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SUBJ: CLOSURE OF ALASKA REGIONAL SENIOR HEALTH CARE CLINIC

Alaska Regional Senior Health Clinic abruptly closed their doors leaving a significant number of elderly Alaskans without any meaningful health care. As a patient of the clinic, a friend at the clinic confided in me that the reason for the closure was the management by Utah based non-resident absentee owners who claimed they were unable to hire the employees necessary to staff this previously successful clinic. The fact that the entire non-medical staff resigned en masse long before the actual closure would indicate a deep-seated problem. The owners conveniently blame their inability to hire qualified personnel rather than their own management practices that led to the mass resignations. The conditions that led to the mass resignations poisoned the available labor pool who were unwilling to dive into that mess. The management issues are the problem and this catastrophe should not be blamed on the labor pool that was unwilling to expose their careers to that mess.

While we can point fingers and assign blame no good comes from that exercise. We need to understand the true extent of this catastrophe and react smartly and quickly to help the elderly patients who are now without any meaningful medical care.

The fact is that the entire clinic's clientele base was on Medicare. Private medical clinics are hesitant or outright unwilling to take on Medicare patients because of the high costs of billing documentation required to get reimbursed at a rate far below the actual costs of services rendered. They lose money on Medicare patients. If a Medicare patient has supplemental insurance that pays the difference, then the clinic is forced by Medicare to accept all Medicare patients even those without supplemental coverage. It's a no-win situation created by our government that creates victims of our senior citizens and leaves them without any meaningful medical services.

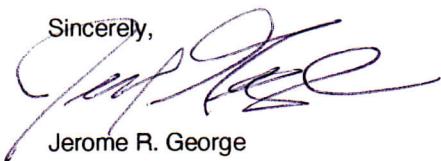
Others are trying as I have, but I have yet to be accepted at any other clinic as a full-time patient. We can go to the emergency room at a hospital but what about lab tests and monitoring of ongoing medical conditions like high cholesterol or diabetes, approve expired prescriptions so pharmacist can fill the prescription, a means to discuss prescribed drugs and quick follow-up of patient concerns about drugs and any prescription changes. What about annual checkups to detect problems and treat them before they become critical

Hundreds of Alaskan senior citizens have been tossed overboard without as much as a life jacket. When I filed a report to the State Health Department and Department of Commerce, I was told they were too overworked and understaffed to deal with such problems.

This is a serious matter that will result in unnecessary anxiety, pain, suffering and likely unnecessary deaths if not dealt with expeditiously. I urge the Governor to use emergency powers if necessary to get these disenfranchised elder Alaskans the medical care they deserve. I urge the legislature to demonstrate their support of our senior citizens by showing the Governor a path forward that has legislative support. I urge our Congressional Delegation to obtain an emergency order that does not require Congressional action that allows providers to treat Medicare patients with supplemental insurance without then having to treat all Medicare patients who do not have supplemental insurance or choose to pay the difference out of pocket. I urge the State and federal agencies to pool resources to set up a help center that will guide we disenfranchised seniors along a path that gets us access to medical treatment.

This is an ongoing catastrophe that needs immediate action, not study and hand-wringing rumination: ACT.

Sincerely,



Jerome R. George

CC: Governor Dunleavy
Senator Cathy Giessel
US Senators Murkowski & Sullivan
US Representative Peltola
State of Alaska, Commissioner of Health, Hedberg