## Doctors to fight exclusion

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who is considering legislation that might require the hospital to insure the African American community retains access to Carolinas Medical's facility or

cut its state funding.
"They (hospital officials) were going to come back with some kind of compromise," Williams said. "They said were going to look at it and let us know what they planned to do about it."

Carolinas Medical is a quasipublic entity to which local government appoints members of its board of directors. The Carolinas HealthCare System is a public, not-for-profit entity established under the N.C. Hospital Authorities Act. It is not owned or operated by the city or county.

Carolinas Medical considers the contract a "business decision," similar to its contracts with such health professionals as pathologists and anesthesiol-

Aluko thinks the issue goes beyond business

In a letter to dated March 11. Carolinas Medical president Paul Franz argued that Aluko has not been denied privileges at the hospital, just the use of

its Cardiac Catherization Lab.
"He and his colleagues at Mid-Carolina also have use of the excellent Cardiac Catherization Lab we own at Mercy Hospital located just across the street from his office," Franz said.

He noted that the Sanger Clinic treats more African American patients than Mid

"We are offended by any hint of racial discrimination," Franz said. "We do not tolerate such practices, are appalled by any suggestion that such actions may occur here, and think it noteworthy that Dr. Aluko's legal case does not have in it any reference to racial or economic discrimination.

Williams said he is concerned that the African American community is not properly served by the exclusive contract with the Sanger Clinic.

"Excluding five black physicians from doing business at Carolinas Medical removes five physicians in the Charlotte Medical Society," Aluko said. "The hospital gets state and federal funds. The racial impact has not been looked at.

Eighty percent of black cardiologists are excluded from doing business in the hospital."

"If African American physicians wanted to refer patients to African American cardiologists, that choice is limited," Aluko

Cardiac ailments are especially of concern to African Americans.

"There is a disproportionate representation of diseased deaths in the African American community compared to the white community," Aluko said.
"Part of the reason is the inadequate access to black physi-

"The hospital has belittled the problem of heart disease in the African American community and demonstrated insensitivity in removing access of black patients to black physicians.'

Williams said he's concerned about Carolinas Medical's actions in the black community, for example, its dealings with C.W. Williams Health Center.

"It is easy to be insensitive without realizing they are insensitive," Williams said, noting what he called a shortage of African Americans in the hospital's upper level management.

Williams said one of his concerns has been the hospital's lack of support for the C.W. Williams. "They have been trying to force them out...taking patients C.W. Williams has worked with for a long time,' Williams said. "That's a concern I have had for a long time."

Carolinas Medical is partners in a health maintenance organization which is building three medical clinics in the black community, including one at Five Points near Johnson C. Smith University and one in the bus transfer center in uptown Charlotte.

Those centers will compete with black doctors, who are often excluded from participation in health maintenance organizations

Excluding African American cardiologists from the Carolinas Medical lab further limits access

of black doctors and their

patients, Williams said.

"Someone said slavery was a business decision," Williams said. "Sometimes business decisions negatively impact on certain groups of people.

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