

Medicaid embraces victims

BY ERIN FRANCE
STAFF WRITER

Immediate medical assistance for the victims of Hurricane Katrina could be followed by a push to take care of affected people well into the future.

Medicaid, a state and federal program, is one program that already has provided significant medical help to affected areas.

Some requirements of the program have been relaxed so displaced people can take advantage of health care services, said Christina Stephens, public information officer for the Louisiana department of health and hospitals.

Temporary coverage can be given to individuals without the standard amount of paperwork, Stephens said.

"They can make a self-declaration of disability," she said, adding that the coverage would last for five months. "At the end of the five months we'll look at their eligibility."

Although proof of eligibility has been relaxed, the qualifications for receiving Medicaid are the same as

before the storm, Stephens said.

Before Hurricane Katrina, there were one-million people on Medicaid in Louisiana, she said. This population included children younger than 19, pregnant women, low-income parents, individuals 65 or older and the disabled.

Those who do not fall into these categories are unable to receive Medicaid help, Stephens said.

She said Congress must decide whether Medicaid can expand its coverage to include more of the population devastated by the hurricane. "Nothing formal can be done for them right now," she said.

Francis Rullan, public relations officer for the Mississippi division of Medicaid, said Louisiana, Alabama and Mississippi all have petitioned the federal government for waivers that would reduce the state's burden of providing prescription drug benefits to hurricane victims.

Without insurance, Medicaid or Medicare coverage, some people will have to rely on charity, Stephens said.

"They'll have to rely on the safety

nets in place before the hurricane," she said.

Alan Taylor, a spokesman for Charlotte-based Carolinas Medical Center's mobile hospital, which is offering free medical treatment to hurricane victims, said physicians are treating more than hurricane-related injuries.

"You also see general medical conditions," he said.

Common illnesses such as high blood pressure or diabetes are treated in the free clinics, but a program for the long-term treatment of these diseases is not yet in place.

But he said he is certain a program will be in place soon. "They'll be taken care of, that's for sure."

U.S. Rep. Bennie Thompson, D-Miss., said there would be support for victims in the future in the areas of medicine, shelter and jobs.

"The system will support them whether they stay in the relocated area or go back to where they came from," he said.

Contact the State & National Editor at stntdesk@unc.edu.

Price unrelenting in criticism of president

BY ERIN GIBSON
ASSISTANT STATE & NATIONAL EDITOR

Local elections, last year's presidential race, the war in Iraq and issues raised by Hurricane Katrina were all fair game Monday night as about 100 members of UNC's Young Democrats had an open discussion with U.S. Rep. David Price, D-N.C.

Price first praised the group for its hard work in promoting the Democratic candidates in the 2004 election and for their efforts to register and encourage voters to come out to the polls.

He told the group members that he hopes they will continue their efforts with local elections this year.

"I've never seen it that good," Price said. "And UNC led the pack."

But much of the discussion was less complimentary in nature, centering primarily on the Bush administration's handling of the conflict in Iraq and the aftermath of Katrina.

Price said the national government has let its people down first with what now is a "quagmire situation" in Iraq, the mishandling of health care, a mounting deficit and now its reaction to Katrina.

"This is a failed presidency,"

Price said. "In many respects it was evident last fall. In more respects it is evident now, and people are starting to catch on."

Patrick Elliot, a senior political science major, asked Price what Democrats in Congress are doing to make sure funding for social programs is not significantly cut in Bush's effort to avoid increasing taxes to rebuild the areas destroyed by Katrina.

Price, a member of the House Appropriations committee, said that he, too, is concerned about that issue, and that he and other Democrats have plans. But he said it would help if they were consulted.

"We haven't had a single appropriations meeting about this," he said. "After all, we're only the appropriations committee."

Price said he thinks the federal

government failed the American people in its reaction to Katrina on several levels — mainly in its response time and in providing adequate funding for agencies such as the Federal Emergency Management Agency that needed to respond.

He said the President has avoided addressing his role in the problems that arose after Katrina.

"(Bush says:) Don't engage in the blame game," Price said. "I'm sorry, but that's what accountability is all about."

And Price said it wasn't always this way, drawing attention to President Bill Clinton's administration during which FEMA was included as part of the Cabinet.

"We had our share of disasters in the 90s — Fran, Floyd — and we worked with FEMA," Price said.

He added the process was much more efficient before FEMA was grouped with the Department of Homeland Security.

"In the name of fighting terrorism, let's not forget ... other areas of needs our people have," Price said.

Contact the State & National Editor at stntdesk@unc.edu.

UNC program responds to call for expansion

BY BRANDON REED
STAFF WRITER

UNC's Area Health Education Centers program is looking to expand to accommodate an increased number of pharmacy and other health professional students.

"We've been asked to respond to a shortage of pharmacists in key areas around the state," said Robert Blouin, dean of the School of Pharmacy.

Pharmacy students and other health care professionals travel to AHEC sites in their final year of school not only to receive clinical training but to help provide a critical service for the people of the region.

AHEC Director Thomas Bacon said expansion will allow more health care officials to participate.

"We can directly point to a thousand physicians who have graduated from AHEC residency programs who have stayed in the area (around the clinics)," Bacon said.

Students in AHEC residential programs are much more likely to stay in the small towns around the centers in which they were trained, helping curb discrepancies in health

coverage across the state.

AHEC in turn encourages more students in public schools to enter health professions in hopes of better matching the racial makeup of the state, Bacon said.

The expansion also will advance the technological capabilities of the program.

Recent cuts left AHEC with a tight budget, so the program needs additional funds before it can expand.

"We've been asked to do more ... with a reduced funding base from the state," Bacon said.

Campus leaders have pointed to AHEC as crucial to the University's mission of service to the state.

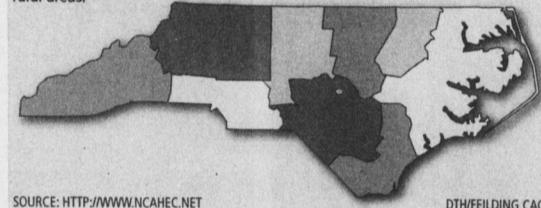
"AHEC is a shining example of an outreach program that improves the health of North Carolinians in every part of the state," Chancellor James Moeser said last week during his State of the University address.

The expansion of AHEC comes in light of the planned revisions to MedAir, an AHEC program that allows health officials to fly to clinics throughout the state.

The program, based out of

Program to improve rural health care

Due to massive shortages of health care professionals in the state, AHEC is looking to increase its health care program from the nine regional centers currently operating. AHEC is charged with creating more health care providers to rural areas.



SOURCE: [HTTP://WWW.NCAHEC.NET](http://www.ncahec.net)

DTH/FIELDING CAGE

Chapel Hill's Horace Williams Airport, could be relocated to Raleigh-Durham International as soon as 2008, when the construction of UNC's satellite campus Carolina North is scheduled to begin.

The drive to RDU is estimated to be three times as long as the trip to Horace Williams during rush hour, and some have said they will be less willing to participate in MedAir.

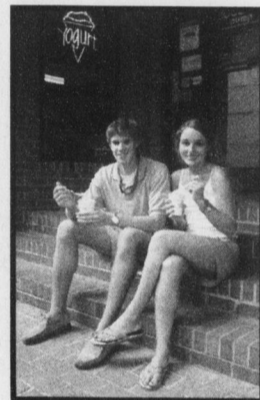
But AHEC officials are working to accommodate those that might be put out by the trip to RDU.

"You're never going to have another site that is convenient as that, but we're willing to work," Bacon said.

He said program leaders are considering a van service that will transport participants to RDU, allowing them to work on the trip.

Contact the University Editor at udesk@unc.edu.

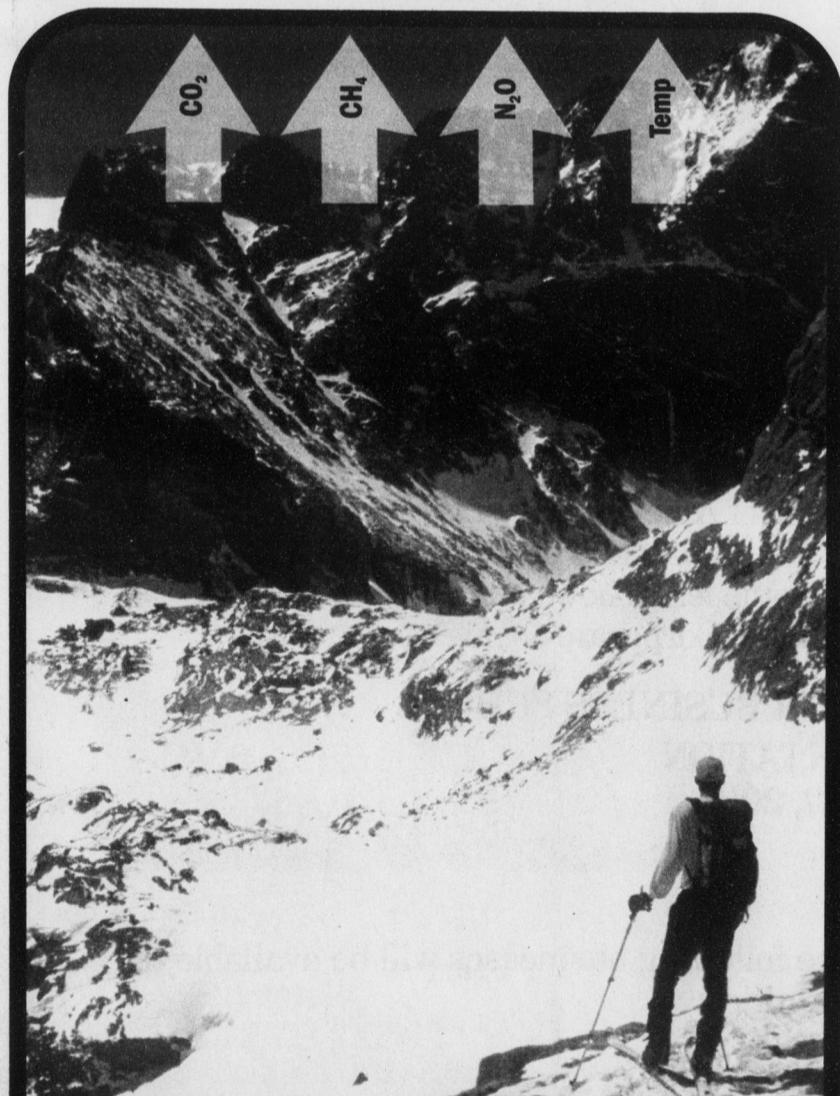
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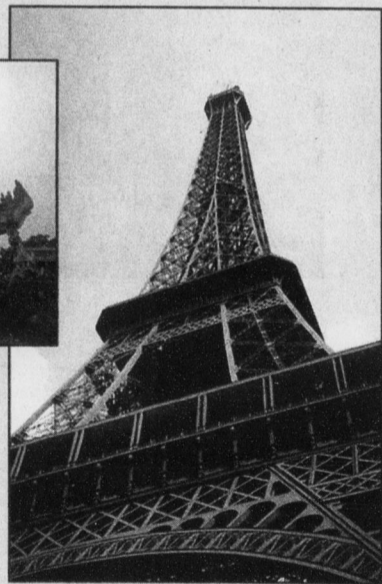
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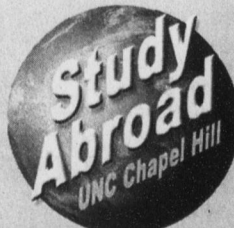
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