

First 5 Commission of San Diego
April 5, 2010
Emerging Critical Need: Healthcare Access Initiative (HCA)

Request:

The action before the Commission is to consider approval of Commission staff recommendation and extend the Healthcare Access Initiative (HCA).

Background

The Commission has funded the HCA since 2004. HCA is a network of 6 providers and 13 subcontractors which currently provide services in each of the six HHSA regions. These agencies provide outreach, enrollment, retention and utilization services for pregnant women and children ages birth through 5. These contracts are currently scheduled to end on June 30, 2010.

The Commission's recently adopted Strategic Plan does not include a strategy specifically focused on healthcare access. The new plan does include as a key objective to "increase parents' and caregivers' access to needed services for their children" with the outcome measures of "*percentage of children enrolled in health insurance*" and "*percentage of children with a medical home*" as indicators of success. In addition, the new plan includes as a core strategy "targeted response to critical needs emerging from state and local economic conditions." The 5-Year Allocation Plan has committed all of the Commission's funding, except for the undesignated funds under the Emerging Critical Needs category.

The Commission could choose to extend funding for HCA as health insurance activities are targeted in the Strategic Plan and access to health care could be funded as an emerging critical need for young children and pregnant women due to current economic conditions. The current HCA contracts have two additional option years which could be exercised to avoid any gap in services. Per the Commission policy on emerging critical needs, Commission staff will perform an annual review to determine if there is an ongoing need.

Healthcare Access Initiative Services and Outcomes

The Commission's Healthcare Access Initiative was launched in FY 2003-04 and has provided the following services for families with young children and pregnant women:

- Outreach to identify families in need of healthcare and eligible for Medi-Cal, Healthy Families or Access for Infants and Mothers (AIM);
- Assistance to families in completing enrollment applications;
- Ongoing support to families to ensure they remain enrolled in insurance; and
- Education to ensure enrollees are linked to medical homes and appropriately utilizing healthcare services.

From 2004 – 2009, **52,307 children ages 0 – 5** and **19,775 pregnant women** have been enrolled in healthcare insurance with the assistance of HCA providers.

HCA is a program that has demonstrated strong outcomes. In FY 08/09:

- 100% of children served were linked to medical homes
- 82-87% of children served retained their health insurance at the 6, 12, 18 month follow-up.
- First 5 HCA families demonstrated appropriate utilization of preventative healthcare services:
 - Within one year of enrollment, 97% of children served visited their doctor and 68.7% of children visited the dentist.
 - Regular check-ups and immunizations were top two reasons for visits to the doctor.
 - Less than 3% of children visited the ER in the past 6 months, while less than 15% visited the ER in the past year.

Healthcare Access and the New Strategic Plan

During the development of the Strategic Plan 2010 – 2015, a community needs assessment identified relatively high levels of health insurance enrollment among children ages birth through 5, increasing from

91.3% in 2005 to 95.3 in 2008 (Status of San Diego County's Children 0 – 5, April 2009). The needs assessment also identified resources in addition to the Commission's HCA Initiative that provided assistance to families in obtaining health insurance, including San Diego Kids Health Assurance Network (SD-KHAN).

The strategic planning team was directed to narrow the focus and prioritize Commission investments, and although access to healthcare was seen as important, it was determined that it was a lower priority than other strategies that are included in the new plan. Commission and planning team discussions during the planning phase acknowledged the changing landscape and the potential for increased numbers of families needing help with obtaining health insurance in light of the high unemployment rate. These discussions concluded that the need for a healthcare access strategy should be monitored, especially as changes in the State budget and the anticipated roll-out of national health care reform could potentially change local needs. If access to health care became a critical gap in the safety net of services for families with young children, the Commission could potentially address it through its strategy of "targeted response to emerging critical needs."

Current Healthcare Access Climate

Significant changes in the state and local healthcare access scenarios have occurred since the Commission's strategic planning process was completed as of result of State budget reductions and the shifting economic landscape. Changes in eligibility criteria for public health insurance and covered services, reduced resources for outreach and enrollment assistance, along with the increased demand for government-sponsored health insurance, all impact the status of healthcare access for children and families in San Diego County.

In the past year, capacity to support health insurance enrollment has decreased:

- The State government eliminated the application assistance reimbursement, which caused agencies to cease providing application assistance and support;
- SD-KHAN is currently limited to application assistance via telephone only.

While support for insurance enrollment has decreased, the need, however, has increased. High unemployment over the past 20 months has caused many families to lose employee sponsored health insurance, and increased the need for government supported health programs among a population not familiar with obtaining government resources during times of critical need.

If the Commission's HCA Initiative was to end on June 30, 2010, there would no longer be any local entity conducting outreach to identify and enroll families with young children in health insurance. Based upon past figures, approximately 11,000 children birth through 5, and 4,000 pregnant women annually would be at risk of not successfully obtaining health insurance or receiving ongoing health education and family support. This would most likely lead to an increased number of uninsured children and pregnant women, a corresponding increase in hospital emergency department visits for non-emergency (often preventable) health care needs; and an increase in babies born to mothers receiving late or no prenatal care.

The First 5 HCA providers are experienced in serving the healthcare access needs of families with young children and pregnant women. The current HCA contracts are well positioned to continue serving the community's need to ensure the continuity of services given the volatility of the healthcare access arena and economic conditions. Staff will consider how First 5 HCA providers could also assist any outreach and/or enrollment assistance efforts necessary as a result of national healthcare reform and also work with HCA providers to identify opportunities to enhance services via technology.

Commission History

- **June 2, 2008 (Item 3):** Commission awarded contracts to provide Healthcare Access services to SAY San Diego (Central Region), SAY San Diego (North Central Region), North County Health Services (North Inland Region), Vista Community Clinic (North Coastal Region), Neighborhood Healthcare (East Region) and Home Start Inc. (South Region) for up to \$3,087,538.
- **November 5, 2007 (Item 13):** Commission approved the release of a Request for Proposals (RFP) for six First 5 HCA regional contracts for a contract term of one year (FY 2008-09) and four option years.

- **November 6, 2006 (Item 6):** Commission authorized an additional one-year extension (to June 30, 2008) of the six HCA contracts to support the start-up of the State-funded access to healthcare program and to maintain stability of enrollment for pregnant women and children 0-5 for up to \$3,087,538.
- **October 3, 2005 (Item 8):** Commission approved extended the six contracts with HCA contractors up to \$4,422,679 through the end of FY 2006-07.
- **December 15, 2003 (Item 6):** Commission approved up to \$6 million over two years for the award of six HCA contracts.
- **August 4, 2003 (Item 7):** Commission approved the expenditure of up to \$6 million over two years to support HCA services for pregnant women and children ages 0-5 in each of the six HHSA regions.

Staff Recommendations

- 1) Find that the proposed contract extension for the Healthcare Access Initiative is consistent with the Commission's Strategic Plan, furthers the support and improvement of early childhood development within the County and provides a public benefit.
- 2) Act on two option years (FY 2010-11 and FY 2011-12) and add an additional option year (FY 2012-13).
- 3) Receive and approve the recommendations from the Commission staff to extend the current Healthcare Access Initiative and authorize the Executive Director or her designee to negotiate and execute a contract with the below listed 6 organizations for up to \$9,262,614 as a project length budget for FY 2010 – 11 through FY 2012 – 13 for the Healthcare Access Initiative.

	FY 2010-11	FY 2011-12	FY 2012-13	Total Funding
Home Start, Inc. (South)	\$748,743	\$748,743	\$748,743	\$2,246,229
Neighborhood Healthcare (East)	\$352,369	\$352,369	\$352,369	\$1,057,107
North County Health Services (North Inland)	\$465,782	\$465,782	\$465,782	\$1,397,346
SAY San Diego, Inc. (North Central)	\$267,645	\$267,645	\$267,645	\$802,935
SAY San Diego, Inc. (Central)	\$822,575	\$822,575	\$822,575	\$2,467,725
Vista Community Clinics (North Coastal)	\$430,424	\$430,424	\$430,424	\$1,291,272
Total Funding	\$3,087,538	\$3,087,538	\$3,087,538	\$9,262,614

- Approval of this request will obligate funds for three years from funds designated for Emerging Critical Needs:
 - up to \$3,087,538 will be approved for FY 2010-11 from that year's budget;
 - up to \$3,087,538 will be approved for FY 2011-12 from that year's budget;
 - up to \$3,087,538 will be approved for FY 2012-13 from that year's budget.

Fiscal Impact

Up to \$9,262,614 will be obligated (per above) from the FY 2010 – 11 to FY 2012 – 13 budgets from funds designated for Emerging Critical Needs as approved in the 5-Year Program Allocation Plan.

Approval of this request will leave the remaining Emerging Critical Needs funding balances of:

- FY 2010 – 11 \$1,912,462
- FY 2011 – 12 \$1,912,462
- FY 2012 – 13 \$3,912,462