

# THE ST. LOUIS AMERICAN

## Healthcare report addresses sick system

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**ST. LOUIS -- Nearly one in four St. Louisans do not have medical insurance or rely on Medicaid for their healthcare expenses.**

**According to a report released by the Regional Health Commission today (April 10), the uninsured are forced to navigate a health care system that is often disorganized, under-funded and has a shortage of physicians who provide specialized care.**

The report, "Building a Healthier St. Louis," examines the region's tangled web of clinics and community health centers that act as a safety net system for the uninsured and the underinsured.

While clinics and health care providers are located throughout the city for easier access, the report found that there are often not enough specialists such as cardiologists, gastrologists and dentists to meet the needs of the population.

In addition, patients may wait for up to three months to get an appointment.

The report found St. Louis' healthcare system would require \$460 million to provide basic and specialty care services. Currently, the system spends close to \$294 million for these services.

Recent budget cuts to Medicaid and health programs for the poor and uninsured have made a system already under-funded, worse.

"We have one in four people in the community using safety net services and lot of them already suffer disproportionately from health outcomes," said Robert Freund, CEO of the Regional Health Commission.

"We have a high need community that also suffers from high medical needs and to serve that is costly."

According to the report, health disparities throughout the city can be linked to income levels and race. Overall, the report indicates that African Americans have poorer health status among St. Louis city and county residents.

"If a neighborhood or zip code has high rates of poverty, they also tend to have very negative health outcomes," said Ed Bryant, director of community engagement at the RHC.

Although St. Louis is home to some of the best healthcare institutions in the country, more St. Louisans use emergency rooms for non-emergency medical care than most like-size cities in the country.

"That's understandable, said Freund, when the area of highest need in St. Louis City is 20 minutes away from the closest primary care center. But the emergency room is not a good place to get primary care and its more expensive."

Patients also report lack of transportation, medical care costs and lack of information about medical services as barriers to getting the basic care they need.

Both patients and providers don't understand how the system works. The report states that health care centers and clinics don't coordinate care and their patients are often confused about which clinic or community satellite site to use.

Ironically, the report is based on findings by advisory boards of health providers, medical experts and ordinary citizens who worked together to examine the system's fragmented infrastructure.

Health officials hope the report provides a quantitative "snapshot" of the health status and disparities in the region and where the system needs to be fixed.

"The report puts a frame on the entire concept of delivering health care to the entire region," said Dr. Will Ross, a member of the RHC's advisory board and associate dean at Washington University.

"We can deal specifically with disparities and serving the targeted population where this health care gap exists."