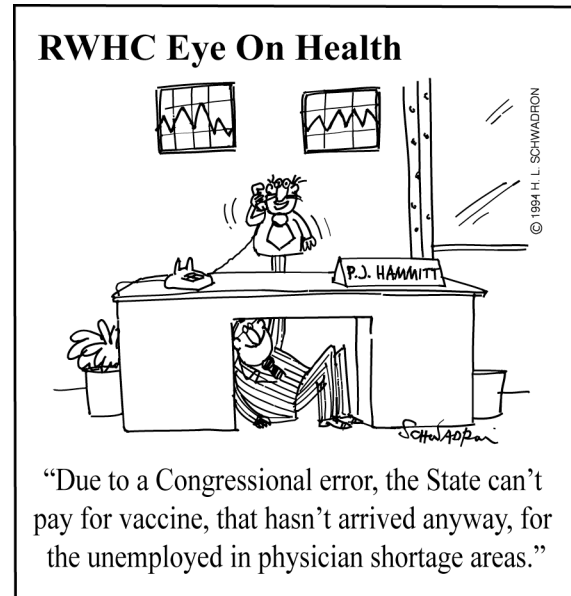


## **Calm in the Eye of the Healthcare Hurricane**

by Tim Size, Executive Director, Rural Wisconsin Health Cooperative, Sauk City

In 40 years working in and studying health care, I have never seen a more challenging time. I'm not suggesting that you need to hug a healthcare worker, or even your hospital administrator, yet.

On a typical day, they are working to protect their patients and community from the effect of not one storm but a plague of once in a generation storms. You see or hear about these events every day but you may not know how they pile up on your local hospital or clinic. Think of the uncertainty on the ground around federal healthcare reform, of state budget shortfalls, of physician and healthcare workforce shortages, the effects of the global recession, and of course, H1N1. Each one of the five is a big challenge. All five at one time would cause any of us to do more than lose sleep.



Let me be clear, I am not whining on behalf of friends and colleagues who work in the front lines of health care; just the opposite— I stand in amazement at their calmness.

H1N1 brought sick patients into facilities with unvaccinated staff at a high risk of getting it and passing it on. Due to distribution problems of limited H1N1 vaccine, one nurse described the feeling like being sent into a war without weapons. Other supplies like needles and facemasks are abundant in some communities and chronically short in others. By chance, some staff got a seasonal flu shot early, while others won't be able to get one this year.

The recession has caused the need for charity care to go through the roof. At the same time, the ability to provide charity care has fallen through the floor. Pay freezes, or even cuts, and layoffs have been necessary. The stress felt has risen.

Unemployment is at all time highs. But even in the recession, there are many shortages of health care professionals in rural communities. And hospitals and clinics are already scrambling as they work to prepare for even bigger shortages. Healthcare workers are mostly baby boomers. These healthcare workers are beginning to retire out of health care and increasingly, with age, into becoming patients themselves.

Hospitals, clinics, nursing homes and other providers are facing deep cuts in state payments that are already inadequate for Medicaid enrollees. In Wisconsin, the rightly praised growth of “BadgerCare” to expand access to insurance has brought the downside of providers being more vulnerable to further Medicaid under payment.

And then there is national health care reform. Part of me wants Congress to get it right, but another part just wants them to tell me the new rules so we can get on with it. In any event, fundamental change to a sixth of our country’s economy will require years of additional legislation and regulation. In the meantime, those of us who care about rural health need to be nimble to address the risk of ideas developed in urban communities and not tested in rural ones.

On second thought, just for prevention sake, a hug might not hurt.