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CALIFORNIA'S LAWS STRICT ON CLINICS

By Shari Roan, L.A. Times Staff Writer, January 22, 2007

A trendsetter in many ways, California is behind the curve when it comes to retail-based health clinics. Other states, such as Minnesota and Ohio, have seen dozens of such outlets open and flourish in the last five years, but California has only a few.

Now owners of retail-based clinics, plus some healthcare consultants and economists, are pushing for changes in laws that could make the state more accessible to them.

California mandates that nurse practitioners be supervised by a physician, although the doctor can be off-site for much of the time. One doctor can supervise up to four nurse practitioners. In many other states, nurse practitioners have greater autonomy.

California also requires that clinics be part of a medical corporation owned by a physician, who then hires nurse practitioners or physician assistants. In other states, clinic companies can directly hire and staff nurse practitioners.

Physician involvement, meant to protect consumers, can add to the cost of running such clinics, which has ostensibly made clinic owners wary of operating here.

"Other parts of the country are more welcoming from a regulatory and cost point of view," says Mary Kate Scott, a healthcare consultant and author of a 2006 report on retail clinics published by the California HealthCare Foundation. "But I would argue that no state needs this more than we do."

The low fees charged at such clinics could help meet some basic health needs of the uninsured, Scott says. California has 6.6 million uninsured residents, the California HealthCare Foundation says. Moreover, the clinics could help alleviate overcrowding in hospital emergency rooms. According to the California Medical Assn., 60 emergency rooms closed in the state between 1990 and 2000. Ambulances are diverted because of overcrowding about 25% of the time in Los Angeles County.

"People say they have nowhere else to go, so they end up in the emergency room," says Scott. "But it's in all of our interests to get people the right care at the right time in the right place."

A report released earlier this month by the Pacific Research Institute called for softening regulations that strictly limit the use of nurse practitioners.

"People are saying, 'Why don't we have these in California if they are going to reduce the cost of healthcare?' " says John R. Graham, director of healthcare studies for the Pacific Research Institute, a California think tank that promotes free-market policies. "We need to remove the regulatory obstacles to this kind of innovation."

In his plan for overhauling healthcare in the state, Gov. Arnold Schwarzenegger has called for more lower-cost healthcare models and for changing regulations to give nurse practitioners more authority.

However, the state's laws were written as they were to protect consumers and provide oversight of healthcare, says Sandra Bressler, vice president of medical and regulatory policy for the California Medical Assn. The organization opposes any changes in the laws that would reduce physician oversight of nurse practitioners.

"We're not in favor of their having independent practices," she says. "That is largely because of their training. They are not going to have the breadth of knowledge to deal with a primary-care setting."