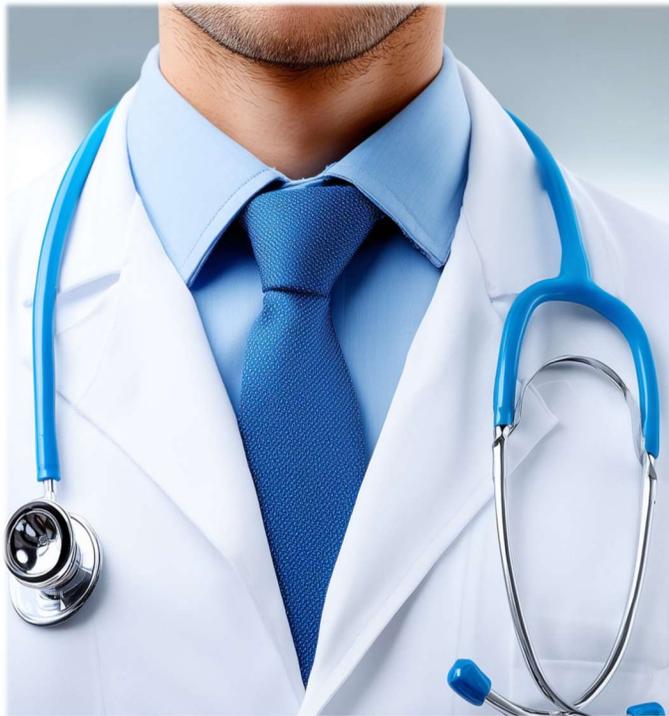


A non-profit, non-partisan corporation of public spirited leaders who have joined together to be catalysts for the economic well-being of the Inland Empire region of California – San Bernardino and Riverside counties.

Increase Federal Support to Address Severe Shortages of Primary and Specialty Physicians



In the Inland Empire:

42 primary care physicians per 100,000 residents, well below the federal benchmark of 60-80 per 100,000 – a problem that is only going to worsen as our region grows.

83-88 specialists per 100,000 residents, also well below the federal benchmark (100-105 specialists per 100,000).

These shortages result in long wait times for appointments, patients needing to seek care outside the region, delays in diagnosis and treatment for chronic and complex conditions, increased ER usage and worsened health outcomes.

We're not alone: California needs 10,500 additional primary care physicians by 2030.

Additionally:

The IE's physician workforce is aging, and residency slots are limited.

Large portions of the region are federally designation Health Professional Shortage Areas (HPSAs), meaning they qualify for federal workforce programs (NHSC, loan repayment) and signal federally recognized gaps in provider capacity.

Proposed Solutions

Assist and support the expansion of the Inland Empire physicians' workforce by:

- Increasing federally funded Graduate Medical Education (GME) residency slots.
- Expanding National Health Service Corps (NHSC) funding.
- Prioritizing HPSA-designated regions like the Inland Empire.
- Supporting loan repayment and scholarship programs tied to underserved service commitments.

Anticipated Outcomes

1. Improved access to primary and specialty care.
2. Healthcare is one of the largest employers in the Inland Empire, so focusing on these important initiatives positively affects jobs, local tax base, business recruitment, and regional economic growth.

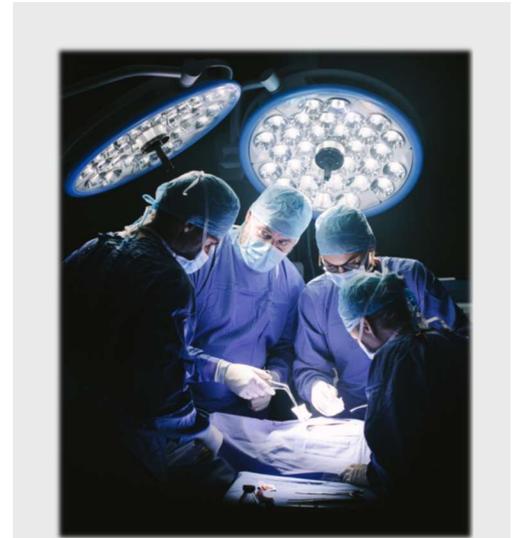
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Protect Medicaid Funding



40.4% of Inland Empire residents rely on Medicaid (Medi-Cal in California)

Almost 65% of children who live in the Inland Empire rely on Medicaid, representing 734,500 children.



1. Hospitals receive on average 80 cents on the dollar for Medicare/Medicaid services.
2. Many Inland Empire hospitals already operate on thin or negative margins.
3. Further federal cuts would harm high-growth, working-class regions like the Inland empire and would:
 - Reduce access to care
 - Eliminate services
 - Increase ER overcrowding
 - Threaten hospital stability

Proposed Solutions

No further cuts to Medicaid, ultimately ensuring stability for safety-net hospitals serving high Medi-Cal populations like the Inland Empire.

In the Inland Empire, there are 21 hospitals that qualify for the Medi-Cal Disproportionate Share Hospital (DSH) program out of 48 total hospitals in the region – (44% – close to half) – thus indicating the significant reliance on Medi-Cal services.

Anticipated Outcomes

1. Continued stability of Inland Empire hospitals.
2. Improved access to primary and specialty care.
3. Reduced ER congestion and preventable hospitalizations.
4. Healthcare is one of the largest employers in the Inland Empire, so focusing on these important initiatives positively affects jobs, local tax base, business recruitment, and regional economic growth.

