Our Future Starts Here

BY MARY ANNE GRAF

ommitted to mission and a tradition of social justice, Catholic health systems and hospitals have a long history of providing care to the poor and vulnerable. Historically, children — the future of our communities, our work force and our nation — are among the most vulnerable members of our society.

> At the time the Patient Protection and Affordable Care Act passed in 2010, more than 1 in 6 Americans were uninsured, representing an alarming 9 percent increase over the previous year.

Medicaid and the Children's Health Insurance Program (CHIP), both under funding attacks, cover many low-income children, but millions remain uninsured. Medicaid reimbursement for office care is below cost, causing many pediatricians to turn down Medicaid patients.

We find another hint of the future of children's health in the alarming percentage of childbearing-age women who are suddenly uninsured — almost 25 percent — and often deprived of prenatal care. Pregnancy is where child health begins.

The lack of prenatal care has a significant impact on birth weight, brain development and the incidence of birth defects and premature birth. Further, the role of hospitals in children's care is confusing. Some hospitals, including numerous Catholic hospitals such as those represented in the articles that follow, provide robust inpatient services. For the majority of others, however, the very

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low need for pediatric inpatient beds — only 6 percent of the adult beds needed in the same metropolitan area — presents an economic dilemma.

Unless chronic illness is an issue, today's child rarely experiences an inpatient stay. What millions of children need and cannot easily access

is the day-to-day care that leads to healthy and productive lives. As the need for inpatient pediatric beds continues to decrease, new needs — and innovative programs to meet them — ■ Mobile outreach care to poor or rural populations with free immunizations, well-child exams, nutritional/obesity assessment and counseling

■ Outreach enrollment assistance to parents for Medicaid and CHIP programs. The Robert Wood Johnson Foundation estimates that more

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define a new role for Catholic health care. For example:

Prenatal care clinics for uninsured women, often immigrants, who may be able to access hospital care but not all-important prenatal care

■ Birth and parenting education and culturally-appropriate support for all families, including the uninsured

■ Normal-newborn clinics to ensure safety at hospital discharge and support the critical first year of life

ADDITIONAL INFORMATION

Kaiser Family Foundation, 2008 and 2011 Snapshots on Employer Health Insurance Costs and Worker Compensation, www.kff.org/insurance/ snapshot/chcm030808oth.cfm (2008) and www.kff.org/insurance/snapshot/Employer-Health-Insurance-Costs-and-Worker-Compensation.cfm (2011)

National Association of Children's Hospitals and Related Institutions (NACHRI); www.childrenshospitals.net

Robert Wood Johnson Foundation, *Going Without: American's Uninsured Children*, August 2005, www.rwjf.org/files/newsroom/ ckfresearchreportfinal.pdf

U.S. Census Bureau, 2009 Census Data on Health Insurance Coverage of Women and Children than 70 percent of uninsured children could be covered by these programs

■ Pediatric hospice and palliative care, homebased or in a hospice center. These rare programs can turn the impending death of a child into a remarkable experience of a life well-loved and well-lived. Noah's Children (www.noahschildren. com), part of the Bon Secours Virginia Health System, is one example

■ Pregnancy and children's fairs on hospital campuses aimed at prematurity prevention, child and maternal screenings and free immunizations.

These outreach programs — many already being provided by Catholic hospitals, but many more are needed — will not only help prevent lifelong illness, but will introduce tomorrow's patient to Catholic hospitals and their physicians. Today's financially stressed young parent will thrive as the economy improves. Providing compassionate and needed care today, when they needed it the most, will serve the mission of Catholic health care and make a long-lasting impression on them, one that benefits all of us.

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