

Remote Area Medical: Serving those who cannot afford healthcare

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Why is it that in a developed country like the United States, many of its citizens do not access to affordable health care? According to the CDC, in 2014-2015, 17.3 percent of people between 18-64 had no usual source of health care (Prince, 2016, p.37). In the state of Virginia almost a third of the population, 32%, of community health center patients are not insured (Virginia). Although Virginia is one of the top ten wealthiest states, it is among the top ten for number of people uninsured (Virginia). Because of these shortages in healthcare, organizations such as RAM, Remote Area Medical, have had to set up pop-up clinics in parts of rural Virginia. RAM is a non-profit organization that stands by the mission to prevent pain and alleviate suffering by providing free quality healthcare to those in need. RAM is an organization that provides medical clinics all across the United States, but has an emphasis on serving Virginia. They bring multiple clinics to Virginia each year. One of the annual clinics in Wise, VA sees thousands of locals that rely on the clinic for all their health needs. Although RAM is helping to alleviate the problem, why is an organization like RAM needed in the first place? (Remote)

RAM receives all of its funding from individual or corporate donations; its is a non-profit organization. In 2016, their revenue was made up of 71% individual contributions and 29% corporate and family foundation sponsors (Remote). RAM relies on volunteers from the communities and medical, dental and veterinarian professionals along with many others. Since its founding in 1985 it has had over 100,000 volunteers and served more than 700,000 individuals and 67,000 animals, delivering \$112 million worth of free health care services (Remote). There is currently a law that forbids medical volunteers' from working across state lines. There are currently only 12 states that do allow this. The founder Stan Brock is working with Rep. John J. Duncan Jr., R-Knoxville, to pass legislation that eliminates this law and allocates 1 million dollars to any state that passes the bill. This will allow for medical professionals to cross borders and set up clinics easier (Remote).

Most of the clinics follow the same general structure. There is Dental, Medical, Vision, Veterinarian and Triage divisions. You must have a license to work unsupervised in these areas (Remote). Undergraduate students must work in General Support and cannot provide medical care (Remote). However Pre-Professional students can provide care under supervision (Remote). The Virginia sector is set up with the same format. There is a specific branch of RAM that deals solely with

Virginia. When asking the media relations specialist, Robert Lambert about the separate division of RAM of Virginia he had this to say, "RAM used to operate under an affiliate model and RAM of Virginia is the last remaining affiliate. They are their own organization with their own director and fundraising. They take care of all of the clinics in Virginia with our assistance"(RAM). RAM's most popular clinic is held every year in Wise, VA that sees over 2,300 people (Remote).

Most citizens are aware of the fact that under the administration of Barack Obama, the Affordable Health Care Act was passed. The intent of the act was to give more Americans access to care. When asking Lambert about the effect of the act on the clinics of RAM, he said, "The popularity of our clinics did not decrease after the affordable care act. We are still seeing more and more people each year. One of the reasons for that is even with the affordable care act, millions of people still don't have dental or vision insurance. So those are the services that people come to us for most often"(RAM).

The demographics of these clinics seem to vary depending on what part of the country RAM is serving. Lambert had this to say regarding the demographics, "It really varies. I was just in Bradenton, Florida over the weekend and we a 54% Hispanic population at that clinic. But we've served state employees who couldn't get off during the week to see a regular provider. In Baltimore Maryland it was a totally different scene there; there was a very high homeless population and high numbers of African Americans"(RAM). Some of the times the people coming into the clinics are people who have insurance. Dr. Ross Isaacs, a volunteer medical provider, said, "It's the working poor, middle of their lives, most with families, most not substance abusers, and employed without adequate insurance" (Remote).

One of the most interesting questions to ask regarding RAM is why is the organization needed in the first place? In its simplest form, there are gaps in our health care system. Lambert had this to say on the matter, "There are situations today where hospitals are closing and prices are sky rocketing even with insurance. A lot of times I tell people insurance isn't the golden ticket, someone could have insurance but that doesn't mean they can afford the premiums and the copays and all the additional expenses you have to actually use the insurance. And a lot it has to do with the amount of poverty in the area. Its really a multi-variable issue"(RAM).

Due to existence of RAM, it is easy to see that our health care system needs to be improved. How that is done is a question that experts have

been trying to figure out for many years. That fact of the matter is the health care system is not going to change overnight. As Lambert put it, "I don't foresee the need to have our services go away anytime soon in the future" (RAM).

REFERENCES

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