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Primary concern should be health care

By RONDA KOTELCHUCK and THOMAS ROSENTHAL

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It's not a question of if, or even when. We're in the middle of a primary care crisis now, and we're not even close to being prepared for the full brunt of its impact.

Community health center executives in the Capital Region and the Adirondacks have been left scrambling as deficits, woefully low reimbursement rates and high costs of providing services to the uninsured or underinsured finally caught up with them.

First, Hometown Health Centers announced it would pull medical and dental services from the Schenectady County Jail and close its primary care practice at Ellis Hospital because of soaring costs of caring for uninsured patients, for whom the nonprofit health center guarantees care. Hometown is the only federally designated health center in Schenectady County, part of a program to improve the provision of primary care services in underserved urban and rural areas.

Then it was Hudson Headwaters Health Network, the nonprofit system of community health centers that provides essential primary care services to more than 60,000 patients in an area of the Adirondacks twice the size of Rhode Island. For many Adirondacks residents, Hudson Headwaters is the only recourse when it comes to nonemergency health care. With a \$1.5 million shortfall caused by staggeringly low reimbursement rates from private insurers (up to 30 percent lower than what Medicaid and Medicare pay), Hudson Headwaters was forced to demand higher rates or cut their patients off entirely, which would result in the end of health care for tens of thousands of New Yorkers.

Thankfully, at least two of those insurers have to raise their reimbursement rates to keep Hudson Headwaters afloat.

In both situations, the health centers were putting the figurative finger in the leaky dam. With signs of cracking for the past two years, it was inevitable that more drastic signs of trouble in our system would appear.

In August, Dr. John Rugge, who runs the Hudson Headwaters Health Network, and the New York Association of Counties hosted a summit nicknamed "A Boston Tea Party" to push for swift action by the governor and state leaders on primary care. They were seeking state funding for community health centers, a mandate that insurance companies pay comparable rates to the centers and commercial providers, and the release of bottlenecked state funds for uncompensated care.

The summit was called as health center leaders saw their deficits steadily increase and as doctors in upstate rural New York, disappointed with low reimbursement rates, continue to flee to other states and more urban and wealthier regions. (This month, Hudson Headwaters announced it had lost another four doctors, while Adirondack Medical Center, an acute care facility, announced it lost three, with a fourth leaving in December.)

The exodus of primary care physicians bespeaks a system in distress. And though the previous issues posed their own problems, only now are we seeing the threatening damage they foretold.

The Band-Aid solutions sought by Dr. Rugge and Hometown Health Centers CEO John Silva through stop-gap monetary infusions were true acts of desperation and bought them but scant time in their mission to rectify the epidemic that is plaguing community health centers across the state. And the problem doesn't stop at health centers. Only 17 of New York's 62 counties have 50 percent of their physicians involved in primary care, as called for by the American College of Physicians. That means few doctors aren't going into private primary care practice, either.

Should the foundation falter and the dam that holds the floodwaters of patients back from hospitals and ERs across the state breach, the consequences are almost too obvious to repeat. With inadequate primary care capacity, we're seeing unprecedented and exponential growth in the rates of chronic diseases like diabetes, asthma and obesity. Not to mention hospital emergency rooms crammed with patients.

If this is the case when our primary care system is at best inadequate, try imagining if pieces of it were not to exist.

Ronda Kotelchuck is executive director of the Primary Care Development Corporation and Dr. Thomas Rosenthal is director of the state's Area Health Education Center System. They are founding partners of the Primary Care Coalition, which also includes the Community Health Care Association of New York State, the New York chapter of the American College of Physicians and the New York State Academy of Family Physicians.

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