



Budget Cuts at All Levels Threaten Medical Care

PRESIDENT'S MESSAGE



By Margaret E. Parsons, MD

AS I WRITE THIS, we face a state budget with a 10 percent cut to Medi-Cal. A Medicare cut of 10 percent faces the profession, too, and the U.S. Senate tries to find another annual fix to block the cut. Locally, our County Boards of Supervisors are dealing with the economic woes by implementing various strategies. Without question it is a challenging time for physicians and those we care for - our patients. All of these cuts are slated for implementation July 1.

The Medi-Cal cuts are being protested strongly by physicians and the California Medical Association. A suit by the CMA is making its way through court systems; the CMA hopes for an injunction to stop the cuts, and we shall see in coming weeks if that effort succeeds or not.

California's rates for Medicaid (which we call Medi-Cal) are among the lowest in the nation. Physicians simply cannot afford to provide care at a loss while their practice expense increases. Much of the Medi-Cal care in Sacramento County is provided through Geographic Managed Care; our other constituent counties, Yolo and El Dorado, use a mix of payment modalities for their Medi-Cal patients.

Federal Medicare cuts are being debated in the annual game of will they or won't they "fix" it for a year. It is a game played for far too many years now. We continue to hear promises of a "formula fix" so that we will not be continually lobbying on this issue and being unsure of a payment schedule until the deadline hits us.

In an election year, little major policy is enacted at the federal level, so we can only hope for a fix for this round of the game. There is talk of an 18-month fix. Lawmakers are also tired of playing this game every year. Unless the formula is fixed and answers found, Medicare will not be financially viable in 10 years. At deadline for this issue, the U.S. Senate had not agreed on a Medicare bill. If the impasse is not broken by early July, the Medicare cuts will go into effect.

The Sacramento County Board of Supervisors is making sudden and dramatic changes to the county health system. The Supervisors voted to change the current CMSIP system of providing care to the needy and jail inmates from a primarily UCD contract, which is cancelled effective June 30, to one managed by a third-party administrator and a Blue Cross Prudent Buyer product. County staff claims the move will save \$13 million.

SSVMS testified with concern about the vagueness and suddenness with which this change was made and how it will take effect in the community. We are concerned that those who have generously cared for patients at a lesser reimbursement will not have access to providing care to those patients they know well. We are concerned that patients will not know where to go for care. We are concerned that other hospitals and clinics are not set up to provide prisoner care, and lack the safety precautions that need to be in place.

We are sympathetic to Sacramento County's difficult budget challenges, but remain

concerned about the impact of dramatic and short-notice changes. How this plays out in the coming months will be interesting and there will be bumps (or possibly large hills) in the road. Please let us know at SSVMS of your experiences as this contract change moves forward. Understanding how individual physicians, systems, and patients are affected is important as we participate in discussions of how to best find answers to caring for the community.

Sacramento County has also had to closely look at other places to save dollars. It will markedly decrease hours at the Capital and Oak Park Clinics. Many public health programs, such as high risk perinatal care, are being cut back.

Yolo County's proportionally devastating shortfall led to a collaborative effort far in advance of any crisis between the four health systems, the county and the safety net providers, to find innovative solutions to both budget shortfalls and access issues.

We have seen the wonderful kindness of our many physician volunteers in the SPIRIT Program of the SSVMS Community Service, Education and Research Fund (CSERF). Other non-profit groups and clinics are also reaching out to those in need of care. Hopefully, we can learn from other counties and communities and build a network to reach those that need care.

Sacramento County's health system changes are drastic and will likely lead to challenges in the coming months. I hope this will be an opportunity to collaborate and creatively find answers, so all providers, systems, and various organizations in the community can benefit from a cooperative and shared effort on behalf of those needing basic health care in our region.

Our challenges as physicians are many. Organized medicine through SSVMS, CMA, AMA and our specialty societies all work to aid us in the financial, legal, and regulatory hurdles of medicine. Our personal involvement in many roles - as organization members, as community leaders, and as doctors caring for patients - plays into this as well. We are the voice for our patients and ourselves, to insure we will be able to practice medicine and care for patients.

I still think being a doctor is wonderful. Every day, I enjoy the challenges of combining science, medicine, a patient's story and training. And the "thank you" from patients or their family member makes it all worthwhile.

mepmd@ix.netcom.com

Sierra Sacramento Valley Medical Society
5380 Elvas Avenue #100 • Sacramento, CA 95819
916.452.2671 PH • 916.452.2690 FX • Email: info@ssvms.org

Copyright © 2000-2008 Sierra Sacramento Valley Medical Society - All Right's Reserved