

Mount Sinai Beth Israel hospital in New York City on brink of closure

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Mount Sinai Beth Israel, a 696-bed teaching hospital in New York City, is on the brink of closure, pending a determination by a panel of judges. In February, the hospital, which has ended all inpatient services, set March 26 as its last day of operation. Days after the hospital announced its closure date, a New York appellate court judge issued a temporary stay order.

If Mount Sinai Beth Israel closes, then the closest major hospital for neighborhood residents would be Bellevue, which is about a mile away. In addition, New York Presbyterian Lower Manhattan would become the only facility serving residents south of 23rd St. The shuttering of Mount Sinai Beth Israel would continue a trend of hospital closures amid a resurgence of preventable diseases and unprecedented, bipartisan attacks on public health.

Mount Sinai Beth Israel is an academic affiliate of the Icahn School of Medicine at Mount Sinai. It is one of eight hospitals in the Mount Sinai Health System, which is the largest hospital network in New York. The nominally nonprofit system employs more than 9,000 physicians, more than 8,350 nurses and more than 2,390 residents and clinical fellows. It employs 48,000 workers overall and reported annual revenue of \$10.8 billion in 2023.

The system has been a hotbed of opposition, with a three day nurses strike in 2023 and a two week strike by postdoctoral students. Physicians also voted to authorize strike action that same year. Both struggles were wound up with sellout contracts, which did nothing to address the main issues healthcare workers face, above all, understaffing. In 2024, the system was fined \$2 million by the state government for persistent understaffing at three of its hospitals.

“There’s no other hospital south of Beth Israel in Manhattan that has the type of facility that Beth Israel

has,” attorney Arthur Schwartz told FOX 5 New York. Schwartz represents a group of activists that sued to keep the hospital open. “There were almost 50,000 people last year that went to the Beth Israel emergency room. Those people will go to Bellevue Hospital, which has seen a 25 percent increase in its emergency room visits in the last two years.”

Mount Sinai Health System has long sought to close Mount Sinai Beth Israel. In 2016, the system announced a plan to build a new hospital with only 70 inpatient beds several blocks away from Mount Sinai Beth Israel, which would be closed and sold. Mount Sinai Beth Israel’s labor and delivery department and Continuum Center for Health and Healing were closed in 2017.

In late 2023, Mount Sinai Health System announced that it would close Mount Sinai Beth Israel by July 12, 2024, provided that the New York State Department of Health gave its approval (which it later did). The hospital cited losses of \$1 billion during the past decade to explain the closure.

New York City is home to 110 billionaires, which is more than any other city in the world, according to *Forbes*. New York’s billionaires have a combined net worth of approximately \$694 billion. The resources to keep Mount Sinai Beth Israel open are available, but the priority of the city’s government, whether under the administration of a Democratic or Republican mayor, is to safeguard and increase the wealth of these billionaires at the expense of the working class.

In response to Mount Sinai Health System’s announcement, activists founded the Community Coalition to Save Beth Israel Hospital, which filed a lawsuit to keep the hospital open. After a legal battle of more than a year, New York Supreme Court Judge Jeffrey Pearlman dismissed the lawsuit against closure

in February 2025. The hospital then set a March 26 closing date.

“As part of the transition, we will be opening our new expanded urgent care center located two blocks south of the hospital to coincide with this closure,” the health system said in a statement. But the establishment of a new urgent care center would not compensate for the loss of an emergency department. Urgent care centers are not staffed or equipped to treat patients with life-threatening injuries or illnesses. Moreover, they cannot adequately treat patients with psychiatric emergencies, who will have to go to Bellevue if Mount Sinai Beth Israel closes.

The Community Coalition to Save Beth Israel Hospital obtained a stay from a New York appellate court judge, and a panel of judges will now decide the hospital’s fate. In the meantime, Mount Sinai Health System has agreed not to close any further services.

The potential closure of Mount Sinai Beth Israel is part of a broader trend. A 2024 study reported in *Becker’s Hospital Review* found that 45 percent of rural hospitals in New York state were at risk of closing in the next two to three years. In addition, 57 percent of rural hospitals were at risk of closing in the next six to seven years. Nationwide, more than 700 rural hospitals are at risk of closure because of financial problems, more than half of which are at immediate risk of closure, according to *Becker’s Financial Management*. The bankruptcies of health systems such as Steward Health Care and Prospect Medical Holdings also raise the possibility of closures. The process underlying these closures is the subordination of healthcare to the accumulation of private profit.

At the same time, the administration of President Donald Trump is accelerating the bipartisan attacks on public health and science that have intensified since the beginning of the COVID-19 pandemic. Among other measures, Trump and his cabinet have frozen funding for medical research, cut hundreds of jobs at the Centers for Disease Control and Prevention and falsely suggested that the childhood vaccine schedule causes chronic disease. The American ruling class now regards all spending that does not increase military capabilities or enrich the financial and corporate oligarchy as wasteful.

For workers at Mount Sinai Beth Israel, and healthcare workers around the world, the conclusion to

be drawn is that the fight to keep hospitals open, defend science and improve public health is inseparable from the fight to mobilize the independent strength of the working class against both Trump and his enablers in the Democratic Party and the union bureaucracy, whose response varies between cowardice and collaboration. This means developing new organs of struggle, rank-and-file committees, to organize joint actions from below rather than waiting for “permission” which will never come from the tops.

This must be connected with a fight for the expropriation of the healthcare system, in order to remove the chief obstacle to providing high quality care: the profit motive.



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