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## Barnidge: Many puzzle pieces to assemble in effort to save DMC

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Doctors Medical Center in San Pablo has been at death's doorstep so often that a casket has been ordered and an obituary written. The combination of costly medical care, underinsured patients and 40,000 emergency room visits per year has left the West County hospital forever coming up short.

Contra Costa County has propped it up over time with \$35 million in loans. Several years ago, Kaiser Permanente (\$12 million) and John Muir Health (\$3 million) both lent a hand. State legislators recently authorized a \$3 million gift.

Those were helpful gestures, but they were fingers in the dike. The plan described Tuesday by Supervisor John Gioia is supposed to ensure viability for the next five years. But, boy, it has a lot of puzzle pieces.

The ingredients requiring assembly:

Contributions by area hospitals Kaiser, John Muir and Alta Bates account for \$2 million to \$4 million per year; the Richmond City Council donates \$15 million of its \$90 million Chevron windfall; employee costs are trimmed by \$4 million annually; operational efficiencies save \$2 million more; voters pass a parcel tax; and the county forgives \$12 million in debt over the next four years.

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OK, problem solved. So who wants to go first?

To get the ball rolling, Gioia said, the county needed to do its part by passing resolutions that he and colleague Federal Glover had sponsored. One measure defers \$3 million in property tax revenue DMC owes to the county in 2015; the other waives similar payments the next three years, contingent on all the other puzzle pieces coming together.

Both measures passed, on split votes, with reservations voiced by Supervisors Mary Nejedly Piepho ("How can we afford this?) and Candace Andersen ("I'd like to see a long-term sustainable plan"). The doubts are understandable. The county isn't flush, and DMC has a troubling history.

Contingencies are also a worrisome hallmark of this plan. Richmond's participation is contingent on other participants coming through. A parcel tax is contingent on positive feedback from taxpayer surveys. Other hospitals' participation is contingent on DMC's persuasiveness. And none of it works unless administrators actually find those internal savings.

Gioia, a member of the hospital's governing board, has been at this long enough to see DMC go in and out of bankruptcy. He's seen one-time money, short-term fixes and repeated clashes with desperation. But all of that, curiously, is what gives him hope.

"I'm always cautiously optimistic," he said. "We've been able to pull a rabbit out of the hat in the past, and I'm always looking for another rabbit."

He said the relief supplied by other hospitals needn't be an annual donation. The goal is to reduce DMC's cash outflow by a set amount; a one-time gift large enough to buy down its debt might produce that result.

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He said Richmond doesn't need to come up with \$15 million at once -- \$5 million across three years or \$3 million across five will work. He said the parcel tax won't be as large as one that failed in May (14 cents a square foot); surveys will determine how much property owners are willing to pay. He said \$2 million in operational savings is doable, and \$4 million in other costs can be had by switching employees' medical coverage -- to Kaiser.

Wouldn't it be a kick if that's the final step in saving DMC?