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**Center for Healthcare Research & Transformation**

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## **HELP FOR MICHIGAN'S HEALTH CARE SAFETY NET**

### ***U-M study will help safety net providers cope with growing need***

Ann Arbor, Mich. - For many who struggle with health care costs or lack of insurance, free clinics and other health care “safety net” organizations provide services that are truly life-saving. In partnership with the Center for Healthcare Research & Transformation, a team of University of Michigan (U-M) researchers is looking for ways to help Michigan’s safety net providers meet the challenges of caring for increasing numbers of uninsured, low income, and vulnerable people in Michigan.

“Many safety net providers are actively seeking strategies that will help them meet growing demand,” said Peter Jacobson, professor of health law and policy at the U-M School of Public Health and the study’s principal investigator. “Our goal with this study is to bridge the gap between academic research and the realities faced by clinic directors, and to recommend concrete strategies they can use to enhance efficiencies, make the best use of scarce resources, and extend services to those in need.”

Michigan’s health care safety net includes approximately 250 federally qualified health centers, free clinics, school-based health centers, and hybrid models. As part of the study, Jacobson and his team are interviewing clinic leaders and staff to better understand the internal and external factors that affect their operations and identify best practices that can be shared with other clinics.

A 2009 report by the Center for Healthcare Research & Transformation (CHRT) shows the entire health care safety net under stress, with rising numbers of uninsured (now over one million Michigan residents) and steep increases in the cost of hospital uncompensated care (up 68 percent from 2004 to 2007). As the number of uninsured rises, and state and local health departments move away from providing direct services, free clinics and others serving vulnerable populations become even more important to the health care safety net.

“While some believed health reform would obviate the need for safety net providers, it now appears these providers will be a central component of any health reform plan at the state or federal level,” said Marianne Udow-Phillips, director of CHRT. “It is essential that these clinics have the necessary tools to function effectively and efficiently given the important population they serve.”

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The safety net study builds on work done by Jacobson in an earlier study funded by the Blue Cross Blue Shield of Michigan Foundation. Beyond supporting individual providers and strengthening the existing safety net, results from the new study (available summer 2010) can be used to support and enhance the future structure of Michigan's safety net.

ADDITIONAL RESOURCES:

More about the safety net project: <http://www.chrt.org/research/population/enhancing-efficiency-in-safety-net-providers/>

Peter Jacobson's bio: <http://www.sph.umich.edu/iscr/faculty/profile.cfm?username=pdj>

CHRT's Cover Michigan report on health care coverage in Michigan and the U.S. (pdf): [http://www.chrt.org/assets/cover-michigan/CHRT\\_Cover-Michigan\\_01-29-09.pdf](http://www.chrt.org/assets/cover-michigan/CHRT_Cover-Michigan_01-29-09.pdf)

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**The Center for Healthcare Research & Transformation (CHRT)** sponsors research and public information to promote evidence based care delivery, improve population health, and expand access to care. Housed at the University of Michigan, CHRT is a partnership between U-M and Blue Cross Blue Shield of Michigan to test the best ideas for improving the effectiveness and efficiency of the health care system.

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