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FSU MED

A need for rural doctors

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farming out physicians
in the countryside

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The need for Country doctors

A void exists in rural areas when it comes to medical care, but some programs are trying to address it.

By SARAH SKIDMORE
The Times-Union

Paul Payne's hometown of Crawfordville boasts about three stoplights and close to the same number of doctors.

When Payne finishes medical school at Florida State University, he will return to Crawfordville or a similar area to work. As a native of a rural area, he's seen firsthand the need for medical care there and is eager to meet it.

Payne knows his job won't be lucrative. Most rural residents are uninsured or have coverage through low-paying public-assistance programs, but he doesn't care. He's never been one for grand business plans. Payne spends his free time running a small bean farm on his parents' land even though it yields only enough cash to pay for gas and some textbooks during the school year. He said the satisfaction he hopes to get living in a rural area and serving its residents justifies the modest business plan he has for himself.

"I'll probably get paid in watermelons one day, but what do you really need to get by in life?" Payne said.

Some doctors need something more than Payne wants or a rural community can provide.

According to the 2000 U.S. Census, 33 of Florida's 67 counties are considered rural. There are approximately 1.1 million citizens in these counties but not enough physicians. The state is filling spots in its rural doctor recruiting programs as well as it can, but there is still a need that is difficult to meet. Rural areas don't offer an urban lifestyle or



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Paul Payne, an FSU medical student, grew up in Crawfordville and wants to return to a rural area to work in medicine when he's done with school. In the meantime, he works at his bean farm in Crawfordville.

profitable business opportunities, which turns many physicians away. And although the overall number of physicians practicing in rural areas has increased over the past 30 years, the growth is outpaced by proportional gains in urban areas, according to Florida State University.

FSU is adding a new rural-specific track in the summer of 2005 to encourage the interests of students such as Payne. The university found that being from a rural area is the greatest indicator a doctor will serve in a rural area, but Jerry Boland, director of rural health at FSU, said there are no guarantees.

"Going to medical school is a long process," Boland said. "You never know how they turn out at the other end."

A need

The need for physicians is

nationwide: About 20 percent of the U.S. population resides in rural areas, and less than 11 percent of physicians practice in rural communities.

These communities face a double bind of not having enough providers nearby but also not having the means to pay for them. Nearly 21 percent of adults in rural counties are uninsured, compared to 16.5 percent in other counties, according to the Florida Office of Rural Health. For some physicians, this is another disincentive to go rural.

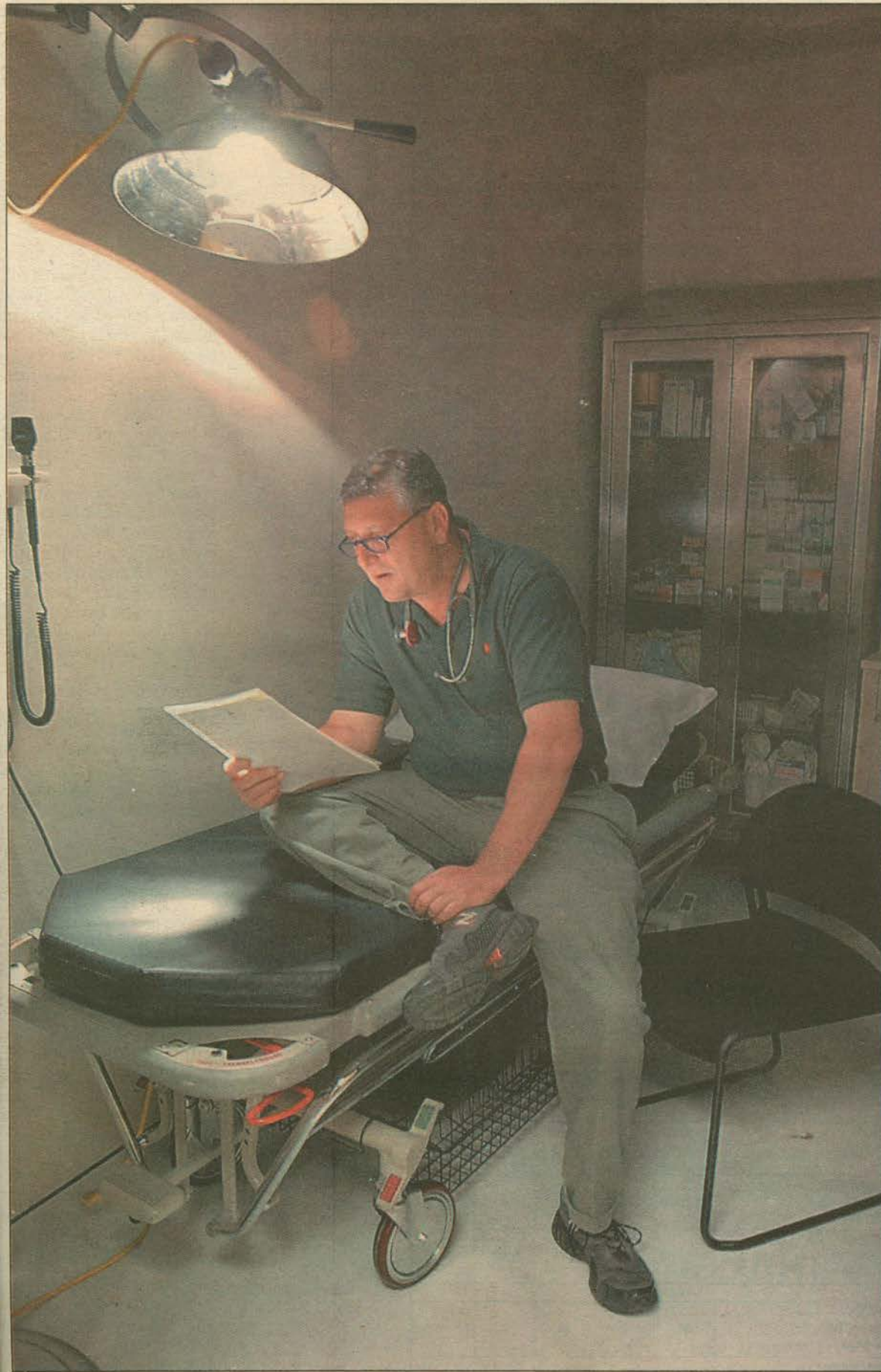
"We have a tremendous need if you look at access to care," Boland said.

The conditions take a toll on community members. Rural residents have a higher mortality rate than urban residents for motor vehicle accidents, infant mortality, diabetes, Alzheimer's disease and chronic lower respiratory disease, according to the Florida Office of Rural Health. The rate at

which rural infants die grew in 1999 and 2000 while the same death rate for the state declined, according to a 2002 study by the office.

With limited resources in rural areas, residents sometimes turn to nearby cities for care. Duval County is not rural but is flanked by several designated rural counties. In the past year, about 26 percent of the patients at Duval County hospitals were from outside of the county: about 16 percent from Clay, Nassau, St. Johns and Baker counties and another 10 percent from other parts of Florida and Georgia, according to data from the Health Planning Council of Northeast Florida. Lori Billelo, executive director of the council, said the patients don't represent much of a strain on local hospitals but they could be better served.

"It's more a strain on the residents having to transport themselves," Billelo said. "A lot of

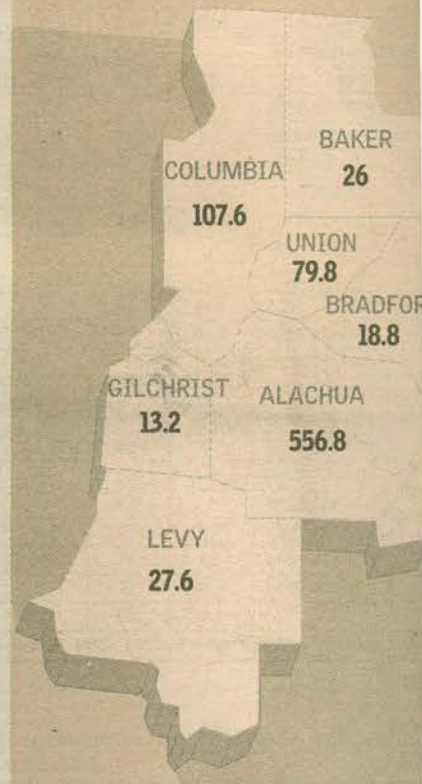


"Being on call every third night for the rest of your life is tough. It's easy when you are 25, it's not so easy when you are 55."

Michael Vernacchio
A family doctor in Keystone Heights

Doctor to patient ratio b

The difficulty of recruiting health care can limit access to health care for residents; this is the number of licensed physicians per 100,000 people in these north Florida counties.



according to an FSU study. Florida can only fill 30 J-1 Visa spots a year but it filled all of the spots this year and next.

"We're using the programs we have access to very well. It's just [limited]" Kathy Winn, program administrator for the Office of Health Professional Recruitment.

Perry Florida has taken some recruiting efforts on itself. Doctors' Memorial Hospital there provides scholarships for some local students to go to medical school and the city implemented a sales tax increase to pay for a new hospital building.

The struggle to get physicians to areas of need is a problem nationwide. But Winn said Florida faces a unique situation because it has a small number of residency spots, where physicians are trained on the job, to expose students to Florida's rural areas.

JOHN PEMBERTON/The Times-Union

Michael Vernacchio is a family doctor in Keystone Heights. He says he has to deal with a wider array of problems than he might in an urban area.

residents come to Jacksonville not just for hospital care but for all types of care."

Funding

The state relies on its recruiting programs to draw doctors to rural areas because of the inherent lack

of incentives to go there.

The state primarily uses two programs: the National Health Service Corps and a specialty visa for foreign doctors. The National Health Service Corps provides scholarships or loan forgiveness to doctors who agree to serve a rural community for a number of

years. Florida has about 156 people working under the NHSC programs. The state does not have its own loan repayment program.

The J-1 visa program allows foreign doctors to serve in areas of need. Nearly half of the rural primary care doctors in Florida were born in a another country,

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Program director for University of Florida's area health education centers program

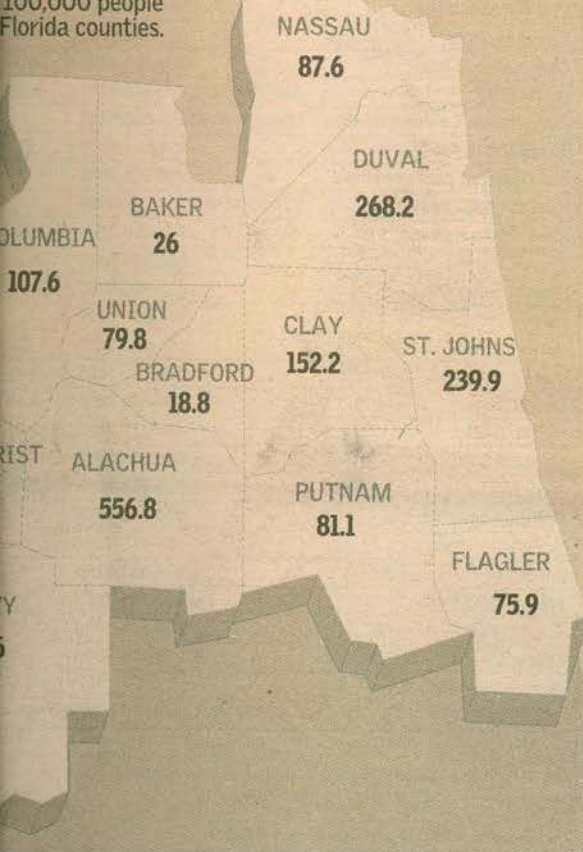
"I'll probably get paid in watermelons one day, but what do you really need to get by in life?"

Paul Payne

FSU medical student

patient ratio by county

of recruiting health care professionals in rural areas to health care for residents. Based on state information, number of licensed physicians per 100,000 people in Florida counties.



STEVE NELSON/The Times-Union

FSU study. Florida J-1 Visa spots and all of the spots left.

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"We get most of our doctors from out of state," Winn said. "When people come to this state, they don't say 'I want to go to Putnam County' because they don't know about Putnam County. Florida is Miami, Orlando, Disney World."

Florida trails most of the nation at 45th on the list of number of residency spots, according to the Association of American Medical Colleges databook. Florida has 2,764 spots, whereas other large states like California and New York have 8,964 and 14,670 respectively.

Physicians that do come to Florida's rural areas often work at county health department clinics or community health centers that receive some state or federal funding, Winn said.

Michael Vernacchio, a family practitioner in Keystone Heights, works at a clinic that gets about

one-eighth of its funding from federal sources. He said without this assistance, it's difficult for practitioners to break even.

"It's nice not to worry 'Is that person going to pay on the way out?'," he said.

Lifestyle

Since money isn't a draw, the rural lifestyle is the most important and challenging tool in recruiting for rural areas, Boland said.

"It's more of a match issue of finding the right people who find the benefits of a rural community over the city," Boland said.

Some nearby county health departments such as those in Baker and Bradford counties, which are designated rural, said their physicians are able to commute from Jacksonville, which has helped their hiring. But Clay County had to stop primary care service temporarily at its Green Cove Springs clinic because of difficulty hiring nurses, primarily because of low pay.

A rural area doesn't have the social or cultural resources of a city, and the relative isolation doesn't suit some people. Job and schooling opportunities for spouses and children are limited. And the demeanor of rural residents is different. But some people, like Mandy Lauramore, find the setting "refreshing."

"I love small towns. I love the people," said Lauramore, whose e-mail handle is "ilovegrits."

Lauramore is starting medical school soon and she plans to return to her hometown of Macclenny or another rural area when she's done.

"The people are very appreciative of the health care you give them. In urban areas it's not always that way," she said.

Larry Rooks, program director for University of Florida's area health education centers program, has worked as a rural physician for many years. He said he enjoyed the slower lifestyle and intimacy of a rural practice but said the perks can also be its downfall.

Rooks said he was always "on

Doctors: Rural areas in need of physicians to shore up care

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call," and patients would approach him everywhere. One time at a Hardee's drive-through, the boy at the other end of the intercom recognized the doctor's voice and said "Hey Doc, how's my dad?" before Rooks even got a chance to pull forward.

"Everyone knows who you are and where you are," Rooks said. "It doesn't matter if the clinic is closed, they know where you live."

Because many of the state recruiting programs require only temporary service, long-term rural physicians said burnout is common.

"Being on call every third night for the rest of your life is tough. It's easy when you are 25, it's not so easy when you are 55," said Vernacchio.

Vernacchio said it is also challenging because he has to deal with a wider array of problems than he might in an urban area. He said he does much of the work a specialist would do because many patients can't pay for or get to one easily. And some patients may present unique problems, such as in his clinic's other sites where migrant workers visit with skin rashes from field chemicals or rare parasites.

"There's no way we can get [an immediate lab result] or CAT scan," said Rooks. "You have to rely more on your diagnostic skills and medical acumen."

Rooks said the best candidates for rural health care work can deal well with uncertainty.

"It's about being able to adapt," Payne said. "Some people can't get to a doctor so you go to them"

Payne said he understands the mentality of rural patients. He said he knows some people will miss their appointments because they had to farm or the

fish were biting.

"[Rural residents are] not worried about fast Internet service or what car they are driving, it's about getting by," Payne said.

But similarly, patients may be more resistant to lifestyle changes, Rooks said.

"Rural people — you talk to them about jogging or aerobic exercise and they've been out fishing or farming all day, and they look at you like you are crazy."

Payne said he was working with his mentor in a rural panhandle county when a 92-year-old woman came to see them. She was complaining about problems with one of her eyelids. She said she couldn't move it and her vision was impaired. She told the student and doctor, "I can't see anymore to shoot the squirrels, and I don't miss."

"Rural Florida and urban Florida — it's almost like two different worlds," Payne said.

Although not all stay, the majority of physicians are exposed to a rural medical setting at some point in their training, according to an FSU study. And Rooks said they typically respond well to the experience.

"The pace is a little slower, and the people are a little bit nicer, and the boiled peanuts and barbecue are the the best," Rooks said. "And they like that."

Some of those who want to stay embrace it. Payne said he wants to spend the time with patients that they need; he sees this as sitting with them drinking sweet tea, not rushing through a visit to adhere to a schedule dictated by an HMO.

"It's all about perspective," Payne said. "People who aren't from rural areas don't understand that."

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