

Editorial: Curing California's acute doctor shortage

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California doesn't have enough primary care physicians. Forty-two of its 58 counties fall short of the federal government's most basic standard. The state needs another 2,000 doctors, and the situation will get dramatically worse next year -- even in Silicon Valley -- when between 2-4 million Californians obtain health insurance under Obamacare and go looking for a doctor.

The California Medical Association wants to build more medical schools and expand opportunities for young doctors. Good plan -- but thinking it will solve the immediate problem is like expecting a Band-Aid to heal a bullet wound. Training a doctor takes a decade. That's a long time for a patient to sit in a waiting room.

The chair of the state Senate Health Committee, Sen. Ed-Hernandez, D-West Covina, has a good idea to help bridge the gap.

A practicing optometrist, he wants to expand the ability of nurse practitioners and other professionals such as pharmacists and optometrists to help treat patients. Their work would be limited to what they're already qualified to do, but allowing them to offer more direct service would make better use of their skills and provide at least some care for people who can't find a doctor.

Seventeen other states, including Washington, Oregon and Colorado, have expanded the scope of nurse practitioners. Doctors predicted a surge in medical errors, but studies have not found this.

The Institutes of Medicine, the health arm of the National Academy of Sciences, has recommended for years that nurses should play a larger role in diagnosing and treating patients and in helping to manage chronic diseases.

California already has 16,000 nurse practitioners. They can be trained more quickly than doctors and at considerably less expense.

Hernandez' legislation has the enthusiastic support of Jim Wunderman, president and CEO of the Bay Area Council business organization. Three bills (SB 491, SB 492 and SB 493) would allow nurse practitioners to establish independent practices and deliver limited care without a doctor's oversight.

This could prove especially helpful in rural areas, where primary care physicians are particularly scarce, and in urban neighborhoods with a high percentage of Medi-Cal patients. Only about 50 percent of California doctors accept new Medi-Cal patients, the second lowest rate in the nation.

The bills also would allow optometrists to diagnose and treat diseases related to the eye. Pharmacists would be able to vaccinate children and, with additional training, prescribe or adjust prescriptions within the limitations of their expertise.

California has to make more efficient use of its medical professionals to serve newly-insured patients. Instead of fighting Hernandez' bills, doctors should work with him to build in safeguards.