Southeastern US states see a host of hospital closures, attacks on healthcare programs

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Throughout the Southeastern US, state residents seeking medical care are seeing a raft of hospital closures and attacks on health programs while healthcare workers face increasingly deteriorating conditions.

In Alabama, two local hospitals—Princeton Baptist Medical Center in Birmingham, and Shelby Baptist Medical Center in Alabaster—closed their programs for pregnancy and maternal care on October 25. Additionally, Monroe County Hospital is slated to close its labor and delivery unit in November.

Speaking with CBS 42, Dr. Elizabeth Sahlie, a general pediatrician at Simon Williamson Clinic Pediatrics located on the Princeton Baptist Medical Center in Birmingham, expressed concerns about the impact of eliminating obstetric services at these three Alabama hospitals. “That puts you at risk,” she said, adding, “Then if something, let’s say you go into pre-term labor and you’re that far away from the hospital, that’s a really dangerous situation for a woman.”

A recent report from March of Dimes indicates that a majority of patients that would seek out such services are largely poor and working class, with 27.9 percent of women in Alabama having no access to a birthing hospital within a 30-minute drive, in contrast to the national figure of 9.7 percent. The closest trek ranges between 60 and 90 minutes out. This becomes particularly challenging for those without reliable transportation, public or otherwise.

Moreover, a study recently published by the Alabama Board of Nursing indicates that 38,725 nurses intend to exit the profession over the next four years. Despite an influx of nurses entering the workforce and migrating from other states, the study anticipates a precipitous fall in the overall number of nurses in Alabama annually by 2027.

Since 2019, court records revealed that the University of Arkansas for Medical Sciences (UAMS) has initiated legal action against more than 8,000 patients in pursuit of unpaid medical bills. Within the Arkansas court system, UAMS is the second most prolific filer of debt collection lawsuits, surpassed only by the state tax office.

According to a 2021 US Census Bureau report, the median household income in Arkansas is $52,123 while average household income is $73,346. Currently, some 500,000, or 17 percent, of Arkansans live below the state’s poverty line. The poverty rate before the COVID-19 pandemic was 16.2 percent. This rate has exploded as a result of the pandemic, as federal and state government allowed the coronavirus to ravage the nation.

Notably, UAMS’s utilization of legal recourse has surged during the pandemic. While filing a meager 35 lawsuits in 2016, this number surged a hundred-fold in 2021.

In Georgia, Republican Governor Brian Kemp’s new health plan for low-income adults has enrolled only 1,343 people through the end of September, about three months after launching. The new health plan requires people to work to be qualified for coverage under Medicaid.

The state launched the Pathways plan in July just as it began a review of Medicaid eligibility following the end of the COVID-19 public health emergency in May. Federal law prohibited states from removing people from Medicaid during the three-year emergency.

The state previously said it delayed the reevaluations of 160,000 people who were no longer eligible for traditional Medicaid but could qualify for Pathways to help them try to maintain health coverage. However, observers have said they have detected little public
outreach to target populations.

Thirty-nine states have expanded Medicaid eligibility to nearly all adults with incomes up to 138 percent of the federal poverty level, $20,120 annually for a single person and $41,400 for a family of four. North Carolina will become the 40th state to do so in December. None of those states require recipients to work to qualify.

Louisiana is grappling with an alarming increase in infant mortality rates, placing it at the 48th position among US states. Furthermore, data from the Annie E. Casey Foundation for 2021 revealed 35 percent of children have parents who lack stable employment, 27 percent of children live in poverty, and 11 percent of teenagers are either unengaged in school or unemployed, all surpassing national averages.

In Mississippi, Republican Governor Tate Reeves has said he remains opposed to Medicaid expansion and derisively calls the proposal “welfare expansion.” The governor’s Democratic challenger Brandon Presley, meanwhile, has pledged to make access to healthcare a priority in his campaign platform and has promised to expand Medicaid on “day one,” should he be sworn into office. This promise is belied by the fact that the Democratic Party failed to codify Roe v. Wade; has expanded detention centers for migrant children, which are notorious for failing to provide proper medical care, hygiene and hygiene products; and is preparing to make further cuts in social welfare programs.

According to the Center for Healthcare Quality and Payment Reform, 34 of Mississippi’s 74 rural hospitals are at risk of closure. The struggling hospitals cite major losses on uncompensated services rendered, or services provided to people without health insurance coverage. With resources being used by the poor and working class, emergency rooms by law cannot turn patients away, regardless of their coverage status, meaning that hospitals are providing care without financial compensation from the state and federal governments. Mississippi’s hospitals lose about $600 million on uncompensated care annually, which would be alleviated through the nationalization of medicine and health care.

Lastly, in Tennessee, the decision to close the Baptist Minor Medical Center in the city of Bartlett, Baptist Minor Medical Center in Memphis, and Baptist Minor Medical Center in Olive Branch was made on October 22 with the aim to “better serve” its patients, as stated by the hospital.

The strike by Kaiser Permanente workers in October was the largest-ever healthcare workers strike in the US. The strike by more than 85,000 health care workers, which could have crippled the private profiteers of the healthcare industry, was isolated to a three-day strike by the Coalition for Kaiser Permanente Unions (CKPU).

This capitulation of the unions to the diktats of Kaiser Permanente and the policies of the Biden administration, which is funding Israel’s genocide of the Palestinians with billions of dollars, is a warning for all healthcare workers.

Although the Kaiser strike did not have a physical presence in the southeastern US, healthcare workers are subject to the same exploitation, along with state and federal anti-democratic and discriminatory laws and policies.

The conditions facing healthcare workers are worsening by the day. The way out of the deepening crisis facing healthcare and other workers lies in the working class struggle for the socialist reorganization of society through the formation of rank-and-file committees. Wresting power out of the hands of the corporatist union bureaucrats, these committees must wage their struggle independently of the ruling establishment, as well as against the pro-capitalist policies of pseudo-left reformists like the Democratic Socialists of America and the Movement for a People’s Party, which tirelessly work with the capitalist parties and union bureaucrats to tether the rank-and-file to the corporations, ushering in sellout contracts, blackmailing workers, and isolating strike action.