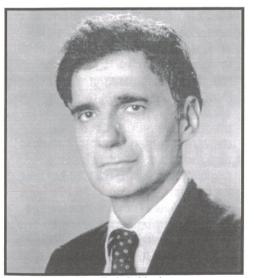


## Health Care Consumer

Newsletter of the Champaign County Health Care Consumers

# Campaign to Save 14-Year Medicare 100/+ Programs

By Bill Mueller, CCHCC Board Member



Ralph Nade

A growing coalition of seniors, concerned residents, and community groups in East Central Illinois is waging a powerful grassroots campaign to save the Medicare 100/+ Programs, following Provena Covenant's cancellation of their part in the programs. Medicare 100 member Dorothy Utley said, "I've been with Health Care Consumers for years — and they've been with me. Now we need to fight, and we'll do that together too."

The Medicare 100/+ Programs were started by CCHCC's Senior Task Force in 1984 in cooperation with

Burnham City Hospital in Champaign. The Programs were transferred to Covenant Medical Center in 1989, following the merger of Burnham with Mercy Hospital. Provena Health System, which took over Covenant Hospital in November 1997 and has been the largest provider in the Medicare 100/+ Programs, suddenly withdrew from the Programs in November of last year. A nonprofit health care system, Provena has been aggressively expanding, and now owns dozens of health care facilities in Illinois and Indiana.

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# Ralph Nader to Speak at CCHCC Awards Dinner

Dinner and Special Reception Scheduled for Friday, April 23 at the Radisson

The Champaign County Health Care Consumers is proud to feature Ralph Nader as the keynote speaker for this year's Annual Awards Dinner, which will be held on Friday, April 23 at the Radisson Suite Hotel in Champaign. A social hour will begin at 6:00 P.M., with a buffet dinner at 7:00. A separate Special Reception for Ralph Nader will be held at 5:30 P.M., also at the Radisson. The Radisson is located at 101 Trade Centre Drive, in Champaign.

Ralph Nader has been honored by *Time* magazine as one of the 100 most influential Americans of the Twentieth Century. Mr. Nader has become known as the founder of the consumer rights movement in the United States, and has devoted his life to empowering consumers by giving them the tools they need to defend themselves against corporate negligence and government indifference.

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### Health Care Consumer

is published quarterly by the Champaign County Health Care Consumers, a grassroots not-for-profit organization dedicated to ensuring accessible, affordable health care for all.

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# KidCare Coverage: Many Eligible Families Fail to Apply

By Netta Gillespie, CCHCC Volunteer Advocate and Board Member

More than 200,000 Illinois children have so far been deprived of statemandated and government-financed health insurance because of a failure by state officials to adequately publicize and staff a program signed into law late last summer. KidCare Health Insurance for Children offers four levels of coverage for income-qualified families, and was designed to fill the gap between children eligible for Medical Cards and those whose families can afford to pay the premiums for coverage via employer-sponsored plans.

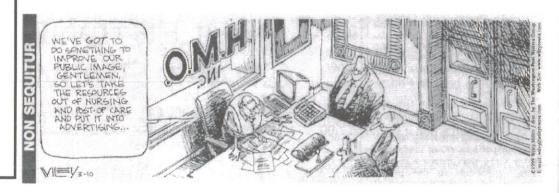
Since the program was instituted last fall, less than 2,000 children have been successfully enrolled, though an estimated 208,000 are eligible. Supporters of affordable health care for all children should let their state legislators and officials know that this situation is simply not acceptable! State officials in the new Ryan administration recently acknowledged the problem and pledged to take action by increasing staff and creating radio and TV ads to publicize the program.

Restructuring the program to put it under the State Department of Health rather than Public Aid should also be considered. Feedback received by the CCHCC Consumer Health Hotline indicates that much of the problem lies in the bottleneck created by slow processing in the Illinois Public Aid Office. Estimated lag time is six weeks, with another time lapse before

the insurance goes into effect. Those who have been enrolled have not reported any problems to CCHCC about providers being unwilling to accept this coverage. Those applying should not be discouraged by what appears to be an initial rejection of their applications, as often this notice simply means that they are not eligible for standard Medicaid.

Coverage under the program includes not only medical and hospital bills, but also eye exams, glasses, and dental care, while premiums and annual fees range from no cost at all to no more than a \$15 per month monthly premium, depending on family income, while co-pays range from no cost up to only \$5 per visit. Help for pregnant women, and recentlydelivered women and their babies is also available. Monthly income eligibility ranges from \$1,203 or less for families of two up to \$3,208 for a family of five. Those with coverage available through employers are entitled to help in paying the monthly premiums.

Please spread the word about this program to anyone you know who may be qualified. For application forms and information, call 1-800-323-GROW or the CCHCC Consumer Health Hotline at (217) 352-6533. We would also appreciate feedback, both positive and negative, on consumers' experiences with the program.



### Show Your Support for Universal Health Care on April 13

On April 13, City of Champaign and Cunningham Township voters will have the opportunity to support a measure to make health care a basic human right. An advisory referendum calling for passage of the Bernadin Amendment will appear on the ballot, asking voters to support a state plan to provide everyone in Illinois with access to decent health care on a regular basis.

Shortly before his death in 1997, Chicago's Cardinal Joseph Bernadin wrote a pastoral letter entitled, "A Sign of Hope," in which he stated, "Health care is an essential safeguard of human life and dignity, and there is an obligation for society to ensure that every person be ah', to realize this right."

The Bernadin Amendment. created in response to the precepts of the late Cardinal Bernadin, asks the Illinois General Assembly to adopt a house joint resolution which would amend the Illinois Constitution's Bill of Rights to provide a state plan for universal health care coverage by May 31, 2002. The purpose of the Amendment is to establish health care as a fundamental right of Illinois residents and require the General Assembly to act on a timely basis. The Amendment has already received official endorsements from the March of Dimes and the AFL-CIO.

On November 3, 1998, 83% of Cook County voters approved this advisory referendum calling for passage of the Bernadin Amendment. The referendum will appear on the ballot for spring elections in Champaign and Cunningham Townships, as well as several other townships, counties, and municipalities state-wide.

Please show your support for universal health care by voting in favor of this important referendum on April 13. For more information about the Bernadin Amendment, contact Claudia at 352-6533.

### The County Health Department Begins Public Health Services

Almost exactly two years after voters passed the referendum creating a county health department, basic public health services finally began. On October 1, 1998, the new Champaign County Health Department began conducting food inspections and licensing sewage systems.

Jan Thom of Savoy, a longtime member of the Friends of Public Health said, "Without community involvement, we still would not have public health services. It was community organizing and involvement that got the referendum passed, and it was community involvement that kept the process moving forward."

The last big barrier to beginning basic public health services was the requirement that the County Board pass county ordinances regulating inspections and licensing fees for the environmental health services, including food, water, and sewage services. The County Board held a special

meeting on September 30 in order to vote on the ordinances. "Friends of Public Health did a great job organizing for this event," said FPH member Bill Mueller. "County Board members each received dozens of calls or letters telling them to vote yes for the ordinances, and there were over 60 people who showed up to the special County Board meeting to show their support for passing the ordinances."

Not only did the County Board pass the ordinances, but it was a unanimous vote. Basic public health services began the very next day. Now that the County Health Department has been created and implemented, the Friends of Public Health coalition is shifting its focus toward broadening the public health services available through the County Health Department. "Champaign County really needs comprehensive communicable disease services, including a Tuberculosis testing and treatment

program," said Eleanor Clifton, of Rantoul. County residents have also expressed their need for nurses who can do home visits.

The Friends of Public Health urge county residents to call the Board of Health Chair, Joan Miller, to let her know what services they need. Ms. Miller can be reached at 352-4988.

If anyone has questions or would like to get more involved with the Friends of Public Health coalition, please contact Claudia at 352-6533.

#### In Other Public Health News...

Long-time Administrator of the Champaign-Urbana Public Health District, Gale Fella, announced his retirement effective April 1999. A search for Mr. Fella's replacement is under way. The new Administrator will be hired by the Champaign-Urbana Public Health District, and his or her services will be contracted out to the County Health Department as well. Best wishes to Gale Fella!

#### Medicare 100/+

contiuned from page 1

In late October 1998, Provena expressed its intention to withdraw Covenant from the Medicare 100/+ Programs as of January 1, 1999, even though Covenant's agreement with CCHCC requires the hospital to give one year's notice if it plans to leave the Programs. Provena proposed to **CCHCC Executive Director Nancy** Greenwalt that Provena and CCHCC would issue a joint letter informing Program members that their benefits would end as of New Year's Day. Greenwalt refused. "We asked if they would be willing to sit down and discuss this with us. Unfortunately, they refused to meet with us."

Instead, Provena unilaterally pulled out of the program overnight and began running full page ads in the News-Gazette stating that their attorney advised them that the programs violated federal law.

Shocked that the federal government would try to shut down a valuable community program that had served thousands of low-income consumers over the past 14 years, CCHCC's Senior Task Force swung into action over 100 seniors attended a meeting at Urbana Civic Center on November 16. They agreed to mobilize community support and developed a campaign for saving the programs.

First, CCHCC began contacting legal experts around the country and formed a legal research team to explore any possible problems. "Everyone we spoke to indicated that the programs were on sound legal ground. No one seemed to understand why the federal government would want to shut down a local program at a non-profit hospital that was designed to help them with medical bills they couldn't afford. No one knew of any recent changes in regulations that would make the program illegal," Greenwalt said.

Second, the Task Force began mobilizing community support by asking local organizations, elected officials and government bodies to contact Senator Durbin, Senator Fitzgerald, and Congressman Ewing urging them to ensure that these programs would not be shut down by



Dorothy Utley, Medicare 100/+ Member

the federal government. Resolutions in support of Medicare 100/+ were approved by the Champaign County Board, the Urbana City Council, Champaign County NOW, and the Illinois Disciples Foundation. Religious leaders have also begun working with CCHCC to lend their support.

The third phase of the campaign emphasizes grassrooots support from county residents. Over 500 "Save Medicare 100/+" yard signs have been posted in front yards and hundreds of postcards have been sent to Provena's CEO and to Senator Durbin's office. Letters-to-the-editor have begun appearing in area papers.

Although the support has been overwhelming, most committed volunteers are the seniors themselves.

Before the County Board voted unanimously to support a resolution calling on federal officials to do what they can to save these programs, they heard impassioned pleas from Ruth Baker and Shirley Van Meter, two long time mebers of the programs. Ms. Baker of Urbana said that many of her friends are "devastated" by Provena's

decision to pull out of Medicare 100/+. "They just don't know what they'll do," she said. "I urge you join with us. I can't image why the federal government would want to shut down these programs. It just doesn't make any sense."

Although Provena has largely remanied quiet throughout much of the campaign, Covenant Hospital officials have stated that they are committed to serving the elderly poor and will not turn anyone away. But CCHCC Board member Mike Doyle noted that turning people away is not the issue. "Under Medicare 100/+, seniors know their treatment will be covered before they get that treatment. It's not that people are being turned away. What is happening is that many of the lowincome seniors are afraid to seek care because they are afraid they won't be able to afford it," Doyle said.

Belinda Summers, CCHCC's
Medicare 100/+ coordinator said,
"We're already hearing from seniors
who have postponed or decided to do
without important medical care. How

continued on next page

#### Medicare 100/+

continued from previous page

many other seniors have to choose between eating and decent medical care?"

Not all benefits of the Medicare 100/+ Programs have been interrupted. Many individual physicians in East Central Illinois are continuing with the Programs as are a number of pharmacies and optical services in the community. Some have even expanded the benefits they offer. Said Greenwalt, "They recognize the importance of seniors to our community, and they recognize the importance of good health care to our community's seniors."

Meanwhile, the CCHCC's community organizing campaign is continuing and gathering steam, with the Senior Task Force meeting regularly to plan strategies and actions. There are many ways for CCHCC supporters to help out: Write a letter to the editor of your local paper, put up a yard sign, make a donation to the Campaign to Save Medicare 100/+. Call CCHCC at (217) 352-6533 and ioin the effort.

### **Holiday Party**

Volunteers Thanked

On December 11, 1998, CCHCC held its annual volunteer holiday party. Hundreds of invitations were sent to volunteers who have given their time and energy over the past year.

Volunteers who have helped with CCHCC's bulk mailings were present, as were members of the Medical Billing Task Force, the Senior Task Force, and many long-time supporters of CCHCC.

Volunteers and staff provided a wonderful array of food for the potluck dinner. The CCHCC office was transformed from a place of business into a very festive environment, with hand-made decorations, and balloons and streamers. A special highlight of the evening was when volunteers' and staff's children gathered together to sing holiday songs. Everyone was delighted.

CCHCC wishes to thank everyone who has helped throughout the year, and who attended the special celebration.



Ramona Alvadj and Ruth Baker

#### **Hum Concert Raises** \$2,500 for CCHCC

CCHCC would like to thank everyone who made our Fall Benefit Concert a success:

HUM The Kennett Bros. **ProLogic Rebel Base Ensemble** The Office (in Urbana) The Octopus Bryan St. Pere Sasha Martens Jeff Cochrane **Record Service Record Swap** Periscope Records The Wright Sound

#### Ralph Nader

contiuned from page 1

Mr. Nader became a nationally known figure in 1965 when he took on the auto industry and published his hardhitting book, Unsafe at Any Speed, a shocking expose of the disregard car makers held for the safety of their customers. Later, working with lawmakers, he was instrumental in creating the Occupational Safety and Health Administration (OSHA), the **Environmental Protection Agency** (EPA), and the Consumer Product Safety Commission. Ralph Nader's name has become synonymous with public health and safety issues, and consumer activism and organizing.

Mr. Nader is a long-standing friend and supporter of the Champaign County Health Care Consumers. He has stated that CCHCC "exudes a rare blend of information, a sense of injustice and self-confidence about improving matters... The challenge is to see how this community health group can be replicated in other

localities around the nation."

The theme for this year's Dinner is "Community Organizing to Put Health Care First." This theme reflects the struggles and victories CCHCC has engaged in over the past year, once again fighting for local consumer and community involvement in the health care system, despite the demands of profit-driven health care systems in our community. Because health care providers (including not-for-profits) frequently have "business plans" and profit agendas that are incompatible with meeting the health care needs of the community, consumers must organize to "put health care first."

Join CCHCC and Ralph Nader in celebrating consumer involvement and community organizing for better health care in Champaign County at this vear's CCHCC Annual Awards Dinner. If you would like to attend the Dinner or the Special Reception, and you have not yet received your invitation, please call the CCHCC office at 352-6533.

### Task Force Meets with Carle Clinic's CEO

#### Meetings Result in Some Changes to Billing Practices

Following their press conference last summer announcing complaints filed to the Federal Trade Commission. the Attorney General, and the Illinois Department of Insurance, the Medical Billing Task Force has succeeded in getting Carle Clinic to meet with Task Force members. "Although we wanted an open meeting between Carle Clinic administration and the community affected by Carle's billing and collections practices, Dr. Parker, the CEO of Carle Clinic, would only meet with a small number of Task Force members," said Jack Kuehn, a Medical Billing Task Force member.

Mr. Kuehn stated that "although our goal is still to achieve an open meeting so that there can be real communication with, and accountability to the community, we agreed to meet with Dr. Parker in the hope that we could make some progress in changing some of these harmful practices." Task Force representatives were able to meet with Dr. Parker, and Ms. Edra Scofield, Associate Administrator for Planning and Marketing. So far, there have been two meetings: one in November and the second in February.

Claudia Lennhoff, CCHCC Organizer, explained that the first meeting resulted in a few changes for the better. "Dr. Parker and Ms. Scofield agreed to making some changes in Carle's practices, some of which they said had already been implemented." These include:

- Halting the denial of care to children of patients with outstanding balances (adults could still be denied care, but not their children).
- Stopping the practice of denying care to patients at one Carle facility and forcing them to another out-oftown facility in order to get care.

The second meeting with Dr.
Parker and Ms. Scofield was attended
by Task Force members Netta
Gillespie, Carmen Reid, Jack Kuehn,

and Claudia Lennhoff. "I think we are making some real progress, a little at a time," said Carmen Reid. Dr. Parker and Ms. Scofield announced some of the changes they had made to Carle's billing and collections practices. These include the following:

- Carle Clinic will no longer deny care to any Health Alliance member for any covered services, even if the member has an outstanding balance.
- Carle Clinic will print a notice on their bills informing consumers that Patient Accounts Representatives are available by appointment during non-

... it appears that Carle Clinic personnel who interact with consumers still do not know about or adhere to recent policy changes.

standard business hours.

• Carle will give patients 90 days' notice that their account is in danger of being "flagged" with a no-service order for outstanding balances. Patients should be notified by phone at the time they call to make appointments that they will need to see someone at the Patient Accounts office about their account. This is intended to avoid the humiliating practice of sending patients to Patient Accounts when they show up for their appointments (patients can then only return to their scheduled appointment if they have blue slip, like a hall pass in grade school).

Carle also said "the late payment fee will be reinstated this spring. The rate will be lowered to 15%... We believe this is a sound business practice..."

The Task Force has written a letter responding to issues discussed in the meeting, and expressing opposition to the finance charge policy. The letter states that "Although Carle views this as a sound 'business' practice, consumers do not view or interact with the health care system in the same way that they do with a furniture company or a credit card company. In those cases, the consumer knows in advance what the terms of the agreement will be. There is a clear difference between seeking treatment for a sick child and buying a piece of furniture." The letter further urges Carle, at the very least, to not implement finance charges until ALL regularly recurring billing errors are corrected.

"We're not going to go away," said Jack Kuehn. "We truly hope that we can continue to have productive meetings with Carle Clinic to fix these practices which are hurting so many people. And really, it is also in Carle's best interest to correct these practices if they want to continue to be viewed positively by the community, and if they want to have a more costefficient and effective business office."

While the Task Force remains hopeful that real changes are under way, there is still some skepticism because it appears that Carle Clinic personnel who interact with consumers still do not know about or adhere to recent policy changes. For example, Health Alliance members are still being denied treatment. Jack Kuehn stated that "There is a wide gap between what Carle says it does, and what its personnel actually do when interacting with consumers."

If you are having any billing or collections problems with ANY area clinic or hospital, or if you are interested in getting involved with the Medical Billing Task Force, call Claudia at 352-6533.

### Phone-A-Thon Targets Attorney General, Generates \$17,500 in Pledges

More than \$17,500 was pledged by CCHCC's supporters during our 7th Annual Phone-A-Thon in what has become one of our most successful fundraisers. More importantly, the Phone-A-Thon serves as an important opportunity for encouraging members to add their voice to one of the issues CCHCC is addressing.

Unlike past years, the 7th Annual Phone-A-Thon was conducted in two phases. The first phase took place in October when over 60 volunteers spent 8 nights helping raise money for CCHCC and generating a flood of calls to the Illinois Attorney General Office, urging them to investigate medical billing complaints from consumers.

As a result of these volunteer efforts, hundreds of CCHCC supporters renewed their memberships and pledged to call the Attorney General's Office. Perhaps not coincidentally, in January, Attorney General Jim Ryan announced the creation of a new Health Care Hotline, after receiving many calls from consumers. The Attorney General's press release stated that in October alone, the AG's office received over 140 calls from consumers.

The second phase of the7<sup>th</sup> Annual Phone-A-Thon was held over 4 nights in late February and early March, when dozens of volunteers helped call

thousands of CCHCC supporters about the Medicare 100/+ Programs and Provena Covenant's decision to pull out. In this phase, volunteers asked supporters to send a post card to Senator Durbin and others asking them to join the local efforts to save these valuable programs (see story page 1). As with the first phase, the response was overwhelmingly positive.

We want to extend a special thanks to the hundreds of members and supporters who took the time to join with us in our fight for a more responsive health care system and make a pledge to continue our work on behalf of local consumers.

If you made a pledge but have not yet had a chance to send in your contribution, please do so today! If you weren't home when we called or we somehow missed you, please feel free to send in a contribution with the coupon below.

Finally, we would like to thank all of the volunteers who donated their time and energy to make the 7<sup>th</sup> Annual Phone-A-Thon a tremendous success! Without the support of these volunteers and businesses that helped donate food and prizes, our work would not be nearly as effective. Thanks!

#### Area Businesses Make Contributions to CCHCC's Fundraisers

Many businesses from around the Champaign-Urbana area made generous contributions for prizes to be won in the CCHCC Raffle, and food and prizes for the Phone-A-Thons. Without their support, these important fundraising events would not be possible. CCHCC would like to thank the following businesses for their support::

Admiral Limousine Art Coop Aunt Sonya's B & W Photo Border's Books C-U at the Movies Cafe Kopi Carrie's Chi-Chi's Chili's Cochrane Enterprises Domino's Pizza Dos Reales **Durst Cycle** Elite Diner Espresso Royale Cafe Fazoli's Grand Prairie Travel The Great Impasta Holiday Inn Hot Wok Express Jane Addams Book Shop Jarling's Custard Cup JBJ Collector's Shop Jumer's Kennedy's Restaurant Krannert Center for the Performing Arts

La Salsa Milo's Restaurant Minneci's Restaurant Monical's Pizza Murphy's Pub Ned Kelly's The Olive Garden Pages for All Ages Park Inn International Perkins Restaurant Pieful Delight Pizza World Record Service Red Lobster Rick Orr Florist Sam's Cafe Spring Jade St. Louis Bread Co. Steak & Shake Subway Sweet Betsy's Sweet Indulgences That's Rentertainment **UIUC** Division of Intercollegiate Athletics Walnut Street Tea Company

#### Giving to CCHCC at Work

Although the results aren't final, this past Fall many CCHCC supporters chose to make a contribution through payroll deduction at work. At the University of Illinois, we received more than \$3500 in pledges from employees - a 30% increase over the past year. As a member of the Public Interest Fund of Illinois, employees at over 75 workplaces throughout Illinois are able to contribute to CCHCC through payroll deductions. To learn how you can give through payroll deductions please contact Amanda at 352-6533.

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o Other: \$
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#### Women's Health Coalition Addresses Emergency Room Policies

The Women's Health Coalition was formed in late 1998 in response to concerns about the care and treatment that survivors of sexual assault receive at area emergency rooms. The coalition is made up of individuals and organizations who are committed to ensuring that sexual assault survivors receive consistent, compassionate, sensitive, and professional care at area emergency rooms. The Coalition believes that it is essential that a sexual assault survivor's health is safeguarded, as well as her legal rights and options.

One of the biggest concerns that the Coalition has is that emergency rooms do not automatically call Rape Crisis Services (RCS) whenever a sexual assault survivor seeks care. Because it is not standard and consistent practice to call RCS each time, the Women's Health Coalition wrote to the hospitals asking for copies of written policies for the care given to sexual assault victims.

Kim Doner of Rape Crisis Services, says that "survivors of sexual assault must receive treatment, counseling, and information that complies with the Illinois Sexual Assault Survivors Emergency Treatment Act (SASETA)." Doner stated that "SASETA is a guarantee from the state that medical treatment and evidence collection will be provided even if you do not have insurance or are ineligible for public aid."

John Rich, President/CEO of Planned Parenthood of East Central Illinois, said that the Coalition wants to know "how each emergency room addresses informing sexual assault survivors about possible treatments for the prevention of unwanted pregnancy." Rich also stated that the Coalition is interested in knowing whether "all physicians and medical personnel who provide treatment to survivors undergo sexual assault sensitivity and awareness training, and are all ER personnel and physicians trained in the use of the sexual assault evidence collection kit?"

"These issues are very important," says Kim Doner. "How a survivor is treated during that critical time, and whether she is informed of all her legal and health options, have tremendous impact on her recovery and healing."

The Women's Health Coalition strongly advocates for emergency rooms to automatically and consistently call Rape Crisis Services every time a sexual assault victim comes in to an ER. RCS can provide an extensively trained advocate to provide free and confidential services to the survivor. Not only do RCS advocates inform and support survivors' health, emotional and legal rights, they also provide the survivor with essentials such as clothes to wear when leaving the hospital, and transportation assistance, as well as housing assistance if needed. These are not services that are provided by the Emergency Rooms or the police.

Despite the tremendous benefits of RCS advocates, Carle Foundation Hospital Emergency Room personnel claim that because of "confidentiality issues," they are directed by administration not to call RCS. However, the



Women's Health Coalition does not see this as a valid reason for denying a sexual assault survivor the right to have an RCS advocate present at the time of admission. "RCS advocates have the highest confidentiality status allowed under the law. Our status is comparable to that of Attorney-Client privilege, which is higher than that of doctors and police," said Kim Doner.

Emergency room personnel say that they ask the survivors if they would like an advocate to be called on their behalf. "But," says Doner, "that is not the same as automatically having someone there. We do not force ourselves on the survivor. It is the survivor's choice. But if no one is there, and they are asked, but they are frightened and scared and have no idea what the rest of the process will be like, they may say no simply out of fear and because they are traumatized." Doner says that if RCS advocates are already on the scene, and are treated as part of the process for the treatment and care of sexual assault survivors, the survivor often wants the advocate present.

"The Coalition is working to get copies of both Provena Covenant and Carle Foundation Hospitals' policies regarding the treatment of sexual assault survivors," said CCHCC Organizer Paulette Colemon. "We are sure they will be cooperative. After all, we are all interested in ensuring the best care possible for victims of sexual assault."



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