

CHAMPAIGN COUNTY HEALTH CARE CONSUMERS NEWSLETTER:

813 N LINCOLN, URBANA, ILLINOIS 61801

MAY 1979

Consumers Win Medicaid Victory

On Monday, May 14, Mercy Hospital agreed to put an end to the illegal practice of billing Medicaid patients by adopting a new billing procedure. Mercy also agreed to reimburse Medicaid patients who may have paid past bills, and to distribute a statement to all Medicaid patients that they are not required to pay any portion of their hospital bill.

These actions were a direct result of a meeting held between members of the Champaign County Health Care Consumers and Ronald Aldrich, president of Mercy Hospital.

In planning for our recent forum on "Paying Your Medical Bills," numerous community residents and agency officials contacted us with evidence of abuses of the Medicaid program by some local health institutions. The Medicaid program was enacted to provide federal money to help poor people gain access to medical services. Hospitals that participate in Medicaid have a legal obligation to accept the government reimbursement as "payment in full". Medicaid recipients are not required to pay any portion of their medical bills.

Further investigation found that Mercy Hospital has had a practice of sending bills to Medicaid recipients for the amount not covered by Public Aid. This is in direct violation of the Public Aid Code (Chapter 23, Section 11-13) which states: "Acceptance of the (government Medicaid) payment by or on behalf of the (hospital) vendor shall bar him from obtaining or attempting to obtain additional payment thereof from the recipient or any other person.... Any (hospital) vendor who accepts a vendor payment and who knowingly

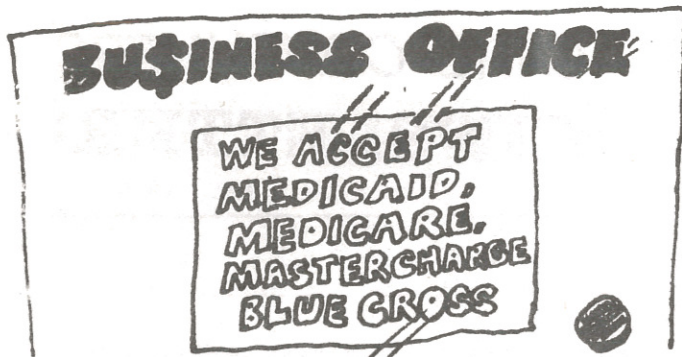
obtains or attempts to obtain additional payment for the goods and services covered by the vendor from the recipient or any other person shall be guilty of a Class B misdemeanor".

It was found that Mercy Hospital had been informed of the illegality of this practice as early as 1977 but had not made the necessary changes. Agency officials informed us that their clients had received illegal bills and were told that these were computer errors. A legal services attorney described one client who had received three separate bills over a twelve-month period despite informing the hospital of the illegal practice. Two persons indicated that not only were they sent illegal bills but also that their accounts were sent to a collection agency when they did not pay.

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National Health Insurance Forum

Herbert Semmel, President of the National Consumer Coalition For Health, will speak at a community forum on "The Politics of National Health Insurance" on Monday, June 18, at 7:30 p.m., in the Urbana Free Library, 201 S. Race, Urbana. Semmel, an internationally known attorney, who directs the Center for Law and Social Policy in Washington, D.C. and served as Professor of Law at the University of Illinois will discuss the politics and prospects for National Health Insurance and its importance for consumers. The forum is one of a series aimed at providing consumers with knowledge of current health care issues and emerging solutions. For more information call Margie Checkoway 344-5727.



TALK MONEY!

Ask what your hospital stay may cost and how it can be paid.

Ask if you qualify for free or low-cost care. Many hospitals must offer it.

A hospital can ask you for a deposit. If you use Medicaid or Medicare, you can't be made to pay a deposit, but a hospital can refuse to take you.

And before you leave, ask to have your bill explained.

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MEDICAID VICTORY (Continued from p. 1)

A public disclosure of these illegal practices, and a demand to end them, were made at a press conference on Saturday, May 12. We sought to present our case in an uninterrupted manner. It was our belief that this problem had been ignored for too long and that public disclosure would bring a quick solution. A meeting was then held with Mr. Aldrich at Mercy Hospital. This meeting was closed to the public and the press at his request. It was not out intent to single out any one individual but to address an important community problem.

Our approach to this problem was carefully chosen. Mercy Hospital had been repeatedly informed of its illegal practice but had taken no action. Only after our public disclosure and meeting were changes made. Our approach has been applauded by those who have been abused by this practice in the past. We consider this an important community victory.

Consumer Coalition "Opens Door" For Medicaid Patients

The Cape Cod Health Care Coalition has won another battle in its attempt to guarantee access to quality health care for those unable to pay. A provisional ruling issued by the Massachusetts Department of Public Health (DPH) states that it is the obligation of Hill-Burton supported hospitals to guarantee access to all medical services for Medicaid recipients to the same extent that the services are available to private patients.

The ruling resulted from a complaint filed by the Cape Cod Health Care Coalition, a consumer organization of union members, Medicaid recipients, social agency employees, and concerned citizens. The complaint cited the unavailability of ophthalmological care to Medicaid patients at Cape Cod Hospital. Authority to admit patients to the hospital is vested solely in the members of the medical staff, but none of the four full-time active staff members in ophthalmology accepted Medicaid patients, and only one of the three ophthalmologists with consulting privileges accepted such patients. Thus, by being denied access to private physicians, Medicaid patients were denied hospital ophthalmological care. The Coalition argued that this was in violation of the Community Service requirements of Hill-Burton supported hospitals, which prohibit the exclusion of patients living in the facility's service area on any grounds not related to the person's need for services or the availability of the services at the facility. Denial of treatment by a hospital due to payment source is not permitted.

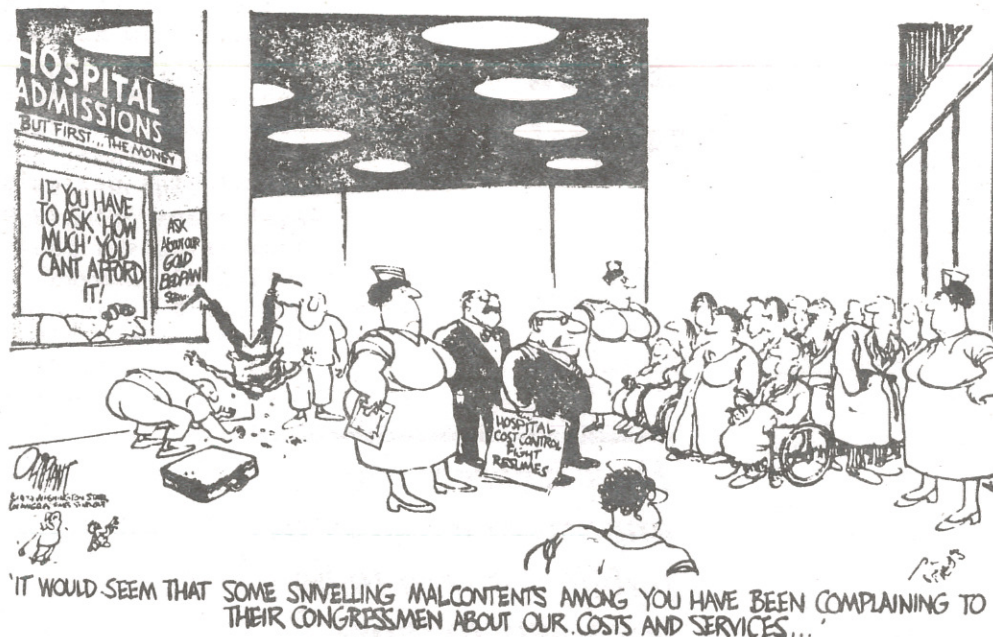
The hospital argued that it did accept Medicaid patients, but that the ophthalmologists refused to accept them. In an important interpretation of the Community Service regulations, the Mass. DPH ruled that the hospital had to insure "that in each of its departments, subdepartments, and services, there is a sufficient number of Medicaid provider physicians...who will treat Medicaid patients without charge". These services must be provided to the same extent that they are made available to private patients. According to Bill Pastreich, Staff Director of the Coalition, the Mass. DPH ruling supports the position that hospitals like Cape Cod

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Hospital can make staff privileges conditional upon a physician's acceptance of Medicaid patients.

Also the availability of this referral system, and a statement that there is no charge for the services, must be advertised at least once every other month in local newspapers.

HEALTH LAW PROJECT LIBRARY BULLETIN
Volume IV (May 1979)



Running For Health

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It was a wonderful day for running and even better for fundraising. On Saturday May 5, more than 90 runners participated in the First Annual RUNNING FOR HEALTH mini-MARATHON. Jointly sponsored by CCHCC and the Frances Nelson Health Center. The marathon raised over \$3000 for community health care programs.

Among the winning entries were:

FIRST PLACE MEN: 33 min. 10 sec.

BILL BUHMANN

FIRST PLACE WOMEN: 47 min. 43 sec.

SALLY BURTON

MOST PLEDGED PER KM: \$22/km.

REV. KENNEDY

GEMINT HOUSE/

**CHAMPAIGN COUNTY
HEALTH CARE CONSUMERS**

813 N. Lincoln
Urbana, IL 61801

MOST # OF SPONSORS: 35

SUSAN SULLIVAN

KATY MURPHY

Special thanks go to the local officials who served as judges. Judges for the event included:

Gary Adams

Joe Brown

Tom Difanis

Linda Cross

Tom Edstrom

Tim Johnson

Susan McGrath

Don Wort

John Peterson

Laurel Prussing

Helen Satterthwaite

Marge Sodemann

Bernadine Stake

Del Weatherford

Marjorie Winkelhake

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*Health care is too
important a matter of
public concern to be
left solely to those
who provide it.*
