

Testimony in favor of AB 228

From Stan Brock,
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Remote Area Medical (RAM)

REMOTE AREA MEDICAL (RAM) has developed a system over the past 28 years that has mobilized over 80,000 volunteers to donate their services, travel at their own expense, and pay their own hotel bills, to provide free care for the underserved. According to a recent estimate there are now nearly 50 million Americans living below the poverty line.

How desperately in need of care are these people? Desperate enough to line up by the thousands throughout the night, in heat, rain, snow, wind or hail, to get a number-a precious piece of paper that gives them a chance that on that particular day, a kind hearted volunteer practitioner of the healing arts, often licensed in another state, will deliver the care they need, first come first served, free of charge. They will not be asked probing questions about income, eligibility, nationality, whether they believe in God, or if they can produce a government issued photo I.D. The only question the RAM doctor will ask is, "where does it hurt?"

Well over half a million patients have passed through the open doors during more than 690 RAM free clinic events held at schools, sports stadiums and fair grounds. RAM clinics use no government funds and are paid for by tax deductible contributions from the public and foundations. Many decades ago I designed the system to take airborne relief to people living in remote regions of the Amazon where I once lived. Back then we were 26 days on foot through a trail in the rain forest to the nearest doctor. Today, the people we treat are in America-young, old, working poor, unemployed, uninsured, underinsured, some homeless, but many middle class hanging on in the grip of mortgage foreclosures and retrenchment. They are Black, White, Hispanic, Asian, and every other race and creed, all with one thing in common: they cannot afford the dentist, the eye doctor, the physician, or even the veterinarian for the family pet. For many of these people, a visit to a RAM event is their one stop shop for dental, vision, and numerous other conditions from PAP smears and Mammograms to diabetes and in-growing toe nails.

For the half million patients that RAM has treated, it has changed lives and, in some cases, saved lives at no cost to the government or the tax payer. You see, the greatest impediment that Remote Area Medical faces in providing free care here in the United States is that, for some extraordinary reason, practitioners educated and licensed in one state are not allowed to cross state lines to provide free care for needy Americans. That is the problem that charities who want to provide care for the underserved face in Nevada.

So why would state and federal governments in large part refuse to change the system? I have appeared before Congressional Committees in Washington and the Surgeon General's staff on this subject. I asked them to consider the case of a licensed aircraft mechanic who lives in New Jersey. He or she is allowed to remove an alternator from an aircraft in Nevada, but a dentist licensed in New Jersey is not allowed to remove a bad tooth in Reno or Las Vegas!

There are a few exceptions. Tennessee changed the law in 1995 to allow out-of-state practitioners to provide free care; and Illinois, Connecticut, Colorado and Oklahoma have recently followed. But the process has to be simple to attract volunteers. Large teams, sometimes more than a thousand strong are required to treat the huge turnout of patients at these events. After RAM treated 7,000 patients in one week in Los Angeles, but turned away thousands more due to a shortage of California licensed

volunteers, California passed Assembly Bill 2699. However, California legislators delegated implementation of AB 2699 to the various state boards to determine the application procedures for volunteers to follow. State boards of Medicine, Dentistry, Optometry, Nursing and Veterinary Medicine can hinder implementation of legislation by requiring volunteers licensed in other states to jump through burdensome bureaucratic hoops before they are allowed to volunteer their free services. Tennessee and Illinois kept the procedure simple; practitioners with a valid license that is not under judicial review in any state, can just show up with license in hand and provide free care for needy patients so long as the free clinic is under the auspices of a registered charitable organization. It only takes a few minutes for the registered organization to verify the practitioners credentials through internet sources.

Eighty-five percent of all the patients who visit a RAM free clinic are between the ages of 29 and 64, but there are children that fall through the cracks. Why did a seven-year old boy at a RAM event in Appalachia point to all four of his permanent molars with advanced decay and say to the volunteer dentist, "If I start crying you keep pulling them all out because I can't stand this toothache anymore"? Kids of uninsured families leave the umbrella of state and federal programs at age 18, and without family insurance are on their own. By the time they reach age 29 or so and have had no regular care, things are starting to deteriorate, particularly in dental and vision categories, and nowadays due to poor nutrition obesity and adult onset diabetes.

Why did 24 year old Kyle Willis die on August 31, 2011 at a Cincinnati Hospital from an infected tooth? Why did a Michigan woman die of severe periodontal disease on October 8, 2009, allegedly because the state eliminated dental Medicaid benefits? Why did a 12 year old boy die in Maryland in 2007 of dental infection? He had Government funded coverage but his mother could not find a participating dentist to treat him.

People with defective vision cannot meet acuity standards to operate equipment, read the newspaper looking for work, or drive a car safely on the highway. A simple pair of corrective lenses in most cases will solve the problem. When uninsured folks get sick they go to a hospital emergency room and the tax payers end up with the bill, but emergency rooms don't fix teeth and don't make eyeglasses.

The World Health Organization (WHO) lists the rankings of national health systems for 190 countries. The United States is ranked number 37. How is it then that our country spends \$2.3 trillion dollars on health care, more than any other country in the world, while 50 million of its citizens are unable to benefit from the system?

One of the saddest parts of trying to help these people is on the last day of a free RAM event we always have to tell some of them we are sorry, but we cannot see any more patients. The number of people that we have to turn away is related to the number of volunteers we have to treat the patients. If the government would allow willing volunteer practitioners to cross state lines, fewer people will be turned away. The spirit of volunteerism is one of the greatest traditions of the health care professions, a tradition that should be encouraged and not forbidden. I urge Nevada to adopt simple straightforward legislation to allow health care practitioners properly licensed in other states to visit the beautiful state of Nevada and volunteer their services alongside Nevada licensed practitioners for the benefit of the state's underserved.

Respectfully yours,
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