

## **Inside the Crisis at the Alameda County Medical Center**

In my column last month, I wrote about the importance of Measure A, Alameda County's half-cent sales tax, which will save lives by providing essential funds to the County public health care system. Since then there have been articles in newspapers, segments on local news programs and information flying across the internet about Measure A; some favorable, some critical. Much of the criticism about the County's public health care system focuses on the management of the Alameda County Medical Center (ACMC).

As a member of the Alameda County Board of Supervisors, I do concede there has been poor management at the Medical Center, which includes Highland Hospital; and we have been slow to take corrective actions, such as essential changes at Highland Hospital. However, it is inaccurate to say that the lion's share of the deficit at the Medical Center is due to mismanagement. There are three major contributors to the deficit at ACMC. First, the rising cost of providing health care. Second, the usual "supporters" our federal, state, and local government, no longer have money to give or loan to our health care system. Third, the rising number of people that are using the system require more intensive care. It is important to mention that public hospitals throughout California are in the same boat. The "revenue/expenditure gap" for public hospitals statewide is \$3 billion.

A closer look at the rising cost of providing health care reveals that the immense nursing shortage, rising pharmaceutical costs, increased medical malpractice rates, inadequate staff allocations, costly technological advances and the need to insure that medical facilities are seismically safe, are driving the cost of operating the ACMC through the roof.

The mission and mandate of the public hospital system is to serve the health care needs of all residents regardless of insurance status or ability to pay. Increasing fees to patients is hardly an option. The irony of the situation is that the State of California, which is responsible for providing revenue to support and maintain our safety net, often balances their budget on the backs of the public hospital system. One way that our state and federal government close their budget loopholes is by decreasing the reimbursement rates for serving Medi-Cal clients or reducing our share of the Disproportionate Share for Hospitals, a federal reimbursement mechanism. Such actions reduce the revenue available for our public health care system to serve our uninsured or underinsured patients.

Finally, our clients need more intense treatment when they find their way to our doorstep. This issue is tied to the economy. As the "jobless recovery" continues more people are left without health insurance; these residents find themselves using county hospitals and clinics. Furthermore, people without health care wait longer to see a doctor, so when patients arrive at the clinic or at Highland, they are even sicker and require more costly and intensive care.

The challenges facing the ACHC are three-fold. First, the cost of running the hospital and providing care is dramatically increasing. Second, the requests for assistance, which were once honored, are now falling on deaf ears. We in local government are told, there is no money for seismic upgrades or other necessary safeguards or services for our public hospitals and clinics. The continued battle over the Vehicle License Fee (VLF) funding and the backfill continuously looms in the background. The VLF is one of the largest sources of revenue for local government. The VLF has been historically used to plug holes in health care and other areas; we have lost those dollars in previous years, and those dollars are at risk in the upcoming fiscal year. Finally, the people accessing the system are in greater need.

Once again, the issue of essential service delivery is becoming a political game, and those that use the services will suffer. It is fair to raise the issue of how the County is spending and managing its money. However, just raising the question is not sufficient, one must research the answer. The revenue streams designed to fund the public hospital system are unstable. Any unbiased evaluation of the situation will yield that conclusion. The weak economy means the money coming in to treat patients is decreasing while our patients' needs increase. All of this is happening while the cost of providing care is rapidly on the rise.

Measure A provides Alameda County residents with an opportunity to provide a stable funding stream for our public health care system. As we head into the final stretch of the campaign, we need your help more than ever. Volunteers are needed everyday at the campaign headquarters, 2135 Broadway. Please drop by or call, 510-251-1070 and schedule yourself to volunteer. Measure A saves lives; please help our community pass Measure A.