

Testimony for the Office of Risk Management
April 23rd, 2010
Submitted by Alicia Wilson

Good morning and thank you for the opportunity to testify today. My name is Alicia Wilson, and I am the Executive Director of La Clínica del Pueblo, a comprehensive health center serving members in the Latino Community regardless of their ability to pay. Thank you for allowing me to speak with you about the importance of the Medical Liability Captive Insurance Agency for La Clínica and all of DC's community health centers.

I started at La Clínica in 2000 as an HIV Case Manager and I have had the honor of working with La Clínica's patients and staff at all levels of the organization. Serving approximately 7,500 patients annually, La Clínica is one of several safety net health centers that care for the uninsured and under insured residents of DC. Without these safety net health centers, there would be no where for these DC residents to get health care. We offer pediatric to geriatric care, including prenatal care, and comprehensive health services including mental health, as well as community health outreach and education.

Over the years, I have seen La Clínica grow from a staff of one and half physicians to its current staff of 6 providers, or 4.5 Full-Time Equivalent providers, several of whom are volunteer physicians. Throughout its history La Clinica has relied on volunteer physicians to augment the services provided by its paid staff. When La Clínica del Pueblo received Federally Qualified Health Center (FQHC) status in 2007, we were able to receive malpractice coverage through the Federal Torts Claim Act (FTCA), one of the many benefits available to FQHC health centers. However, the FTCA explicitly excludes malpractice coverage for volunteer providers. We therefore continue to rely on the MLCIA for malpractice insurance for volunteers. Without it, we will have to make the difficult choice between keeping our doors closed to all volunteer

doctors, or paying large amounts of money for private malpractice insurance for these volunteers.

Up until 2008, La Clínica relied on the Free Clinic Assistance Act for malpractice insurance for its volunteer physicians, and all physicians before we received FQHC status. Since the Free Clinic Act started in 1986, La Clínica and other community health centers fought every year to keep funding for the Free Clinic Assistance Act in the budget. Because of the uncertainty of this program, La Clínica worked with the Department of Insurance, Securities and Banking to establish a more stable source of liability insurance. It was a huge step forward when the District government created MLCIA in 2008. When we learned that budget proposals might eliminate the MLCIA we were shocked to hear that this important and integral program might be taken from us without any consultation as to our thoughts on the matter. With MLCIA eliminated, along with the Free Clinic Assistance Act, La Clínica would have no other options.

Like almost all nonprofits these days, La Clínica's resources are stretched very thin, and if we want to continue to serve the Latino community with our integrated health services, we will need continued and increased funding in fiscal year 2011 and beyond. The Latino community in DC is growing, and we need to grow our services to meet this demand. Removing the MLCIA program will stretch our resources even further and force us to make difficult budgeting decisions we should not have to make. I know that all of the health centers in DC will be forced to make similar decisions. I join my fellow clinic representatives here today to express my support of MLCIA and to encourage you to continue its funding.

Thank you for your time today.