



**Healthy Partners Program
Annual Report
Fiscal Year 2016/17**

Prepared by
DHHS Primary Health Services Division
August 7, 2017

Overview

Healthy Partners Annual Report Fiscal Year 2016/17

The Sacramento County Board of Supervisors approved a limited healthcare benefits program for Sacramento County residents meeting eligibility criteria who are uninsured and undocumented in June 2015. The program is called “Healthy Partners” and was launched in January 2016. The first report covered the initial twelve months of operation (January through December 2016). This report is based on Fiscal Year 2016/2017. Due to the transition from calendar to fiscal year, there is duplication in this report.

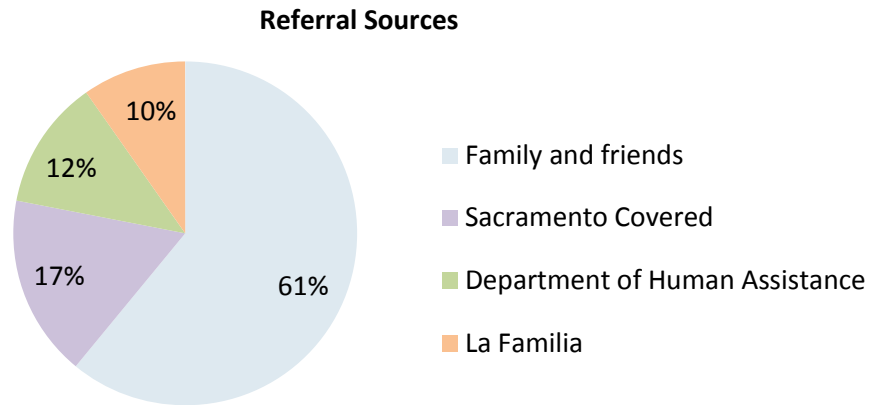
Date	Item
June 2015	Board of Supervisors approved the program.
June 2015 – December 2015	Intensive planning was completed in order to implement the program midyear. This included internal work and ongoing stakeholder input.
January 2016	The Healthy Partners program was launched. It began with primary and preventative services, behavioral health services, pharmaceuticals, and diagnostics (Quest Lab, Radiology – simple films).
February 2016	Per stakeholders’ request, the stakeholder group transitioned into a Healthy Partners Advisory Group.
April – May 2016	Employee Health Systems Medical Group (EHS) began provision of advanced imaging diagnostics. Sacramento Physicians’ Initiative to Reach Out, Innovate and Teach (SPIRIT) program and the UC Davis (UCD) onsite specialists began providing specialty services.
August 2016	Full enrollment was achieved and a wait list went into effect.
September 2016 & February 2017	Patient experience survey data was obtained and analyzed.
January 2017	Dignity Health began an evidence based diabetes group in Spanish onsite at the Primary Care Center.
Spring 2017 – Ongoing	EHS has continued phase in of services.

Outreach & Enrollment

The County Health Center has a Member Services team that completes the eligibility process, educates new members about services, and assists with member questions.

Two community-based organizations, Sacramento Covered and La Familia, donate invaluable education and enrollment assistance to individuals seeking services in the community and at local emergency departments. They received training and work closely with the Health Center’s Member Services team.

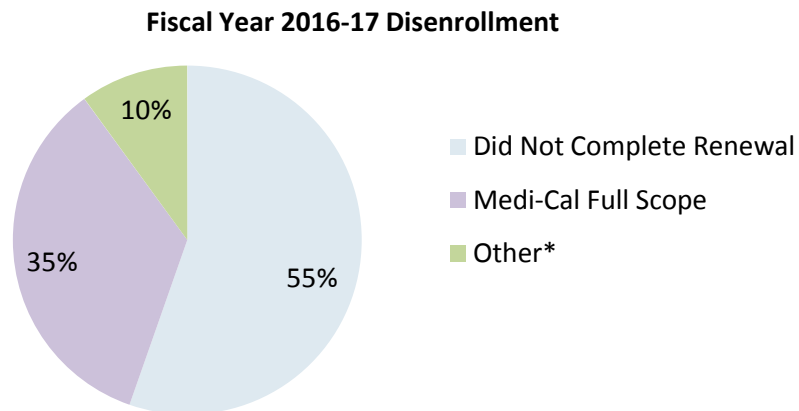
The top four referral sources are noted below. No other outreach or advertisement has been necessary to attract new potential members.



The program cap of 3,000 members was reached on August 11, 2016. Once the cap was reached, a wait list was established. The County Health Center’s Member Services team ensures current members as well as prospective members on the wait list meet program criteria. When members disenroll, Member Services contacts individuals on the wait list for enrollment. As of the end of July, there were over 400 applicants on the wait list. This list changes frequently since enrollment and disenrollment are dynamic processes. Sacramento Covered and La Familia have stated that many individuals do not wish to apply to wait on a list.

During Fiscal Year 2016/17, a total of 551 members were disenrolled from the Healthy Partners Program, about 46 per month. Disenrollment occurs when a member no longer meets program requirements or when health care coverage is obtained. Most did not complete their renewal packet (55%) or obtained health care coverage (40%).

The next chart illustrates the top reasons for disenrollment during the Fiscal Year:



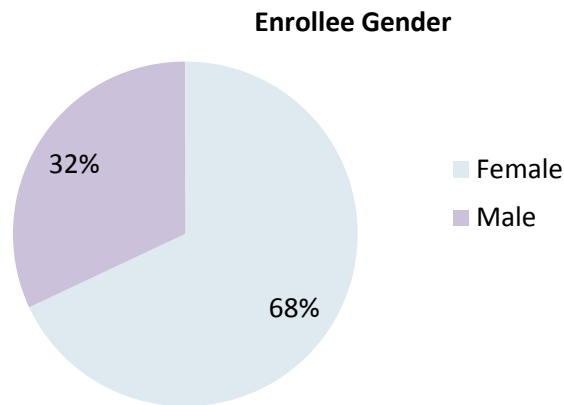
*Other includes: Other Insurance (5%), Not County Resident (3%), or Over Age 65 (2%).

Demographics

The demographic trends that were identified in the first year of the program have remained consistent.

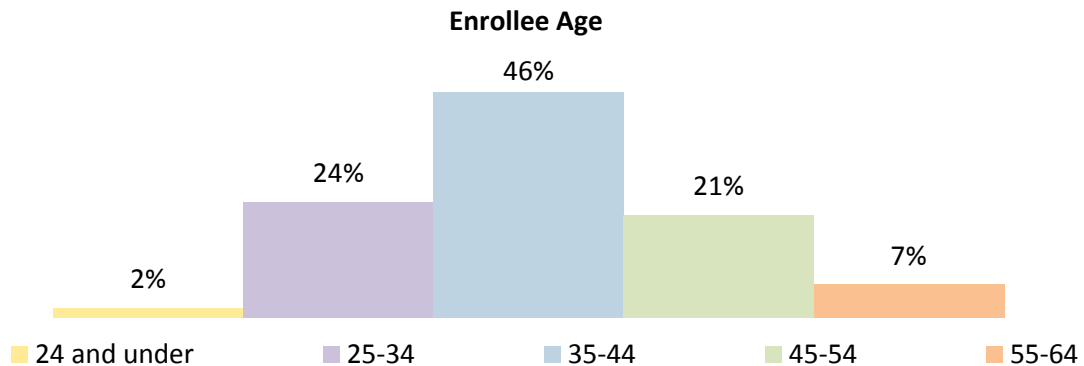
Gender

The number of females enrolled in the Healthy Partners Program continues to more than double the number of males.



Age

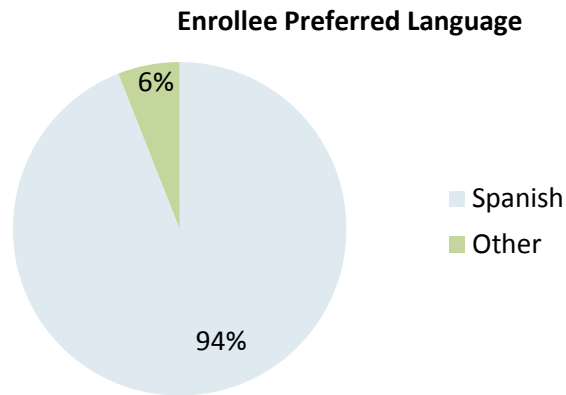
Nearly half of all enrollees are between the ages of 35 and 44. 91% of the enrollees are between 25 – 54 years of age.



There are few individuals under the age of 25 years since the enrollment criteria is set at 19 – 64 years of age. Members up to age 19 may apply for full scope Medi-Cal coverage which became effective May 2016. Enrollment was capped at age 64 years of age due to provider experience with the adult population under age 65. To illustrate disenrollment due to the upper age limit, approximately 25 individuals will be disenrolled in FY 2017/18 as a result of reaching age 65.

Preferred Language

The vast majority of enrollees continue to cite Spanish (94%) as their preferred language.



Other includes: English (3%); Russian (2%); Punjabi (.43%); Arabic (.27%); Other Non-English (.2%); Farsi (.17%); Mandarin (.13%); Tamil/Tagalog/Hindustani/ Vietnamese (.07% each); Rumanian/Korean (.03%)

Neighborhoods / Geographic Distribution

“Community Health Assessment of Sacramento County (2016),” prepared by Valley Vision, Inc. for the Healthy Sacramento Coalition, groups 15 zip codes into three geographic areas within the County – North Area, South Area, and Downtown. These zip codes have consistently high rates of poor health outcomes (above county, state, and Healthy People 2020 benchmarks) with regard to chronic disease and mental health.

Healthy Partners enrollees reside throughout Sacramento County. Approximately 74% of enrollees reside in communities with documented poor health outcomes. *This means individuals most in need of services are able to have a medical home for primary and preventative care services.* The tables below provide zip code data for enrollees as of June 30, 2017. Having a medical home and a Healthy Partners identification card has legitimized their health care experience and sense of belonging. The following tables depict enrollees by zip code in the three high need areas and in other neighborhoods.

North Area (Zip codes: 95660, 95673, 95815, 95821, 95838, 95841)

Area	Zip Code	Total Enrollees
Arden Arcade / Del Paso Heights / Old North Sacramento	95815	163
Arden Arcade / Del Paso Manor	95821	77
Arden Arcade / Foothill Farms / Belmont Estates	95841	27
Del Paso Heights	95838	149
North Highlands	95660	80
Rio Linda	95673	22
Total		518

South Area (Zip codes: 95817, 95820, 95822, 95823, 95824, 95828, 95832)

Area	Zip Code	Total Enrollees
City Farms / Fruitridge Manor	95824	368
Elmhurst / Oak Park / Franklin Blvd.	95817	30
Florin	95828	201
Hollywood Park / Land Park	95822	147
Meadowview	95832	60
Parkway / Valley Hi / North Laguna	95823	521
Tahoe Park / Elmhurst / Oak Park / Colonial Heights / Colonial Acres	95820	369
Total		1,696

Downtown (Zip codes: 95811, 95814*)

Area	Zip Code	Total Enrollees
Downtown	95811	4
Richards / Alkali Flats / Mansion Flats / Southside Park	95814, 95812*	1
Total		5

*95812 is a Post Office Box only Zip Code with no residents. Homeless enrollees using 95812 for US Mail are counted in 95814.

Other Neighborhoods

Area	Zip Code	Total Enrollees
Antelope / Foothill Farms	95842, 95843	68
Arden Arcade / Campus Commons	95825	90
Carmichael / Orangevale / Fair Oaks	95608, 95662, 95628	60
Citrus Heights	95610, 95621	73
Del Paso Heights / Natomas	95833, 95835, 95834	154
East Sacramento / Winn Park / Newton Booth / Marshall	95816	3
Elk Grove / Laguna	95624, 95757, 95758, 95759	58
Elverta / McClellan	95626, 95652	7
Excelsior / Calvine / Vineyard	95829, 95830	19
Folsom	95630, 95763	8
Galt	95632	22
Hood	95639	2
Land Park / Pocket / Greenhaven	95818, 95831	30
Rancho Cordova	95670, 95741, 95742	100
Rosemont / College Greens	95826	23
Sacramento / Lincoln Village / Sierra Oaks	95827, 95864	33
Sloughhouse / Herald / Wilton	95638, 95683, 95693	6
Walnut Grove / Courtland / Isleton / Ryde	95615, 95641, 95690, 95680	20
Total		776

Healthy Partners Enrollees Zip Code Summary Chart Point in Time: June 30, 2017		
Community Groups	Number of Enrollees	
North	518	74% of enrollees reside in communities with consistently high rates of poor health outcomes related to chronic disease.
South	1,696	
Downtown	5	
Other Communities	776	26% reside in other communities
Total Enrollees	2,995	

Zip Code Data Source: Community Health Assessment of Sacramento County, prepared by Valley Vision, Inc. for the Healthy Sacramento Coalition, 2012 and 2016.

Program Structure

The Healthy Partners Program benefits include preventative and primary care services, prescriptions (most through low cost retail, some through the County Pharmacy), laboratory tests, simple films (radiology), and advanced imaging diagnostic tests. Specialty services are provided if there is a medical necessity and the service is available. Specialty services are available through donation or contract.

Primary Care & Preventative Services

Healthy Partners enrollees receive comprehensive primary care services, preventative care and behavioral health services at the Sacramento County Health Center. Integrated behavioral health services include education, short term therapy, crisis intervention, psychiatric consultation, and medication management. Three licensed, master’s level clinicians are available, two of whom speak Spanish.

Dignity Health facilitates an evidence-based diabetes education group in Spanish at the Health Center. During FY 2016/17, nine individuals completed the program. In July 2017, one of the Health Center clinicians, who is bilingual (Spanish), received training and will be facilitating this group. This augments the Health Center’s Pharmacist-assisted chronic disease management services. Staff can also refer to chronic disease management groups at La Familia.

Prescriptions

Healthy Partners enrollees pay out of pocket for most medications through low cost retail stores such as Walmart. Medications are the patient’s only out of pocket costs for the program. Typically each prescription is either \$4 or \$10 depending on whether it is a one month or three month prescription.

The County Pharmacy provides a limited formulary for medications deemed essential and are not available through low-cost retail. The formulary was developed by a clinical / administrative program leadership team and is reviewed annually. For Fiscal Year 2016/17, the most common classes of medications dispensed from the County formulary are included on the following page.

Types of Medication	Percent
Diabetes Medications & Supplies	67%
Cardiovascular	11%
Asthma	8%
Migraine/Pain Management	5%
Gastrointestinal	3%
Mental Health	1%
Miscellaneous (neurological, anti-rheumatic, anticonvulsant, anticoagulant)	5%

Diagnostic Services

The organization of diagnostic services providers is illustrated below:

Diagnostic Services FY 2016/17	
Type	Provided by:
Radiology – simple films	County
Laboratory tests	Quest
Diabetic Retinopathy Screening (DRS)	SPIRIT & EHS
Advanced imaging – ultrasound, digital mammography, magnetic resonance imaging (MRI), fluoroscopy, computed tomography (CT), bone density	Employee Health Services Medical Group (EHS)
Pathology	EHS

Specialty Services

The organization of specialty services is illustrated in the table below:

Outpatient Specialty Services FY 2016/17			
Specialty	UCD	SPIRIT	EHS
Rheumatology	X		
Nephrology	X		
Non-operative Orthopedic	X		
Endocrinology		X	
Neurology		X	
Urology		X	
Pulmonology		X	
Gynecology		X	X
Dermatology		X	X
Gastroenterology		X	X
Ophthalmology		X	X
Physical Therapy			X
Type of Surgery	SPIRIT Surgeries		
General		X	
Ophthalmology		X	
Urology		X	

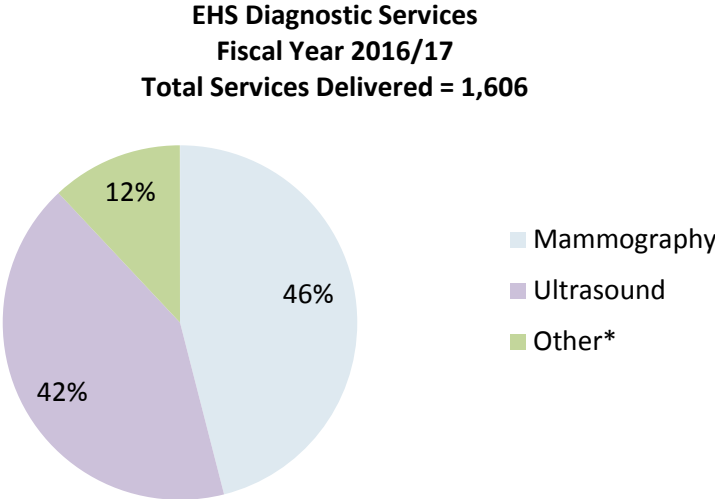
The Healthy Partners Program provides medically necessary specialty services based on availability. During the Fiscal Year, services were added as member needs were identified and arrangements were completed. The process of adding physician specialty services involved recruiting, educating, and completing credentialing documents. The SPIRIT Program, the local hospital systems, and EHS have been critical in recruiting specialists. EHS specialty services roll out began late in the fiscal year and will continue to phase in during Fiscal Year 2017/18. Some physicians have been unwilling to provide specialty care to patients who do not have a comprehensive health benefit. There have also been challenges completing surgeries due to the complexity of securing surgery centers and required personnel, such as anesthesiologists.

Services Completed in FY 2016/17

Data for primary care services, behavioral health services, pharmacy, basic laboratory tests, and radiology (simple films) are not included in this report since these are routine components of comprehensive primary care. Reported data includes advanced imaging diagnostics and specialty services.

Diagnostic Services

EHS provided a total of 1,606 diagnostic services.



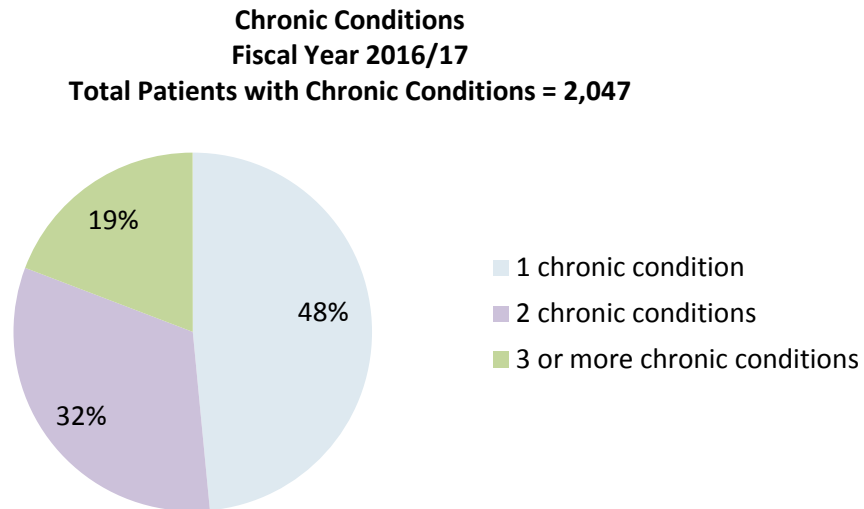
**Other includes MRI (5%), CT (4%), and Fluoroscopy (2%). The remainder had less than 1% each - Radiology, Bone Density, Pathology.*

Mammography (46%) and Ultrasound (42%) had the highest rates of utilization and accounted for 88% of the services. Diagnostic services are critical for preventative care, diagnoses, and treatment planning. All specialists require diagnostic testing as part of the specialty consultation.

SPIRIT provided 102 Diagnostic Retinopathy Services. EHS will also be providing this service. Early detection and treatment can help prevent vision loss in patients with diabetes. Diabetes is the top health issue for Healthy Partners patients, affecting 22% of the enrollees.

Chronic Health Conditions

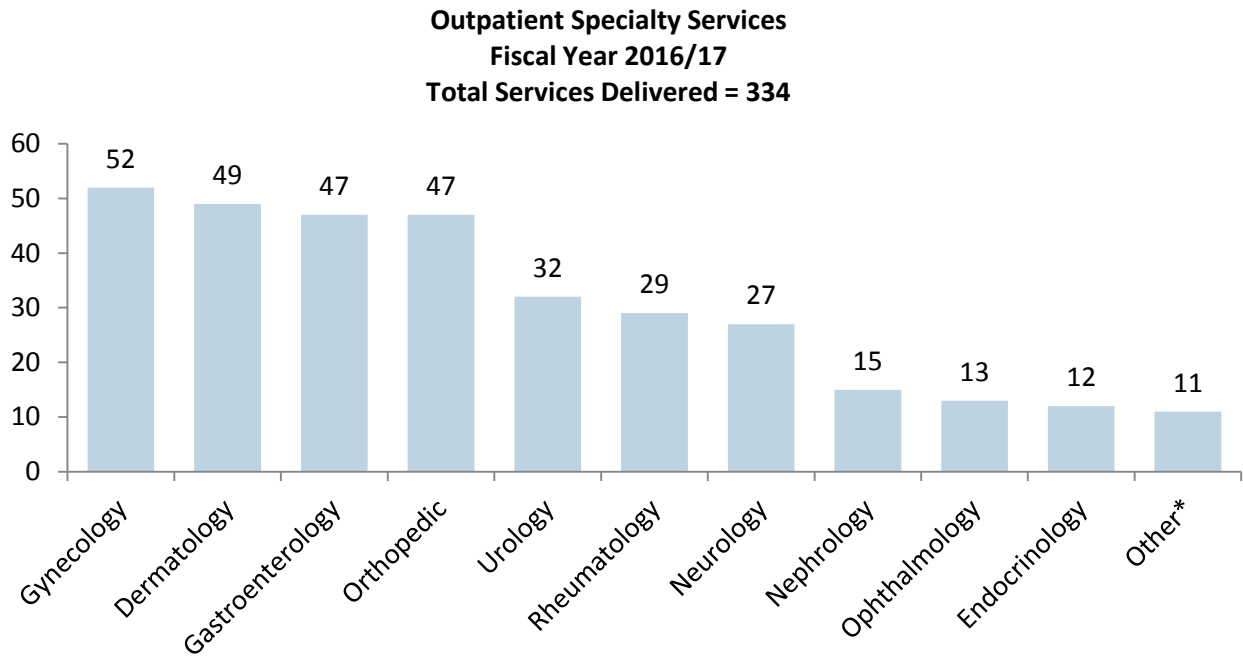
75% of all patients seen were treated for a physical health, behavioral health, or multiple health conditions. 51% of the enrollees are being treated for two or more health conditions. See the chart below:



The most common co-morbidities are listed below. For Hypertension, Behavioral Health was in the top four comorbidities so it was not listed.

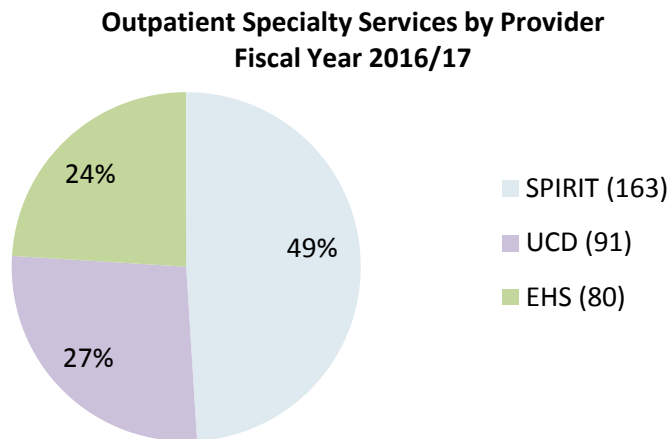
Health Condition	Top 3 Comorbidities
Diabetes	Hypertension (29%), Obesity (22%), Behavioral Health (14%)
Hypertension	Diabetes (42%), Obesity (22%), Lipid Metabolic Disorders (17%)
Behavioral Health	Obesity (14%), Diabetes (14%), Hypertension (10%)
Respiratory (Asthma, Allergies, etc.)	Behavioral Health (20%), Obesity (15%), Hypertension (12%)

Specialty Services



Other: Pulmonology (7), Physical Therapy (3), and ENT (1).

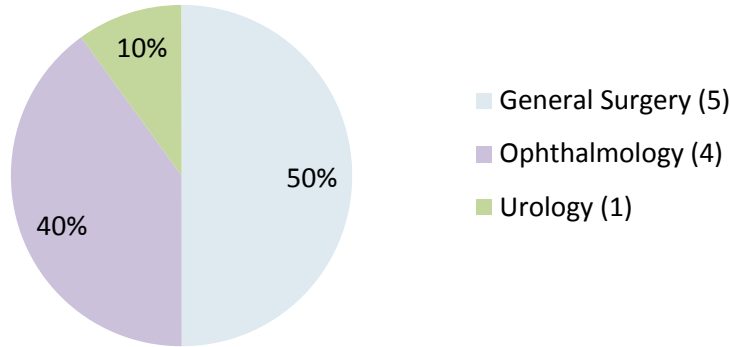
In addition to the above specialties, SPIRIT has an Orthopedist that completed 18 medical record reviews. This is helpful as these reviews help identify members that may require a surgery.



Almost all of the SPIRIT outpatient specialty services were provided onsite at the Primary Care Center. This was convenient for patients and providers preferred to deliver the services onsite versus at their private offices.

Surgeries

**Specialty Surgeries
Fiscal Year 2016/17
Total Surgeries = 10**



Patient Experience

The patient experience continues to be very positive. Medical and support staff have received many expressions of gratitude: verbal, written, and referrals of family members and friends. They are pleased to have a primary care medical home and relieved to obtain much needed health care. Providing a welcoming, respectful, culturally competent, and inclusive environment is particularly important to this population.

Some elements from the patient survey are noted in the following table. While the majority of responses are rated highly, staff will work on appointment accessibility.

Patient Experience Survey February 2017	
Survey Question	Percent of Enrollees who responded “very good/good”
Able to make an appointment when sick or hurt.	63%
Health center hours work for me.	91%
Length of wait time at the clinic.	75%
Front desk is friendly and helpful.	95%
Provider listens to you.	97%
Nurses and Medical Assistants’ listens to you.	96%
Provider spends enough time with you.	93%
Provider gives you information you can understand.	94%
Provider considers your personal or family beliefs.	97%
Provider gives you good advice and treatment.	96%
Survey Question	Percent of patients who responded “yes” to this question.
Would you send your family and friends to us?	99%
Do you feel that we help you to make healthy lifestyle choices?	96%

Survey Question to Enrollees: <i>What one thing could we do to make your visit with us better?</i>
<ul style="list-style-type: none"> • “No, for me it is very good.” • “I think everything is fine. Stay the same, thanks.” • “Nothing, it’s very good.” • “Nothing, I am very happy with you.” • “None. I am happy with the care received at this primary care clinic.” • “Nothing, everything that the doctors and employees do are excellent.” • “No, everything is good. Thanks.” • “I’m satisfied with you all is well, thanks for all your help.” • “No, everything is perfect.” • “Nothing. I have always been well cared for here!”

Physician Experience

Many of the contracted and volunteer physicians who work with Healthy Partners patients report appreciation for the opportunity to provide care for this population. A few comments from SPIRIT Physicians:

“I’ve been enriched by volunteering with SPIRIT, providing care... Because it feeds my spirit and fuels my passion as a volunteer.” - Ruth Haskins, MD, Gynecologist, President, California Medical Association, SPIRIT Volunteer

“...I am reminded every time that it is a privilege to practice medicine and to give back to those that can’t otherwise afford medical care.” - Mary Ann Johnson, MD, Dermatologist, Dignity Health, SPIRIT Volunteer

Almost all of SPIRIT’s outpatient specialty services were delivered on site. Providers appreciated the staff support, environment, and information (records, diagnostics, etc.) prepared for each specialist appointment. Patients have had an excellent show rate for collaborative care clinics (96% show rate).

One of the primary care providers at the County Health Center submitted her thoughts:

“In the past year, I have been privileged to provide basic health care to scores of appreciative individuals, most of whom have had no care in years. The population in general is a delight to serve. People come because they have multitudes of health concerns, including diabetes mellitus, hypertension and women’s health problems, some of which are life threatening. The majority of adults I serve are overweight or obese and when they learn of the connection between their weight and their health problems, they take steps to change self-damaging behaviors. Women who have never exercised beyond taking care of households and family members report that they are now in community exercise programs or starting daily walking regimens. Many people see their diabetes controlled by simply reducing the number of tortillas they eat per day from twelve to two, or by substituting water for soda. We are fortunate to have female counselors, some Spanish speaking. They provide welcome support and direction to many people who are overwhelmed by the stresses of living in difficult situations. Women tell me how talking with a counselor relieves them and helps them find the strength to move on. What I enjoy most is working with people who want and do make healthy changes in their lives.”

- Cirre Emblen, FNP, County Health Center

Expenditures

Healthy Partners impacts three budget units, Clinic Services, Pharmacy, and the Medical Treatment Account.

Clinic Services and Pharmacy redesigned their programs to absorb the Healthy Partners patients within their existing budgets. When the program was in planning, the former County Executive asked staff to absorb services to these patients. *This was possible due to the Affordable Care Act which expanded Medi-Cal and other healthcare options available to the adult medically indigent population.* Clinic Services provides services to enrollees with Healthy Partners limited benefit program, Medi-Cal Fee for Service, Medi-Cal Managed Care, and uninsured and provides comprehensive assessments for newly arriving Refugee populations under an agreement with the State Office of Refugee Health, and General Assistance Employment Exams for the Department of Human Assistance. Staff assist the uninsured to obtain healthcare coverage, mostly Medi-Cal.

The Medical Treatment Account contains revenues that were dedicated to the Healthy Partners program for specialty services. The revenues include a total of \$2.5 million (\$1.0 million Health Realignment and \$1.5 million General Fund). There are two contract providers – Quest (laboratory services) and EHS (advanced diagnostic imaging and specialty services). Note: There are also limited specialty costs in Clinic Services including the UCD specialty (three part-time specialists), SPIRIT contract (partner fee), and overtime for the Collaborative Care Clinic (Saturdays held quarterly). The County does not cover high-cost services such as emergency services, inpatient care, or high cost pharmaceuticals. “Restricted scope” Medi-Cal (required as part of the eligibility process) covers some emergency services. Trying to determine which specialties to provide has been challenging for the County, SPIRIT, and EHS. Some providers will not contract for a limited benefit. They want to ensure hospitalization is covered.

There was approximately \$2 million in savings for Fiscal Year 2016/17. Savings are due to gradual phase-in of the EHS contract specialty services. Although a contract amendment was completed with EHS in May, services started in June and claims were not submitted prior to the closure of the fiscal year. Donated services phase in was the largest area of focus for FY 2016/17. Staff and EHS began work on their phase in once patient needs and SPIRIT specialty availability was known. Efforts in this area were more challenging than anticipated due to the specialists’ lack of comfort in diagnosing and treating patients within a limited benefit.

Staff will analyze data and needs and provide recommendations as part of a board report in January 2018.

Healthy Partners Advisory Group

DHHS Primary Health Services convenes the Healthy Partners Advisory Group. This is an active and invested stakeholder group comprised of dedicated partners, advocates, and county staff. All work collaboratively and continue to shape the program. Members are listed in the following table:

Seat	No.	Member Representation
Advocates	4	Building Healthy Communities, Sacramento Covered, Sacramento ACT, Legal Services of Northern California
Community FQHC	1	Cares Community Health
EHS	1	EHS
Hospital Systems	2	Dignity Health, Kaiser (<i>represent all four hospital systems</i>)
Physicians	2	Sacramento Latino Medical Association UC Davis Department of Internal Medicine
SPIRIT	1	Sierra Sacramento Valley Medical Society
DHHS	3	Convener
Total	14	

Sierra Sacramento Valley Medical Society administers the SPIRIT program. All four hospital systems (Dignity Health, Kaiser, Sutter Health, and UC Davis) and County DHHS are SPIRIT partners. Each partner agency contributes to the Sierra Sacramento Valley Medical Society SPIRIT program and its management. Dignity Health and Kaiser represent all four hospital systems in the Healthy Partners Advisory Group.

Healthy Partners Advisory Group Members and advocates testified and submitted correspondence for the FY 2017/18 Proposed Budget hearing in June 2017 reiterating their request to expand enrollment and change the upper age limit. Supervisor Serna requested the Department return to the Board in January 2018 with recommendations. Specifically he wanted a report back on how best to appropriate the specialty funds not utilized in the Medical Treatment Account (e.g., increase enrollment, change the age criteria, or enhance specialty services). Returning mid-year permits the program to have additional time to review expenditures and needs.

Accomplishments

- The County Member Services Team, Sacramento Covered, and La Familia effectively engage potential members and promote a positive member experience.
- Full enrollment was rapidly reached without advertisement.
- Services offered are well received – primary care, behavioral health, preventative, educational, laboratory tests, radiology, pharmacy, and specialty.
- A County Health Center manager filled long standing behavioral health clinician vacancies. Two of the employees are bilingual (Spanish). Enrollees can access individual counseling services in addition to psychiatric services within their medical home.
- The range of diagnostic services is necessary and vital.
- Specialty services have been lifesaving for several patients. *Specialists have intervened for necessary ongoing services, surgeries, etc. The patient and provider experience at these clinics continues to be positive.*

- Physical therapy services began late in the fiscal year. This was a missing necessary component as many enrollees have work related injuries.
- The show rate for primary care and specialty services is high (95% plus). Behavioral Health counseling has a show rate of approximately 75%. Typically health centers have a show rate of about 70% - 75% for health services with a lower rate anticipated for behavioral health services.
- Member satisfaction is evident (most referred by family and friends, patient experience survey).
- Successfully completed 1.5 years of operations.

Challenges

- Rolling out a limited benefit program has been challenging. It has been a steep learning curve for the County and key partners.
- There is more churn (rate of turnover) than anticipated. This is largely due to enrollees obtaining health care coverage or moving out of county.
- Care management can be hard on provider teams since some specialists or surgeries have extensive waits (over 400 days).
- There is considerable ongoing administrative work to manage current enrollment (eligibility and renewal process), wait list process, care management (referrals, appointments, and tracking), advisory group, and reporting.

Coming Attractions for Fiscal Year 2017/18

Program planning continues to evolve based on enrollee needs, data, and input from the Healthy Partners Advisory Group.

- Continued roll out of specialty services and surgeries from EHS. This is EHS' first experience in working with surgery centers. They now have agreements with three surgery centers. EHS will provide providing the following surgeries - general surgery, ophthalmology, and gynecological.
- Kaiser, through the SPIRIT program, will begin to provide eye exams and glasses early in the fiscal year. Previously, staff referred enrollees needing eye exams to California Vision Service.
- A patient experience survey was issued in early FY 2017/18 and is pending data analysis.
- The County Health Center is transitioning to a new Electronic Health Record, OCHIN, which will make care management and reporting easier.
- Trained County Health Center clinician (bilingual Spanish) will facilitate the diabetes education workshops onsite.
- Staff will return to the Board of Supervisors at midyear to make program recommendations. This will be based on review of specialty services and projected Medical Treatment Account expenditures in order to address the Healthy Partners Advisory Group recommendations.

Data Sources and Limitations

The data used to generate the report comes from: multiple databases (McKesson Electronic Medical Record, AS 400, and RX3000), Patient Experience data and questionnaires, and contractor documents (SPIRIT, EHS documents).

The report provides a snapshot in time of available enrollee characteristics, service needs and utilization. Unfortunately no data is available on the following: low cost retail prescriptions, other service utilization outside of the Healthy Partner's network such as emergency room visits or hospitalization.

Acknowledgments

This is a unique program with county, contracted, and donated services. Each partner and advocate contributes to make the program meaningful with attention to service quality for uninsured Sacramento County residents. All bring a passion for the population served.

- *Service Delivery Partners (Local Hospital Systems, EHS Medical Group, La Familia, Sacramento Covered, and the Sierra Sacramento Valley Medical Society)*
- *Healthy Partners Advisory Group Members*
- *County Health Center and Pharmacy employees*

County Board of Supervisors

The County Board of Supervisors authorized this program after a policy workshop they requested. Board Member Chiefs of Staff are provided data and briefed quarterly. The Board's support and interest has been greatly appreciated by staff, partners, and advocates.

District 1	Phil Serna
District 2	Patrick Kennedy
District 3	Susan Peters, Vice Chair
District 4	Sue Frost
District 5	Don Nottoli, Chair