

DAVID QUACKENBUSH: Health care cuts threaten us all

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By David Quackenbush

After months of uncertainty, California leaders have a signed state budget that addresses the state's \$41 billion deficit. However, the budget came at a cost, a cost that will be paid by the state's most vulnerable populations in communities throughout the Valley.

The state's Medi-Cal program provides access to health care to thousands of low-income families every year.

Now with this new budget, the state is attempting to cut benefits -- including dental care for adults, psychology, chiropractic, optometry, acupuncture and podiatry services -- that have been in place for years and are now in a precarious situation as their fate has been tied to federal stimulus funds.

These benefits ensure families' preventive health care needs are taken care of and keep chronic diseases at bay and patients out of emergency rooms.

By April 1, the state treasurer and the department of finance must determine whether or not federal stimulus funds are adequate to save Medi-Cal optional benefits. If the determination is that the California federal stimulus funds fall short, then these optional benefits will come to a halt on July 1, 2009 -- causing an undeniable domino effect that will threaten the integrity of the state's health care safety net.

The Central Valley Health Network -- a network of Federally Qualified Health Centers serving more than 200,000 Medi-Cal beneficiaries in 124 clinical sites each year -- will be placed in the overwhelming position of meeting the growing demand of health care services with fewer resources.

It's interesting that Medi-Cal refers to these types of benefits as "optional" when really the word they have in common is "preventive." All of these services are geared toward promoting good health and preventing disease in addition to treating pre-existing illnesses.

Preventing disease is much cheaper than curing a disease that already exists. We can pay now to prevent disease or pay more later for conditions we could have avoided. Moreover, we will be paying more for these patients in hospital emergency rooms and specialty care.

Even if this argument does not convince you, remember that you are reading this in a county with rising unemployment. How certain are you that you (or someone you care about) won't need the services of a federally qualified health center in the near future?

Today, federally qualified health centers are in a waiting game to see whether or not optional benefits will be saved. The irony is two-fold as many individuals, providers and patients alike do not consider these benefits to be optional, but essential in order to have positive health outcomes and a basic quality of life.

Additionally, federally qualified health centers are required by federal law to provide services that are considered by the state to be an optional benefit, therefore placing community health centers in a financial conundrum of providing required health care services that are deemed to be optional by the state.

The effects of the possible cuts to optional benefits will be seen and felt in the reduction of clinical staff and services, and increased wait times and travel distances for patients, which in the end, adds to and creates new barriers for those accessing necessary health care services. It is this lack of sufficient access to services that bears a heavy financial burden and cost to the state as individuals are forced to rely upon emergency rooms for their medical needs.

As we continue to wait for health care reform with the hopes that come with a new president, we must work to maintain the services we currently offer. None of us knows when our employment may be threatened or a personal crisis may occur, and when we will need to access these services in the future as a result.

The prudent and most logical approach for our state's policymakers to take is not to threaten the viability of federally qualified health centers, upon which more and more people each day are relying for their health care needs. Rather, we must ensure the continuation of all Medi-Cal benefits and embrace this model of care that continues to be recognized as cost-efficient and effective in producing healthy outcomes.