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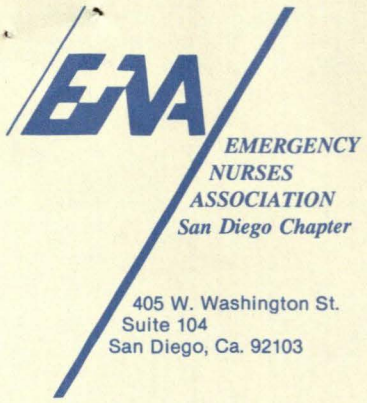

405 W. Washington St.
Suite 104
San Diego, Ca. 92103

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FEB 25 1991
Ans'd. ...

Feb. 25, 1991

Supervisor Leon Williams
Supervisor 4th District
County Administrative Center
1600 Pacific Highway
San Diego, Ca 92101

Dear Supervisor Williams,

On February 14th, County officials sent notice to 24 hospitals and 16 clinics in the area announcing the county's intent to terminate contracts which provide for care of indigent citizens under the CMS program. I'm writing on behalf of the Emergency Nurses Association and wish to express my opposition to this plan of action. ENA is an organization dedicated to the advancement of health care in the emergency setting, with some 21,000 members nationwide, over 300 nurses here in the San Diego area, and we have grave concerns regarding the impact of a CMS shutdown on the care provided to the citizens of our county. First, let me mention that I am aware of the financial constraints that face the board of supervisors and I certainly don't envy your task in setting the priorities for the use of the limited funds that our local government has to work with. To be sure, there are various political and civil factions all pulling in several directions, with legitimate concerns about the well-being of our county, requesting funding for law-enforcement, land development, and measures to preserve the quality of life in metropolitan San Diego. However, in the final analysis, that is what your decisions come down to; how to spend the dollars that we have available.

There are a few items that I would like for you and your colleagues to consider. I know that over the years you have all heard from the various hospitals in the area how the reimbursement for the indigent patients in the county is woefully inadequate, yet the hospitals continue to provide undercompensated care to the degree that state and federal laws mandate, until they simply can no longer afford to remain open. Such was the case recently with the (possibly temporary) closure of San Diego General. While this facility was never financially viable, it is doubtful that any

other facility filled a greater need for the community it served. My concerns are not just for the closing of some of the smaller institutions around the county, though this is surely a heightened possibility if CMS ceases to operate. I am concerned about what will happen to the facilities that do survive and the impact that this decision will have on their ability to provide care to all the citizens of our county, not just those covered by CMS funds.

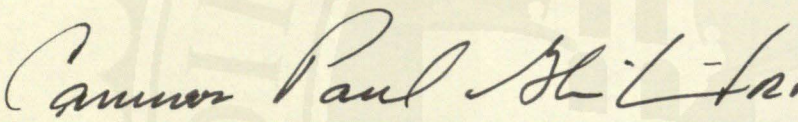
This proposal will severely affect the various out-patient clinics that serve the working poor of the county. Many of these clinics serve the needs of those clients with chronic illnesses such as diabetes and hypertension, which can be managed efficiently and cost-effectively on an out-patient basis. However, with the end of CMS, these individuals, which some estimate to be between 25,000 and 35,000 at any given time, will have no other recourse but to seek medical attention in the emergency departments around the county. In a time when many of the E.D.s in town are already saturated for significant portions of the day, it is easy to see a case similar to that experienced in Los Angeles, where ambulances with critically ill individuals roll around from E.D. to E.D. looking for a place that can accept their patients. The people in those ambulances, or those who wait in hospital lobbies for hours on end to receive medical attention, will not necessarily be the indigent, for hospitals are still mandated to treat all patients without regard for or discrimination based on their funding status.

It is tempting to get melodramatic in these instances where hard decisions have to be made. Last week, Steven Schubert, executive director of the San Diego Council of Community Clinics, was quoted as saying, "I can tell you flatly there are people who will die." I fear that this is not an exaggeration. Should CMS cease to operate, the medical care afforded to the citizens of San Diego County may well become inadequate to meet the needs of the population. And the compromises will not be limited to the poor, it will cut across all socioeconomic boundaries.

I always hesitate to point out problems without providing possible solutions, and in this case, I fear that I don't have enough background in federal, state, or local budget issues to make reasonable suggestions to the board about viable alternatives. I am aware that there are efforts being made by several individuals and groups at this time to avert this crisis by finding a source of funding adequate to meet the needs of the program. It is my sincerest hope that this will come to pass, but if funds can not be found, I would again encourage the board of supervisors to examine the agendas before them and re-order their priorities carefully.

Our forefathers claimed, and it has been reasserted through the years that we have certain inalienable rights, including life, liberty, and the pursuit of happiness. The citizens of San Diego County will probably live without another park, could survive with one less freeway, and may be able to develop a cultural heritage with one less library, but there are people who will cease to exist if we don't find a way to provide medical care for individuals whose only crime is poverty. On behalf of the Emergency Nurses Association, representing over 300 health care professionals in the county, I strongly encourage the board of supervisors not to terminate the operation of County Medical Services on March 15, 1991. Thank you in advance for your consideration in this matter.

Sincerely,



Cameron Paul Glibert, R.N., C.E.N., M.I.C.N.
President, San Diego Chapter
Emergency Nurses Association