FROM THE HEART

Volume 2, Issue 1 Winter 2005



We seek to reclaim
the Biblical and historical
commitment of the people of
faith to care for the poor who are
sick. The Clinic provides
quality, affordable healthcare
and health education to the
growing number of low income,
uninsured working people of
Nashville who do not have
access to primary medical care.

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Primary Healthcare For Those In Need

Letter from Dr. Henderson



I think it's safe to say that, for the last few years, everyone who pays taxes or is in any way connected with our healthcare system has been following closely the debate regarding the future of Tenncare. I am a family physician and do not claim to be a sophisticated economist nor would I be considered a visionary - more likely I'd be termed a "plodder" and thought to be a bit naïve. I don't purport to have a clear grasp of all that ails Tenncare and thus am in no position to confidently prescribe the appropriate remedy. But based on 28 years of medical practice in Missouri and having to deal with that state's traditional Medicaid program and then being privileged the last four years to work for a not for profit clinic here in Nashville that provides primary healthcare to the uninsured (Faith Family Medical Clinic), I think I'm in a position to make some observations. I'm not going to denounce Tenncare (I suppose it was a noble concept at conception) but just about everyone can now recite a litany of reasons why this program is now at the brink and probably most in the medical profession agree that it's time to pull the plug. So the question is posed - what will become of the 330,000 people across the state who will lose their Tenncare medical coverage and will be joining a comparable number already without health insurance? Well, as I said previously, I'm no visionary but I am a realistic optimist. Just in the last few weeks I've been involved in a number of meetings during which representatives from state and local health departments, Tenncare officials, and health care providers (individuals & institutions) have all come to the table with the same overriding genuine desire to do something to address this breech in our health care delivery. (Yes, there are those on both sides of the present Tenncare impasse who are concerned for the poor). This is what I foresee –

- State and local health departments are gearing up to do their part and will receive additional funding to expand their services.
- Other clinics such as Matthew Walker and the United Neighborhood Health Clinics will continue to serve their patients who lose their Tenncare and will in some way receive adequate additional compensation enabling them to do so.
- Other not for profit faith based clinics will extend their hours and add staff to meet the greater demand. Churches and individuals will increase their support of such clinics, recognizing the fact that it's just the right thing to do.
- Hospitals will continue to donate services as long as all providers do their utmost to discourage patients from visiting emergency rooms for primary non emergency care.
- Patients must be educated to be more responsible, accountable, & compliant in regards to
 access and utilization of healthcare (e.g., pharmaceutical usage must be more appropriate,
 encouraged by proper constraints.) And considering that only 1 in 5 of those coming off
 Tenneare are truly uninsurable, some will need to "bite the bullet" and purchase a lower cost
 high deductible plan and perhaps consider an HAS. (Insurers must provide affordable plans
 not to cover routine office charges and prescriptions but to protect the insured during
 catastrophic medical events that all too often lead to bankruptcy.)
- And last, and most importantly, physicians out in the trenches will step up to the plate. I cannot tell you how many times I've heard the comment from my colleagues that they'd just as soon not deal with Tenncare at all period. They'd rather go ahead and take care of those patients and just have them pay what they are able to pay on a sliding scale. Most of the physicians I know are a compassionate lot and feel blessed and privileged to do something they genuinely enjoy. (I'm acquainted with a large family practice group on the southside of Nashville whose policy is to provide care for everyone in need 20 30% of their patients are self pay.) And I just know that all those physicians out there who are already caring for the majority of the Tenncare patients will somehow continue to see these folks just like in the old days the pre Tenncare days.

In Him, Dr. Tom

"God sent me another life through Faith Family Medical Clinic. If it hadn't been for the clinic, my cancer wouldn't have been detected in time because I couldn't afford to go to a private physician." Karn Pang

Karn and her husband Joshua, their sons Joseph and Jonathan, and Karn's mother are all patients at Faith Family Medical Clinic. The family moved to Nashville in August, 2001 when they purchased a convenience store with Karn's sister and her family. Karn and Joshua couldn't afford insurance and came to the clinic in July, 2002 because Joshua has high blood pressure, gout, and high cholesterol and had been without his blood pressure prescription for several years.

At first Karn came to the clinic for routine check-ups, until she began to have stomach problems. In February, 2004 she passed out from pain one night and she went a hospital emergency room where they gave her benedryl. She came to see Dr. Tom Henderson at Faith Family Medical Clinic the next day and he sent her to Dr. Harrison Shull who performed a colonscopy and found a tumor. Dr. Shull subsequently told Karn and Joshua that she had colon cancer. Karn is forty-three, had always been happy and optimistic, and there was no history of cancer in her family. This was obviously devastating news to them.

Karn came to the clinic after her diagnosis and Dr. Henderson and Heather Dooley, physician's assistant, prayed with her. Karn subsequently had twelve inches of her colon removed by Dr. Jonathan Cohen and Dr. Habib Doss, oncologist, began treating her with chemotherapy. Dr. Doss recently recommended a CT scan to detect any possible recurrence and fortunately it showed no signs of cancer. BioImagining provided the CT scan at no cost because Karn is a patient at Faith Family Medical Clinic.

The total cost of Karn's surgery and treatment was over \$70,000. However, the doctors and hospitals are working with the Pangs to pay a manageable amount over time.

Karn says, "The staff at Faith Family Medical Clinic are like angels. Lives are saved because of the excellent care provided by the clinic's staff."

Luke Boren has just completed an eight week clinical rotation at the clinic as part of his training to be a Physician's Assistant. Luke received his



Bachelor of Science degree in exercise physiology from Harding University and while studying there, went on a summer mission trip to Uganda. This trip stimulated his interest in medicine and made him realize he wanted to pursue a career in medicine. Luke will graduate from Trevecca Nazarene University with a Master's of Science in Medicine in August. Luke said, "It was refreshing to work at the clinic where people go to work to help people – not for a paycheck. Many patients told me how fortunate I was to work with Dr. Henderson – he is the best doctor in Nashville. It was great to be in a clinic that encourages prayer".

Luke is interested in working in a third world country after graduation. It is apparent that Luke has a commitment to using his talents to help others.

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Our Newest Volunteer - Dr. William Ewers

Dr. William Ewers is well known to many Nashvillians as a doctor, friend or mentor. He recently began volunteering at the clinic on Mondays and he anticipates increasing his time here to three days per week when he retires from the Frist clinic in March. Dr. Ewers has been in practice over fifty years and his dedication to medicine and to teaching, is obvious. He is a Clinical Professor at Vanderbilt University Medical School from which he received his M.D. degree.



Dr. Ewers' ancestors were all missionaries and physicians so it is likely that he would follow in their footsteps and devote his life to helping others. Dr. Ewers says the clinic staff are all excellent but he is here "because of Tom Henderson". According to him, "Patients at the clinic receive care that is equal to what they would receive in a university setting". Dr. Ewers is invaluable to staff - serving as a mentor and teacher – always kind and patient and willing to share his lifetime of knowledge and experience.