

**Testimony Submitted to the Senate Committee
on Public Health and Welfare
Regarding Public Clinical Services Available in
Chester County, Pennsylvania**

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April 15, 2008

On behalf of the staff of the Chester County Health Department (CCHD), I would like to thank Chairman Erickson, and all of the members of the committee for the opportunity to testify about Chester County's public health clinics and what is being done to improve access to health care in Chester County. My name is Margaret Rivello and I am the Public Health Administrator for the Chester County Health Department. Our Health Department is one of the 10 local health departments in the Commonwealth created under and funded in part by Act 315 Local Health Administration Law. Our main office is in West Chester, we have three satellite offices, and as there is minimal public transportation in our County, we have temporary clinic locations at various community sites throughout the County.

Chester County Health Department Clinical Services

As a public health department, our primary focus is prevention; thus our home visiting and clinical services are preventive in nature. We do not offer primary care services as are provided by federally qualified health centers, volunteer, hospital based, and nurse-managed clinics.

Clinical services provided by CCHD include:

- Child Health 3-4000 children
- Immunizations (children and adults) 20-22,000 immunizations
- Sexually Transmitted Diseases/HIV/AIDS 800-900 patients served
- Chest (Tuberculosis) 1200-1300 patients
- Women, Infants and Children (WIC) 6,500 participants
- Chronic Disease Screenings 3,500 participants

Our Department also provides an extensive home visiting program for prenatal and post partum patients and as part of our communicable disease investigation program.

Annually, our nurses complete 4,000 home visits.

Other Public Health Clinics in Chester County

Chester County is very affluent; however, there are pockets of poverty throughout the County. Low income residents in these areas find a medical home at one of the safety net public health clinics who help the uninsured and underinsured residents access primary care. These clinics are vital to our County as they treat patients at the least costly level. The Chester County Health Department regularly refers patients to these clinics and our staff collaborates with them to address health care needs that are identified across the County.

- ChesPenn in Coatesville – federally qualified health center located in a medically underserved area (MUA) ;
- Chester County Community Dental Center – stand alone non-profit that accepts Medical Assistance (MA), CHIP and private insurance and offers a sliding fee scale for working poor; located in a dental health professional shortage area (HPSA);
- Chester County Hospital’s Prenatal Clinic – sponsored by the only remaining independent community hospital in Chester County; accepts MA and offers a reduced fee payment package for the working poor for both prenatal care and delivery.
- Community Volunteers in Medicine – a full service medical and dental clinic that follows Volunteers in Medicine model, does not accept any government or third party payments, and is sustained by 100% philanthropy;
- Project Salud/LaComunidad Hispana – nurse managed health center that accepts Medical Assistance (MA), CHIP and private insurance and offers a sliding fee scale for working poor; over 85% of their patients are uninsured;
- The Clinic in Phoenixville – volunteer run, stand alone non-profit.

These agencies provide quality health care to people who, if these safety net organizations were not in place, would turn to the emergency room for care. This, as you know, is very costly and does not result in on-going health care for the patient. When a resident gets involved with one of the safety net providers, they have access to consistent, quality health care, which enables them to work or go to school. Chester County hospitals have seen a decrease in their primary care emergency room visits because this safety net is in place.

Challenges Chester County's Safety Net Providers Face

Health provider shortages especially in the fields of nursing and advanced practice nursing, as well as long range projected shortages of doctors, dentists, and therapists are an on-going challenge for our clinics. Our safety net providers are competing with larger health systems that need employees in these same disciplines. And, because of our large and steadily increasing Latino populations, we need providers who are bilingual and bicultural.

All clinic sites are experiencing increasing numbers of uninsured and underinsured patients. Projections locally, as across the nation, are that this trend is to continue. The uninsured in our County is not just people who are poor, but also recent graduates, people working as independent consultants, and people running their own small businesses. Similarly, families that have high health insurance deductibles or senior citizens needing help with medications are people who are underinsured. Annual double-digit increases in health premiums and current economic challenges are causing a lot of businesses to reduce or eliminate the health insurance benefits provided to their employees.

Our County is experiencing increasing numbers of immigrants, both documented and undocumented, who are attracted to Chester County because there are employment

opportunities. They are working at entry level, low-paying jobs that many residents will not consider. Unfortunately, these jobs do not provide health care benefits.

Our population in Chester County, as across the State, is aging. Many of these individuals have or are in the process of developing medical conditions that require multiple medications. In some instances they may qualify for the PACE program, in many instances, this may not be the case. Still others will retire without health benefits and/or live on a limited income.

Governor Rendell's Prescription for Pennsylvania plan proposes the funding of new federally qualified health centers (FQHC) across the Commonwealth. These designations are difficult to obtain, especially in an affluent area like Chester County. Our safety net providers are already serving areas of need across our County that will never qualify for health professional shortage area or medically underserved area designations.

FQHC's, because of their designations, receive financial incentives that other types of public health clinics cannot (free malpractice coverage, pharmacy benefits, Medical Assistance wrap around reimbursement). Making these same incentives available to all public health clinics would go a long way in helping non-FQHC providers minimize their deficits at the end of their fiscal years.

Research has shown there is a significant relationship between oral health and physical health. Access to oral health care -- preventive and restorative -- is critical to keeping our uninsured and underinsured populations at work, in school, and out of the hospitals. Governor Rendell's plan only covers emergency dental. Our safety net dental providers are treating patients, young and adult, that have severely decayed mouths wrought by years of poor or no oral hygiene. Poor oral hygiene is associated with heart disease, diabetes, low

birth weight babies, osteoporosis and other medical conditions. Emergency dental care is too little, too late.

All of our safety net providers rely on grant writing and philanthropy to cover the gap between what third party payers provide and the costs of their services. These resources are finite, are very competitive, and are critical to the organization's bottom line.

The lack of inadequate reimbursement from managed care organizations also contributes to the financial instability of our clinics. Medical Assistance reimbursement rates continue to be very low while the paperwork and bureaucracy associated with the program continues to increase. Several of our safety net providers were specifically established to serve residents who were falling through the cracks. There were patients throughout our County that had MA coverage, but could not find a private practitioner who accepted their insurance coverage.

Conclusion

Chester County is blessed to have the network of safety net providers that we have in place; not many other counties across the Commonwealth are this fortunate. These entities are increasing access to medical and dental services throughout the 760 square miles of our County without duplicating services.

I sincerely appreciate the opportunity to testify in front of the committee. On behalf of all of the public health clinics in Chester County, I thank you for your time and interest in our work to improve the health of vulnerable individuals and families.