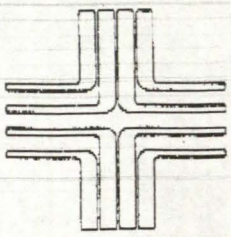

UCSD
MEDICAL CENTER
University of California, San Diego,
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225 Dickinson Street
San Diego, CA 92103-1990

Office of the Director

VIA TELEFAX

February 21, 1991

The Honorable John MacDonald, Chairman
San Diego County Board of Supervisors
1600 Pacific Highway
San Diego, California 92101

RE: COUNTY MEDICAL SERVICES PROGRAM

Dear Supervisor MacDonald:

This is in response to the County's letter of intent to terminate all County Medical Services (CMS) Agreements effective March 15, 1991. The University is gravely concerned about the County's intent to dismantle the Program in light of the devastating impact this action will have on patients.

UCSD was, and remains, very supportive of your Board's decision last September to pursue newly legislated revenue sources to continue operation of the CMS Program. That decision confirmed the Board's recognition of the key role the Program plays in maintaining San Diego's already fragile indigent care safety net. While we understand that the decision to continue the Program relied upon as yet untried revenue sources, it is also true that those sources are secured by legislative action and authority for precisely this purpose.

It is our understanding that the recent decision to dismantle will be under consideration by the Board on February 26, 1991, but that the County has not yet pursued all potential revenue sources. For a number of reasons, we feel strongly that all remedies must be pursued prior to taking this action:

- First, and foremost, because of the devastating impact this action will have, not only on CMS patients, but other indigents currently served by CMS providers. This action would be enough to cause some providers to reduce or eliminate services.

- Second, without exhausting all remedies, the funding issue would become one of local government "discretion" and local legal challenge. I do not believe anyone affected would look forward to deflecting efforts and energy to disagreements amongst ourselves.

- Third, the decision would jeopardize the flow of millions of dollars of Tobacco Tax revenues for health care into San Diego County. As you aware, this would have almost the same impact as termination of the Program.

- Finally, providers, provider and consumer associations and the County will have limited recourse with the State relative to MISP and other indigent care funding--the State will simply refer us back to the County, once again confusing the issues and responsibilities to their advantage.

The University, especially, does not want the State to succeed in breaking apart the public-private coalition that has been so effective over the past few years. It is important that we continue to develop and present a united front relative to indigent care responsibilities and funding.

To that end, we urge your Board to exhaust all potential revenue sources and all remedies prior to considering this action. If there are successful legal challenges to the County's revenue raising authority, the blame, and the resolution, must be laid at the State's doorstep. If declaration of a state of emergency is within the power of the Board, or any individual within the County, that action should be taken and relief sought from the State. If the State refuses to release funds legally due, legal pursuit of damages should be implemented. The further erosion of the health care delivery system in San Diego cannot be allowed without a fight-- there is simply too much at stake.

UCSD, and the University, stand ready to work with and support your Board, your administration and the Department of Health Services staff in your efforts to continue the CMS Program and to improve access to health care for San Diego residents.

Sincerely,

MICHAEL R. STRINGER
Director, Hospitals
and Clinics

cc: Vice President Cornelius L. Hopper, M.D.
Supervisor George F. Bailey
Supervisor Brian P. Bilbray
Supervisor Susan Golding
Supervisor Leon Williams
J. William Cox, M.D., Ph.D.
Norman W. Hickey
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