



INDIGENT CARE

**ATHENS WELLBEING PROJECT
WHITE PAPER SERIES**

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Abstract

In the United States, medical indigence is a problem that affects able-bodied adults aged 18-64 without dependents. Indigent individuals do not have health insurance coverage and cannot afford out-of-pocket costs for health services. Gaps in access force individuals to delay care or forgo care entirely, resulting in poor health outcomes and escalating costs.

Despite the Affordable Care Act, nearly 1.4 million individuals are uninsured in Georgia, the third highest uninsurance rate in the country. Georgians, especially in Athens-Clarke County, bear the brunt of this crisis due to limited indigent healthcare resources and limited funding for resources like the Athens Wellness Clinic (AWC). Non-governmental programs strive to fill gaps, but systemic changes, like the expansion of Medicaid, are crucial for addressing the inadequacy of current policies.

In Athens, non-profit clinics like AWC, and hospitals like St. Mary's and Piedmont are significant stakeholders. Policy recommendations must reflect the community's needs while achieving stakeholder collaboration.

Our group has identified policy options that AWC needs to implement to enhance its indigent care services while keeping its clinic open. Recommendations include reforming the provider and funding model by accepting Medicaid, engaging in organizational planning with board and financial analysis, implementing a public service awareness campaign, and partaking in a stewardship campaign. Using every recommendation identified is crucial to secure the financial health of AWC and ensure continued essential healthcare services for the community. The situation's urgency requires a concerted effort and a multifaceted approach to save the clinic.

Policy Problem

The policy problem we explore is two-fold. First, a lack of access to care for low-income individuals, a care landscape we will refer to as indigent care, and second, the lack of adequate resources available to the Athens Wellness Clinic.

Athens Wellness Clinic, a non-profit organization in Athens-Clarke County (ACC), provides care to uninsured individuals, commonly aged between 18 and 64. The patients at this clinic are not receiving health benefits through their jobs or do not have private insurance, most likely due to affordability. Most are employed and even work working multiple jobs to survive but cannot afford primary care. The non-expansion of Medicaid in certain states and stringent eligibility criteria create a "coverage gap" that disproportionately affects poor adults, contributing to higher uninsurance rates (HHS, 2022).

The consequences of this healthcare access gap are profound, leading many individuals to seek indigent care as a last resort (DCH, 2023). While some hospitals and clinics offer indigent care, limited funds and a lack of legislation result in insufficient assistance for a significant portion of the uninsured population (Tolbert & Drake, 2023).

Despite progress through the ACA Medicaid expansion, financial struggles persist, and many low-income individuals still fall through the eligibility cracks (U.S., 2022). Young adults aged 18-64 face unique challenges, with more than 50% of deaths in this age group being accidental or avoidable, highlighting the importance of proper healthcare access (Medicaid, 2023). The ongoing cause-and-effect relationship perpetuates a cycle where budget cuts to indigent care programs limit their effectiveness, leading individuals to not receive the care that they need, resulting in avoidable health issues escalating into more significant problems.

AWC has been a cornerstone in our community for over forty years. The community would be negatively impacted if this organization had to close their doors. The recent budget cuts to Athens Wellness Clinic underscore the precarious nature of existing support systems. AWC's budget reduction highlights the need for robust policy efforts to prevent a cascading effect on ACC's already strained healthcare providers. Non-governmental programs like AWC, Piedmont Healthcare, and St. Mary's Healthcare System strive to fill gaps, but their limitations expose the necessity for broader systemic changes.

Charitable clinics and Federally Qualified Health Centers (FQHCs) in Clarke County provide healthcare to low-income populations. However, they operate within limitations, underscoring the urgency for broader policy changes. The need for health insurance is a recurring theme, with individuals expressing the desire for hospitals to advocate for policies that increase access to care, such as extending Medicaid eligibility.

The healthcare challenges in Georgia demand a holistic and policy-driven approach. Medicaid expansion, targeted initiatives for rural areas, and increased funding for community-based care are just some components that could improve access to care in our community. Addressing the coverage gap can enhance its residents' health outcomes and create a more resilient and equitable healthcare system.

Stakeholder Engagement

Stakeholder engagement is critical for effective policy development, aligning programs with community needs, and fostering positive health outcomes. Stakeholder engagement in policy development helps engage communities, non-profits, businesses, and impacted individuals

is essential for successful policy development (Rudolph et al., 2013). The CDC emphasizes stakeholder involvement in its program evaluation framework, promoting user-centered approaches for policy effectiveness (CDC, 2021).

In Athens, addressing indigent care involves crucial stakeholders. Mayor Kelly Girtz represents local government, influencing policy and funding. Collaboration with Mayor Girtz and the local government provides insights into local perspectives (Michaux, 2022). Non-profit clinics like Athens Wellness Clinic and Athens Neighborhood Health Center are vital in policy discussions (Athens Nurses Clinic, 2023). Hospitals and mental health organizations also contribute to indigent care since they are impacted by the clinic's contributions to the community.

Stakeholders also impact policy recommendations. Clinics, healthcare workers, and local government contribute to or are affected by policy changes (Hulver et al., 2022). The target population, uninsured and low-income individuals, should be considered stakeholders in policy development, recognizing their unique challenges and perspectives (Chan, 2023). Proponents and opponents within the stakeholder landscape, including rural hospitals and government officials, pose challenges requiring a balanced approach (MacNeil, 2021).

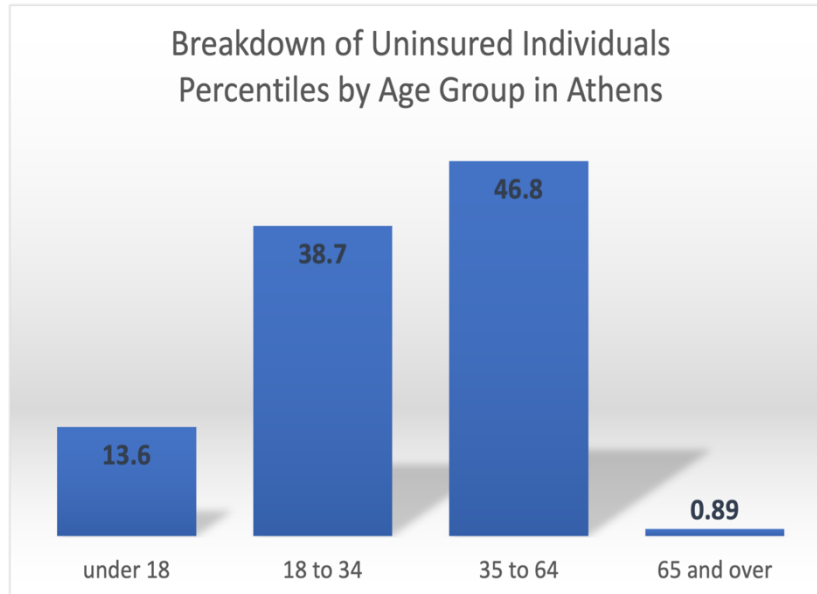
Addressing the indigent care crisis requires comprehensive stakeholder engagement. Policies must be developed collaboratively with communities, organizations, and various levels of government. The unique needs of the target population, contributions from non-profits, hospitals, and mental health organizations, and overcoming federal opposition necessitate a multifaceted approach. Inclusive dialogue and partnerships are vital for developing policies that ensure healthcare is a fundamental right for all, irrespective of socioeconomic status.

Data and Findings

The dire need for accessible and affordable healthcare services is underscored by approximately 27.5 million unemployed Americans, creating a complex landscape that demands a comprehensive approach (Tolbert & Drake, 2023). In Athens, GA, 85.5% of the uninsured individuals fall within our target population's age group of 18-64 (USA Data, 2021). The clinic provides healthcare to Athens and serves the greater northeast Georgia region, pulling in patients from as many as 17 counties. This represents the need for healthcare access in our area. Cost remains a significant barrier to coverage, with 67% of uninsured adults citing it as the primary reason for their lack of insurance in 2021 (Tolbert & Drake, 2023).

Despite the passage of the Affordable Care Act in 2010, Georgia's choice not to expand Medicaid has created a substantial coverage gap, leaving nearly 1.4 million Georgians uninsured and ranking third highest in the country (Berchick et al., 2018). Rural Georgians bear the brunt of this crisis, grappling with limited healthcare resources and provider shortages. Expanding Medicaid in Georgia is a critical step toward addressing this healthcare crisis, benefiting an estimated 560,000 Georgians, and bridging the coverage gap affecting 408,000 low-income residents (Chan, 2023). In Athens-Clarke County, while the overall uninsured rate showed a modest decrease from 12.4% to 11.6% between 2019 and 2020, this decline conceals a simultaneous reduction in Medicaid coverage, underscoring the necessity for focused policy interventions (Bureau, 2022). Local data highlight the increased challenges faced by the uninsured in accessing services for severe health disorders, chronic diseases, and preventative care. Last quarter, the AWC had 520 patient visits. This was 147% higher than the same quarter the previous year. Data from the Athens Wellbeing Project reflects the reality shown in AWC

data. The Athens Wellbeing Project shows that in the last year, 1 in 5 households needed primary care and did not get it, while 1 in 4 could not get the dental care they needed. Funding streams have dwindled significantly, putting a more significant strain on the clinic (*AWP 3.0 Health Report, 2023*).



Policy Recommendations

The indigent care crisis in Athens, GA, has prompted the Athens Wellness Clinic (AWC) to devise comprehensive policy options to enhance access to healthcare for uninsured individuals aged 18-65. Recognizing that more than one solution may be needed, AWC has identified multiple avenues to address its critical priorities of increased funding opportunities and additional staff for non-clinical work.

Reform Provider and Funding Model:

- Diversifying the funding model to accept Medicaid and other insurance forms would open new revenue streams. Getting Medicaid is vital for maintaining financial viability and ensuring the clinic remains accessible. Embedding a Medicaid benefit navigator within the clinic would facilitate eligible patients in obtaining coverage, enabling the clinic to receive payments for services rendered.

Engage in Organizational Planning with Board & Financial Analysis:

- Collaborating with board members and financial analysts is essential for organizational planning. A financial analysis undertaken by Mike Martin, an experienced healthcare finance professor at the University of Georgia, would evaluate the clinic's current financial position, identify growth opportunities, and provide a roadmap for avoiding future funding gaps. Increased investor confidence from this effort would broaden funding sources.

Implement Public Service Awareness Campaign:

- A public awareness campaign is crucial to communicate the clinic's significance to the community. Utilizing a media kit containing informative assets, AWC can raise awareness about its imminent closure, emphasizing its essential role. This campaign can drive public support and donations, ensuring the clinic remains a vital community resource.

Partake in a Stewardship Campaign:

- A continuous stream of funding can be achieved through a stewardship campaign. AWC can strengthen investor relationships and emphasize the organization's importance in collaboration with a philanthropic community consultant. Monthly and recurring donations resulting from a stewardship campaign would contribute to the clinic's financial sustainability.

AWC is urged to implement a combination of these recommendations. There may need to be more than a singular solution, and the clinic must act swiftly to secure its financial health and continue providing essential healthcare to the community.

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