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Doctors decry emergency room cut

March 9, 2011 | [Christina Jewett](#)



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A relatively small cut in the grand scheme of the California budget is creating a significant stir among emergency room doctors.

Last week, lawmakers voted to eliminate a \$55 million fund that's used to pay for care to uninsured patients who wind up in emergency rooms. Whether emergency rooms get the money or not, **they are mandated by federal law** to render basic treatment to all patients who come with a medical emergency.

To help fund such care, a "Maddy Fund" was set up in about 50 counties, comprised of fines collected for certain traffic violations.

The budget committee **approved moving that money** into the general Medi-Cal funding pot, where it would be matched, dollar for dollar, with federal funds. The logic behind the cut is the notion that a **recently approved federal waiver** will expand care to the uninsured, **according to the budget document**.

But the waiver **only expands care to 500,000 [PDF]** uninsured Californians, according to the Department of Health Care Services.

That still leaves about 6.5 million people without emergency care coverage, said Dr. Peter Sokolove, president-elect of the California chapter of the American College of Emergency Physicians.

He said the fund is best set aside for emergency care, which is already strained.

Sokolove said emergency rooms already stand to see a major impact from past and pending budget cuts that slash payments and create holes in the mental healthcare safety net. Additionally, he said a proposed **cap on primary care visits** may result in greater emergency room pressure.

"There are many emergency rooms hanging on by a shoe string, and these funds are critical to keep them open," Sokolove said.

Sokolove said the funds are particularly helpful in assuring that specialized doctors such as ophthalmologists and neurologists agree to be "on call" to see emergency room patients.

"At many community hospitals, it's difficult to get a specialist to see a patient when they need their services," said Sokolove, who is also an emergency room physician at UC Davis Medical Center.

And **a recent study** shows that one in five patients who seek care at a California emergency room leave without being seen by medical professionals. Patients were half as likely as average to be seen at hospitals widely considered to comprise the "safety net" – teaching hospitals, county hospitals and trauma centers.

The study noted that patients seeking care in affluent areas are more likely to get it. The findings showed that as household income in the area near the ER went up by \$10,000, so did the number of patients who received care.

The Maddy Fund cut, though, would affect people regardless of income, Sokolove said. He said the cuts could reverse a **trend that hospitals worked hard to achieve** – a reduction in hours of "diversion," or times when

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My Priorities: *Health care costs a quality; state oversight of health at welfare systems; elder care; medical devices.*

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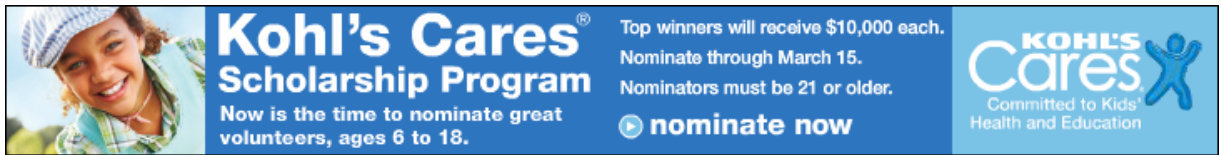
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