

Nonprofit clinics to receive boost from federal grants

By Keith Darcé
STAFF WRITER

As the recession costs more people their jobs and health insurance, community clinics are struggling to keep up with surging demand from those seeking free or low-cost medical care.

But a \$338 million infusion from the federal government's economic stimulus grants should help keep clinic systems — including nine in San Diego County that received a total of \$6.8 million — financially viable over the next two years.

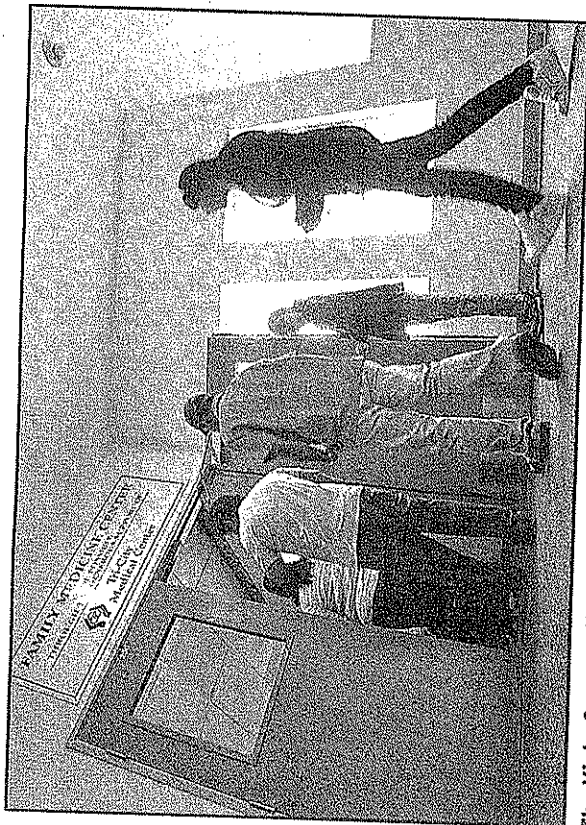
Federal officials have fast-tracked

delivery of the money in recognition of the special role that nonprofit clinics play in serving the uninsured, who have few options when seeking primary health care.

The grants, which were awarded last week, must be spent on expanding patient rolls and hiring more doctors, nurses and clerks.

They are among the first payments from the American Recovery and Reinvestment Act to reach local organizations. The measure is a \$787 billion package of stimulus spending and tax

SEE Clinics, A16



The Vista Community Clinic will use much of its federal stimulus grant money to serve patients who recently lost insurance. John Gastaldo / U-T

CLINICS

CONTINUED FROM A1

CEO reports serving more middle class

Cuts signed by President Barack Obama on Feb. 17.

"The increases (in uninsured patients) that we have seen and the shift on the ground that we are feeling has been tremendous," said Jeannette Lawrence, director of government and community relations for the Family Health Centers of San Diego. "This will get us through the worst of this time."

Lawrence said the grants couldn't have come at a better time for the network, which was allocated \$2.2 million.

Family Health's 15 clinics treated 13 percent more uninsured patients between November and January than during the same period a year earlier, Lawrence said.

The grant will enable Family Health's doctors and nurses to care for 5,600 more patients over the next two years, she estimated. About 63 percent of those new patients won't be covered by a health insurance program.

Community clinics typically operate in lower-income areas that lack access to traditional physician groups. Their staffs handle everything from colds and flu to chronic conditions such as diabetes and asthma. They also offer specialized care for women and children, and some clinics operate pharmacies, dental offices and vision centers.

Clinics charge uninsured patients on a sliding-fee scale that doesn't always cover the full cost of their services. They typically compensate for shortfalls with the money they make from patients covered by Medi-



Rosa Zamora (front) works for the Vista Community Clinic system, which runs five clinic sites in Vista and Oceanside.

Cal and private insurance plans. That balancing act has become more difficult in recent months as the mix of patients has shifted dramatically toward low-fee payers.

Many of the 20 new patients now arriving each day at Neighborhood Healthcare's clinic in Temecula recently lost their jobs, said Tracy Ream, chief executive of the inland network that stretches to El Cajon.

"What we are seeing is more of the middle class coming in for the first time because they don't have insurance," she said. The patients tend to be sick-er because they have put off seeking medical care for

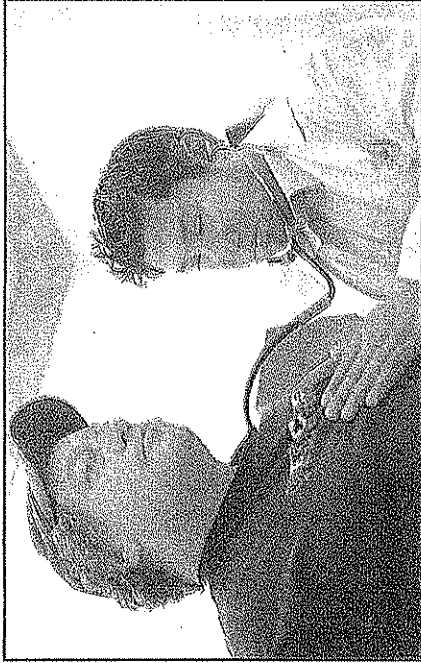
months to save money and keep up with other bills, said Dr. Brian Bedolla with the Vista Community Clinic system in North County.

Some diabetics haven't been to the doctor in eight months, he said.

"They will come in and their blood pressure and sugar levels are quite high. That definitely takes a toll," Bedolla said.

Local clinics plan to spend the grant money in different ways.

Neighborhood Healthcare, for example, will use its \$1.1 million to staff a newly built pharmacy in El Cajon, expand psychiatric care and hire two



Dr. Brian Bedolla tended to patient Geoff Bourbonnais on Friday at a Vista Community Clinic. John Castaldo / U-T photos

COMMUNITY CLINICS BY THE NUMBERS

Nonprofit community clinics offer a broad range of free or low-cost medical services, including vaccinations, prenatal care, treatment for diabetes and testing for sexually transmitted diseases.

16: Community clinics in the county
98: Clinic sites across the region
500,000: Patients served per year

1.4 million: Patient visits annually
SOURCE: Council of Community Clinics

more physicians or nurse practitioners.

Imperial Beach Health Center will devote its \$200,332 to hiring another doctor and extending evening and weekend hours at its single clinic location.

The \$438,855 awarded to San Diego Family Care will maintain seven jobs at the three-clinic network and allow for the hiring of a physician and a medical records clerk.

Family Health Centers received the largest grant, while the clinic at St. Vincent de Paul Village in San Diego got the smallest amount — \$151,674.

Clinics nationwide submitted plans to federal officials de-

and overdue health screenings, including a mammogram. But four medical offices turned her away because she was uninsured.

Many of the clinics now struggling to care for newly uninsured patients already were reeling from recession-induced investment losses and reduced state funding caused by California's budget crisis.

Included in those state cuts was money from the Office of Family Planning for programs aimed at preventing teenage pregnancy.

Family Health Centers' teen health clinic in San Diego's Barrio Logan neighborhood lost \$190,000 in annual funding and was forced to lay off four workers — half its staff, Lawrence said.

Even before the recession took hold, 46 percent of community clinics in California were losing money, according to a March report by the California HealthCare Foundation.

The state's funding decline is expected to deepen in coming months as Gov. Arnold Schwarzenegger and lawmakers in Sacramento move to plug a growing budget deficit. Clinic operators warn that they could cut significantly into programs that provide money for clinics' mental health, dental and vision services.

Clinics are trying to offset government cuts with funds from other sources, but it's difficult to determine how much of a shortfall they will face because California's recently passed budget depends on passage of several ballot measures in the May 19 special election and other evolving factors, said Ream, the Neighborhood Healthcare CEO.

One thing is certain, she said. Less state funding will undermine the ability of clinics to care for the growing number of people who can't afford more conventional health care.

"Where will those patients go?" Ream said.

Onlines: To see a list of clinics in the region, go to ccc-sd.org and click on the "clinics" button.

..... scribing how they would use the stimulus grants. The specific amount awarded to each organization was calculated based on a formula that considered the clinic's total number of patients and the proportion that is uninsured.

The money will help people like the woman in her early 50s who arrived Monday at the Neighborhood Healthcare office of Dr. James Schultz, the clinic's chief medical officer.

Two years ago, the woman made \$190,000 working as an executive in the banking industry, Schultz said. She was laid off and remained unemployed for months before taking a \$12-an-hour job in Los Angeles that required a grueling commute and didn't provide health insurance.

She lost custody of her son in a divorce, and lenders were threatening to foreclose on her home. The troubles sent her into a deep depression.

"She was just about ready to kill herself," said Schultz, who didn't name the patient for privacy reasons.

The woman's psychologist told her to see a physician for an antidepressant prescription