information for the stay, for the caregivers or family members. It's not just Buffalo/Erie County-centric, but we'll promote the Falls if it's appropriate, too."

The medical campus also draws medical professionals. He points to last year's MedTech 2015 conference that attracted medical technology firms from around the state and 2016 meetings of the National Association of State Alcohol Drug Abuse Directors and the Academy of Nutrition and Dietetics, which will both include site tours at the medical campus.

"The medical campus has been a big player for us to go after these kinds of meetings and trainings," Kaler said.

The Jacobs Institute represents the other side of medical tourism, attracting surgeons and medical device professionals from around the country to the Buffalo Niagara Medical Campus.

The organization is sandwiched between the Gates Vascular Institute at Buffalo General Medical Center and the University at Buffalo's Clinical & Translational Research Center. Last year it hosted more than 300 people for training and clinical immersion programs, resulting in more than 340 hotel room nights and related spending on meals and entertainment.

That included 142 physicians plus more than 150 medical device company workers, including 71 executives, 20 engineers and 59 sales representatives. The physicians come from institutions such as Yale University and as far away as the Netherlands and China to learn about treatment for cerebral vascular disease.

Others come to test new devices in the Jacobs Institute lab, where they can print 3-D models, test their devices and get feedback from surgeons and physicians working in the building.

Pam Marcucci, Jacobs Institute director of program development and outreach, said often they come after hearing presentations from Buffalo neurosurgeons. Others learn through word-of-mouth about the clinical immersion and medical device education programs.

"We don't use the words medical tourism. We tailor our programs to their needs and they bring groups," she said. "One firm has liked it so much they keep sending groups of engineers to do similar programs."

Word is getting out and the program is growing, Marcucci said.

"It really is impactful for them to have more experience in the clinical environment," she said. "They say things like, 'Wow! If I ever had a heart attack, I'd want to be here.' They leave with a very different idea of the city."