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Project Access Now

An emerging charity health care program intends to serve the metro area's uninsured patients by selling enough doctors on providing free medical care

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The stage was set for a personal disaster.

Unable to afford health insurance at age 64 -- just four months shy of Medicare eligibility -- Clarel O'Sullivan learned she had malignant skin cancer.

But to O'Sullivan's amazement, the free clinic where she sought care wasted no time finding a surgeon and hospital willing to treat her. Ten days after the positive cancer test, the retired English teacher emerged from surgery free of cancer -- and nearly free of debt.

Legacy Good Samaritan Hospital marked down O'Sullivan's bills by 90 percent. She owes \$1,300 total, which she's paying back at \$55 a month with no interest. Surgical oncologist Kate Morris worked without a fee.

"She did a beautiful job," O'Sullivan said. "I'm not even going to have a scar."

The case illustrates the vision of an emerging charity care network in the Portland metro area, called Project Access Now. Developers hope to build a system spanning the four metro-area counties in which the neediest uninsured could gain quick access to needed care. The immediate challenge: selling enough doctors on the idea.

Groups backing the project include private, nonprofit free clinics such as Wallace Medical Concern, where O'Sullivan sought care, federally funded health centers, and the Medical Society of Metropolitan Portland.

All of the hospitals in the four counties have committed to accept referrals, and many are providing technical support, said Andy Davidson, president of Oregon Association of Hospitals and Health Systems.

The project's ultimate reach, however, depends largely on how many individual physicians commit to providing free care.

"About 3,000 physicians practice in the metro area," said Linda Nilsen-Solares, executive director of the nonprofit project, incorporated in April. As it stands, the network's roster of volunteers lists 30 doctors and four specialty clinics.

"We'd like to get at least 60 percent of all practicing physicians," Nilsen-Solares said.

Charity care declines

But doctors across the nation have been cutting back on free care for the uninsured.

The percentage of doctors offering free or reduced-cost care has fallen from more than 76 percent in 1996 to about 68 percent in 2004, according to the most recent survey by the Center for Studying Health System Change.

Physicians seem to be deciding that they no longer can afford to provide charity care, according to survey co-authors Peter Cunningham and Jessica May. Physician incomes have fallen in recent years as government and private insurers cut fees. At the same time, surging demand for care since the late-1990s has pushed up work hours for doctors who are in short supply.

Project Access backers hope to reverse the trend by making it easier for doctors to volunteer their time -- and by spreading the workload across a broader group of regular volunteers.

Those who volunteer will be able to set limits on how many uninsured patients they accept. As a guideline, Nilsen-Solares said, the project suggests that specialists take 12 patients a year and primary care doctors take six patients a year.

Morris, the surgical oncologist, believes the charity-care network will help solve one of her greatest frustrations: seeing patients with many different health needs, but not knowing where to refer them if they lack insurance. One recent patient needed a colonoscopy, but Morris didn't know whether any local gastroenterologists would agree to see him.

Morris also has deeper personal reasons for volunteering.

"This is why most of us go to medical school," she said. "It's just really a joy to be able to help people."

Medical care network

The project has a leg up in Multnomah County, where free clinics and federally funded health centers have run a specialty referral project for 20 years. But with a limited number of participating doctors, the program has the capacity to serve only about one-tenth of the people in need.

To expand the program, the local group is drawing inspiration and guidance from the American Project Access Network, a national, nonprofit organization that helps communities coordinate charity care for low-income, uninsured people. The network grew out of the efforts of a county medical society in Asheville, N.C., that began a small, community-focused health reform campaign in 1996.

Within three years, the North Carolina group boosted physician participation from 25 percent to 90 percent. As more people gained access to routine medical care, local hospitals logged a significant reduction in emergency room use by the uninsured. To date, more than 50 communities across the nation have adopted the Project Access model.

Program not enough

Still, the rising numbers of uninsured people are bound to far outpace the capacity of a donated-care system, research suggests. An independent review of three Project Access-style programs in 2006 found that each program served about 200 to 300 people. In the metro area, an estimated 244,000 residents, or about 15 percent of the population, lack health insurance.

"It's putting a Band-Aid on a hemorrhaging artery," said Morris. Financing, she said, has degraded to the point that even patients with insurance increasingly struggle under huge debts because of the high costs of cancer treatment. But, she added, "You've got to start somewhere. You can't always create world peace and feed everyone, but Ms. O'Sullivan got good care. That's the point."

The hospital association's Davidson agreed that only congressional action could comprehensively solve the problems of the uninsured and underinsured. And in a telephone call during a lobbying trip to Washington, D.C., on Monday, he expressed optimism that such reforms are coming.

"I certainly hope that in five years, there's not a need for Project Access," he said. "Until we get to that point, we have got to have a bridge."

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