A Methodology for Identifying Difficult to Locate Uninsured Children Eligible for Medicaid in a Large Metropolitan County

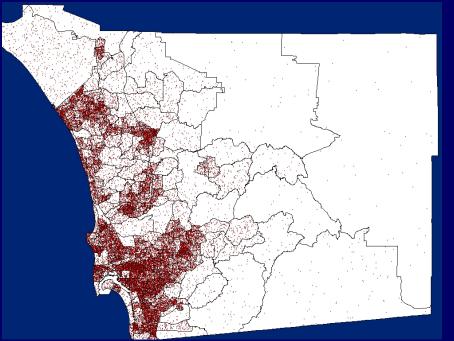
> **County of San Diego** Health and Human Services Agency Emergency Medical Services

American Public Health Association Annual Meeting November 5, 2007

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# San Diego County Background





- San Diego is the fifth largest county geographically and has a higher population than 21 states.
- There are 770,000 children under the age of 18 residing in San Diego County, with a total population of 3 million.
- Various estimates put the number of uninsured children between 54,000 and 91,000.
- Previous attempts to enroll children in Medicaid targeted outreach efforts at the entire County.
- A need was recognized for community-level efforts in order to improve outreach, enrollment, retention and utilization.



### To locate children ages 0-17 years in San Diego County who are eligible for Medicaid or Healthy Families but not enrolled.

## **Data Sources**

- Medicaid Enrollment
  - Medi-Cal Case Data System
  - December 2006 enrollment (approx 134,000 children enrolled)
- Census Data
  - U.S. Census, San Diego Association of Governments (SANDAG)
  - 2006 estimates calculated by SANDAG
- Emergency Department Discharge Data
  - Hospital Association of San Diego & Imperial Counties (HASD&IC), Community Health Improvement Partners (CHIP), & Emergency Medical Services (EMS)
  - FY 2005/06 ED discharges
- California Health Interview Survey (CHIS)
  - 2005 survey results

# Challenges

- Find data on eligible kids
  - Multiple programs with different requirements
  - The only reliable data available to compare to program requirements are age and income
    - 0-17 Years
    - < 200% FPL
- Present data available on different geographic scales in a meaningful way
  - Census Tract, Zip Code, Subregional Area, etc..
  - Geographic Information System (GIS)
- Rank greatest need
  - Medicaid Unenrollment Rate
  - Number of income eligible yet unenrolled kids

# **Income Eligibility**

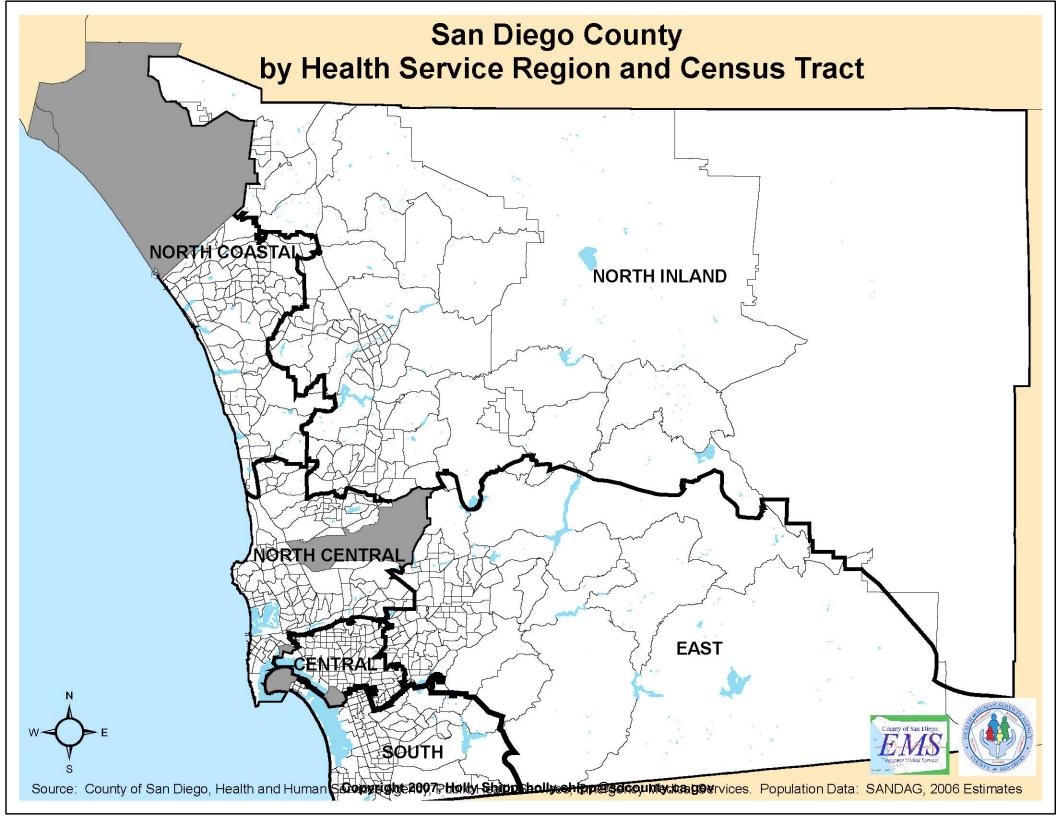
- Number of kids living in households with incomes under 200% of the Federal Poverty Level (FPL)
- Calculated using:
  - FPL (2006 estimates) by household size
    - Family of 3: \$32,000
    - Family of 4: \$41,000
  - Number of persons per household (PPH)
  - Number of households with children <200% FPL</li>
- Number of income eligible kids estimated as a range
  - Due to uncertainty regarding number of children in the household

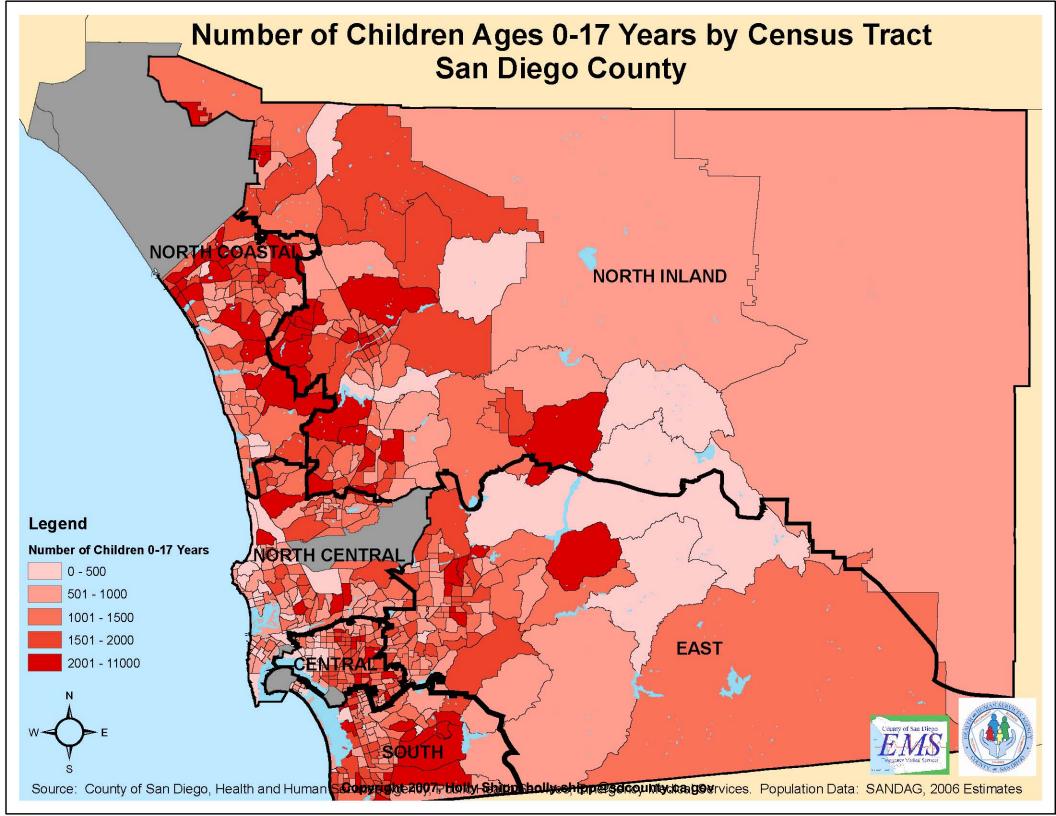
# Medicaid Unenrollment Rate

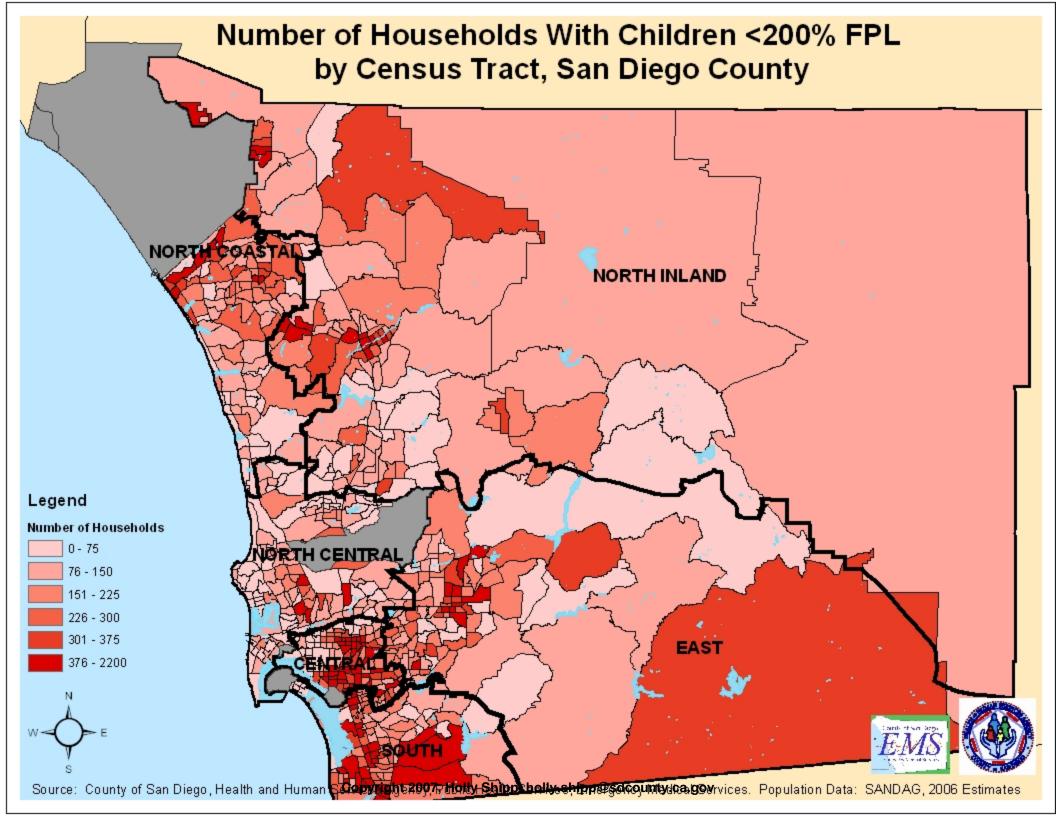
- The proportion of income eligible children who were already enrolled in Medicaid during December 2006.
- Calculated using:

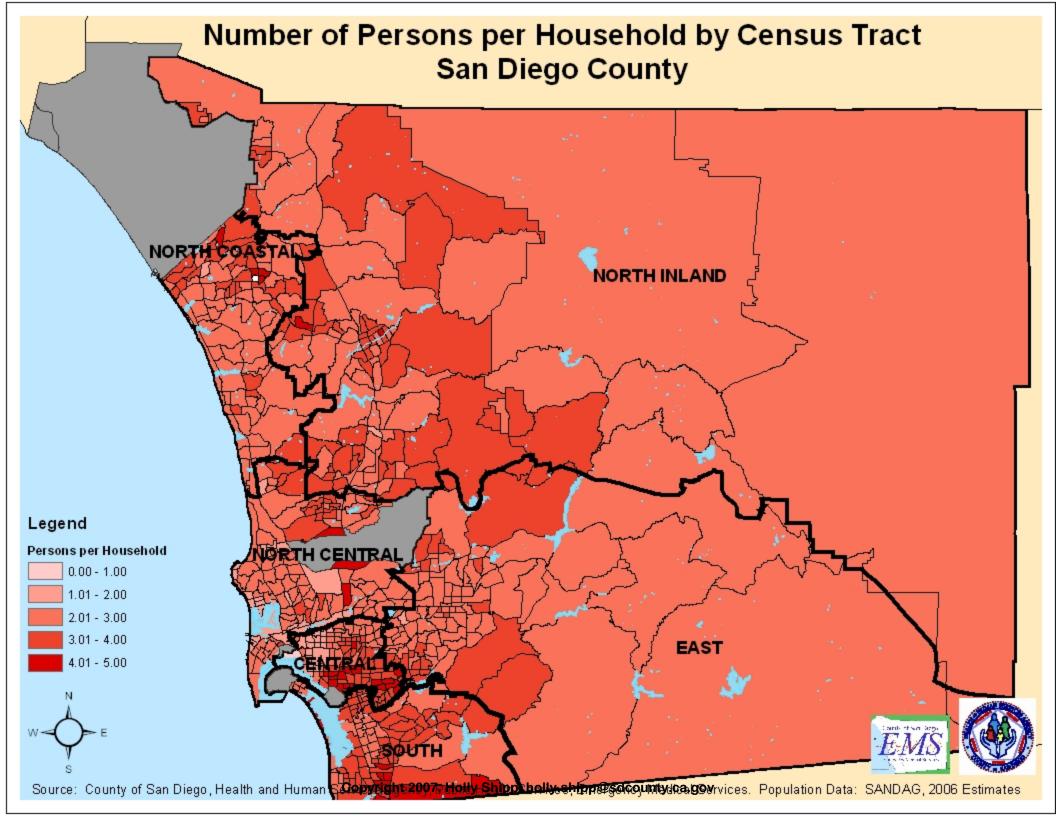
income eligible population - enrolled population income eligible population

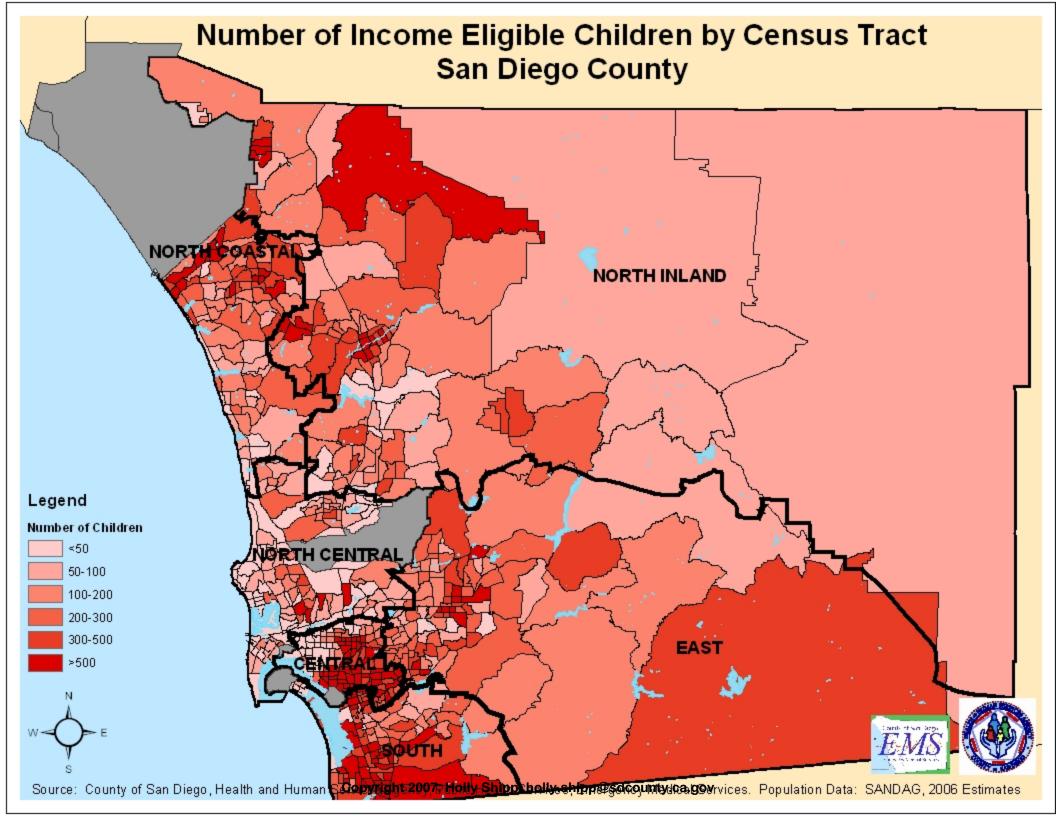
- Caveats
  - Likely to be an overestimate of the true rate of unenrollment
  - Should only be used as a tool for comparison
    - Unable to adjust for Medicaid requirements other than income
      - Home ownership
      - Private/other sources of insurance
    - Does not indicate the number of children not enrolled in Medicaid

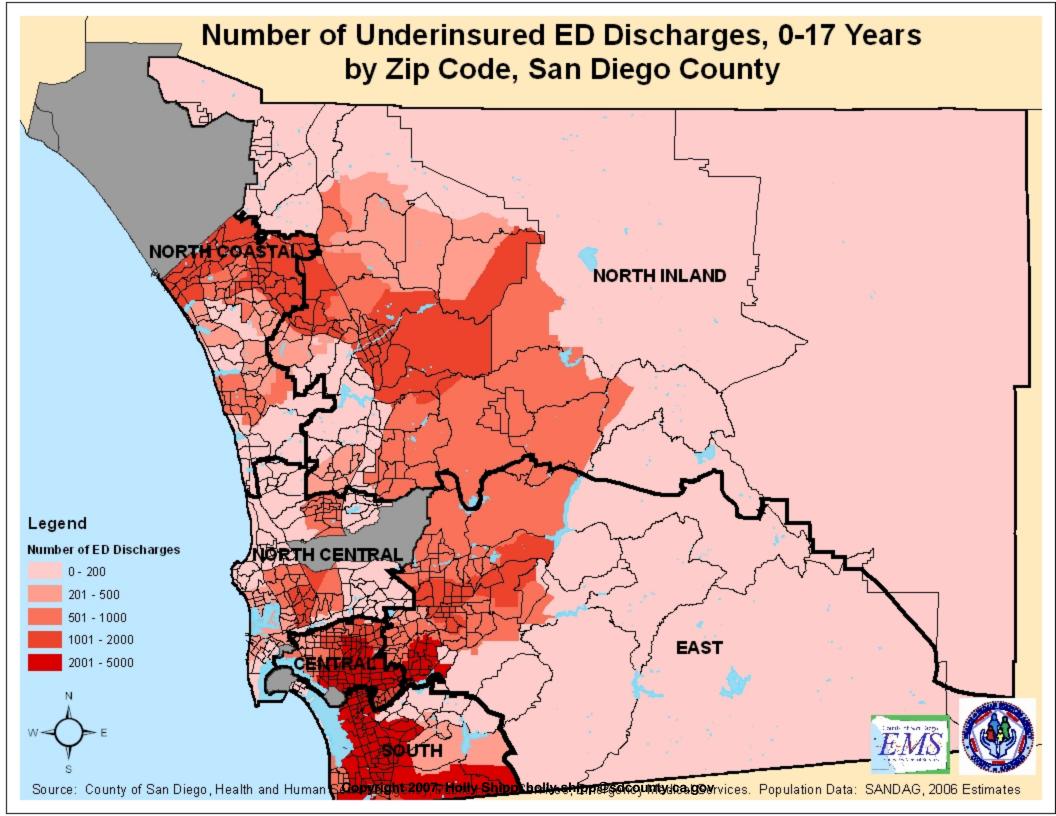


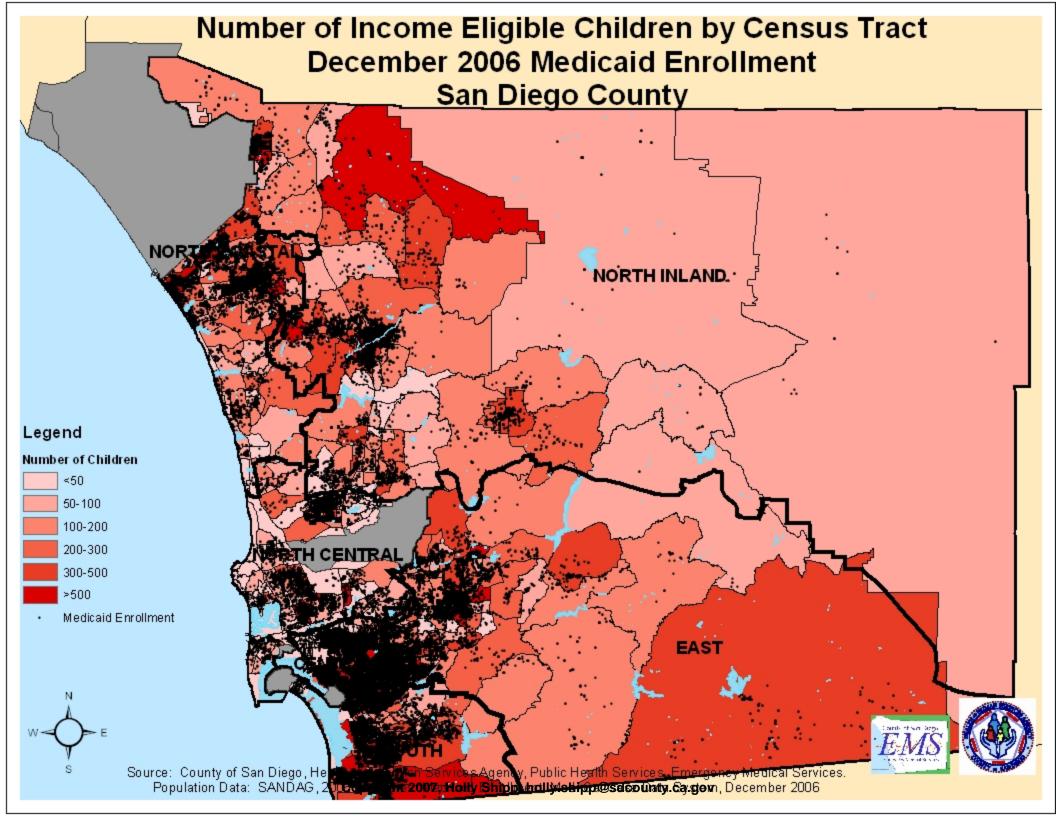


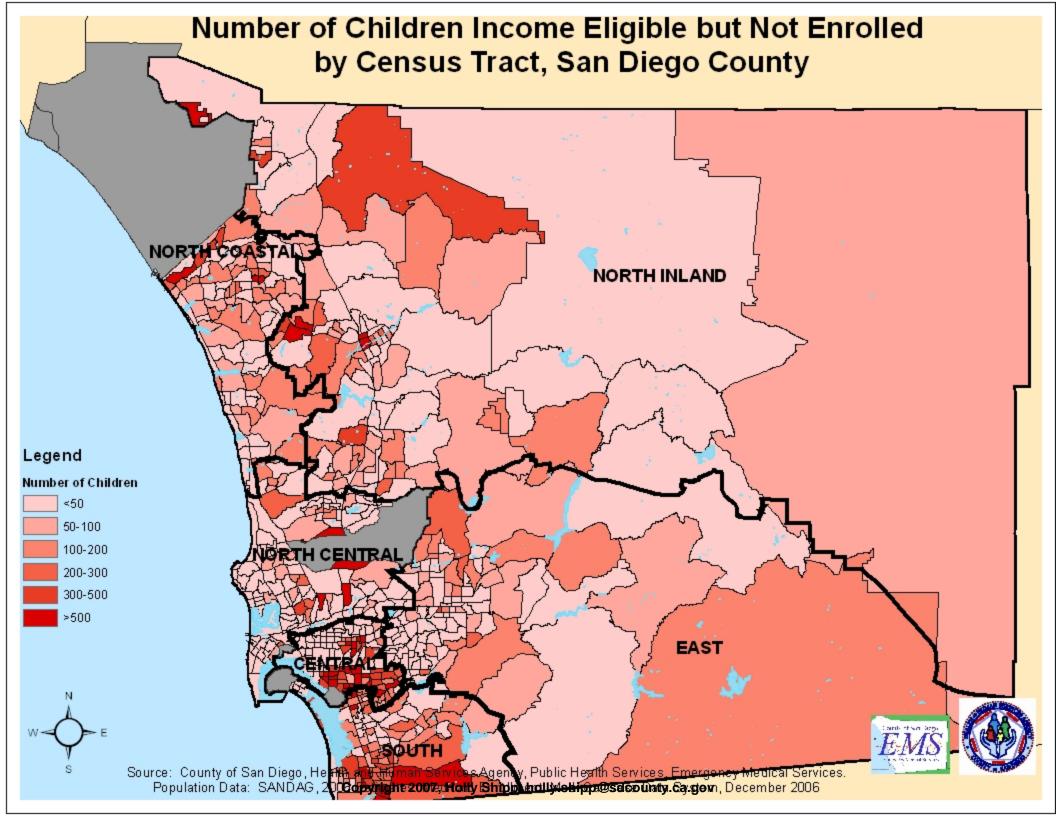


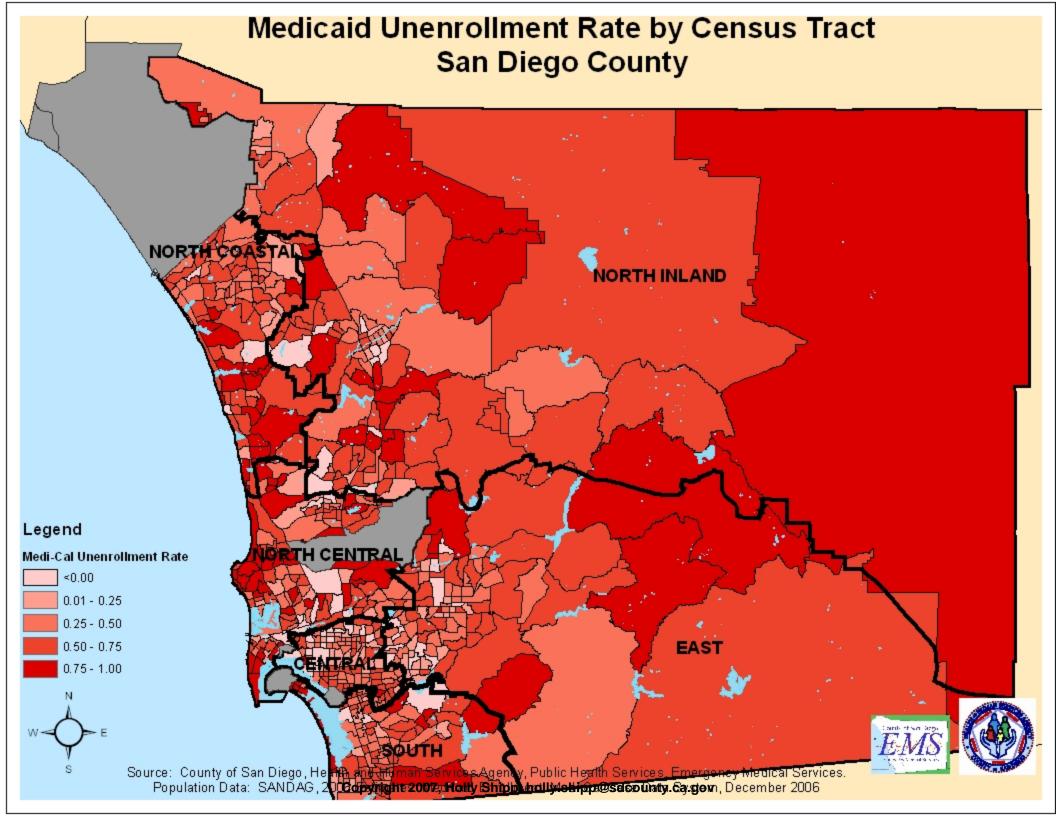












### Access to Care for Children Team (ACT) Regional Forums - Objectives

- 1. Present gap analysis findings specific to each of the County's six regions
  - Share the results of the regionally focused data
  - Solicit input from community participants
- 2. Participants engage in active dialogue about regional barriers and potential solutions including:
  - Outreach
  - Enrollment
  - Retention
  - Utilization
- 3. Develop community-level actions to improve access
- 4. Create a comprehensive set of recommendations

# Regional Forums Participants

### • Children's Healthcare Providers

- Community Health Centers/Clinics
- Health Plans
- Hospitals
- Stakeholders
  - Elected Officials' Representatives
  - Health and Humans Services Agency (HHS)
- Community Based Organizations
  - First 5 Healthcare Access
  - OERU contractors
- A "team approach" was encouraged
  - To reflect the diverse roles staff members play & their respective areas of expertise
  - Exec Director, Certified Application Assistor, Community Health Worker, etc..

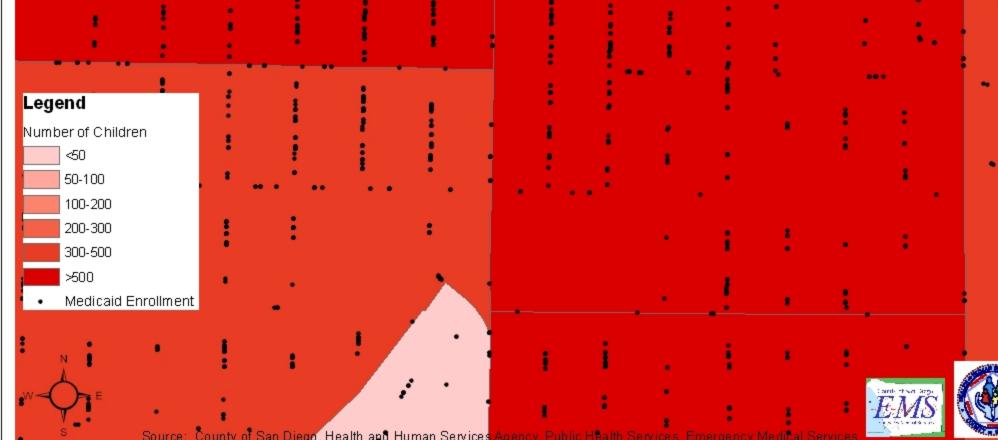


# Regional Forums Gap Analysis Presentation

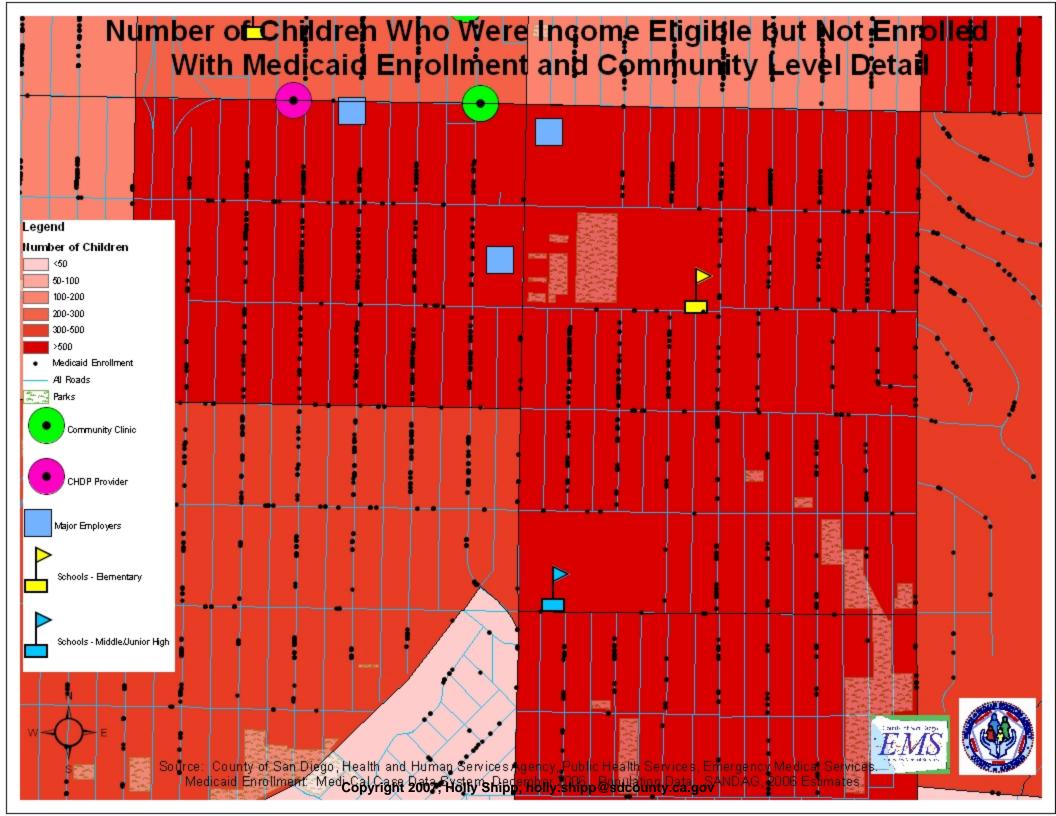
- Methodology of gap analysis
- Identification of approximately three target communities per region
  - Medicaid Unenrollment Rate
  - Number of kids who were income eligible but not enrolled
- Within each target community, we identified:
  - Community resources and assets
  - Demographic characteristics
  - Known challenges
  - Cultural differences

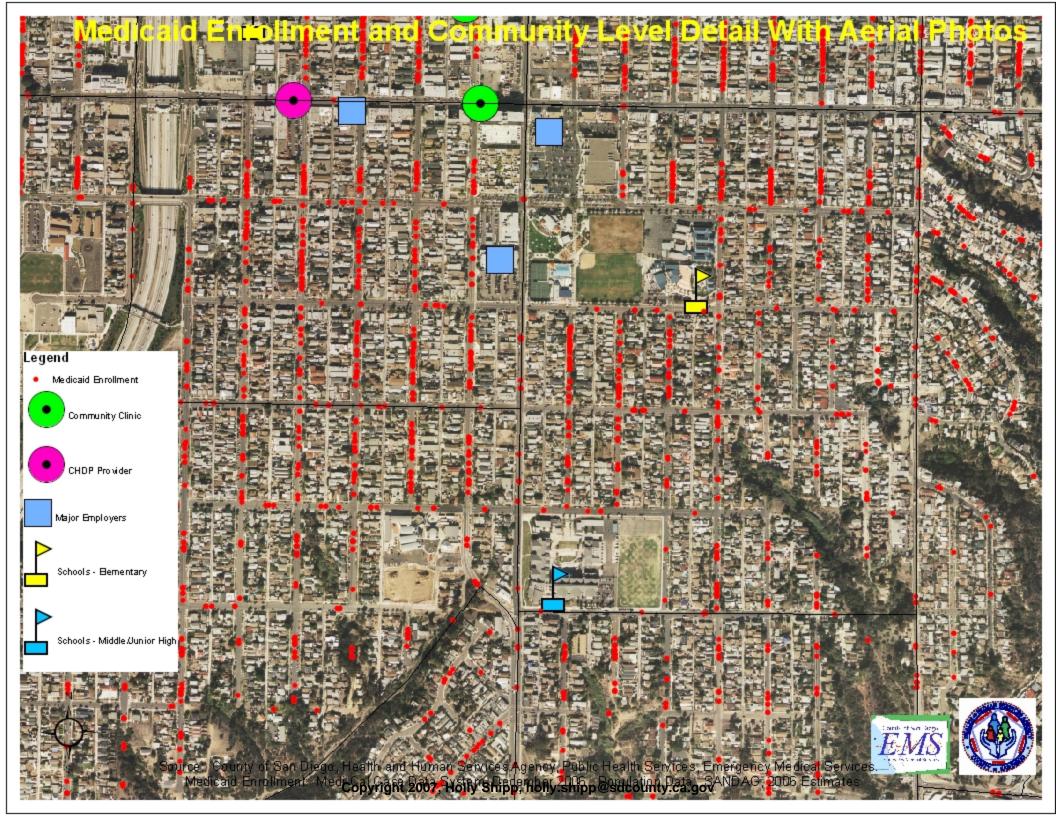


Number of Children Who Were Income Eligible but Not Enrolled by Census Tract With December 2006 Medicaid Enrollment Target Community, San Diego County



Source: County of San Diego, Health and Human Services Agency, Public Health Services, Emergency Medical Services Medicaid Enrollment: Medi-Copyright 2007, story sholly Shipp, holly Shipp @sdcounty.ca.govDAG, 2006 Estimates





Demographic Profile (2006 Estimates)		
Total Population, All Ages	6	.384
Median Age (Years)	30.8	
Total Population, 0-17 Years	1.701	
0 to 4 years	590	34.7%
5 to 9 years	301	17.7%
10 to 14 years	464	27.3%
15 to 17 years	346	20.3%
Race/Ethnicity, 0-17 Years		
White	162	9.5%
Black	22	1.3%
Hispanic	1.278	75.1%
Asian	137	8.1%
Other	102	6.0%

#### Occupation and Industry (2000 Census)

Total All Workers	2	.342
Occupation		
Momnt Professional & Related	440	188%
Service	461	19.7%
Sales and Office	743	317%
Farming, Fishing, & Forestry	0	0.0%
Custreta, Extraction, & Maintenance	287	12.3%
Product'n Transn'n & Mtrl Mving	411	17.5%
Industry		
Agriculture Forestry Mining	0	0.0%
Utilities	11	0.5%
Construction	121	5.2%
Manufacturing	329	14.0%
Wholesale trade	50	2.1%
Retail trade	408	174%
Transportation & Warehousing	71	3.0%
Information & Communications	60	2.6%
Finance Insurance & Real Estate	158	67%
Profl. Scientific, Mgmnt, Admin	205	8.8%
Educational, Social & Health Srvcs	407	17.4%
Arts, Entertainment, Recreation,	• • • •	0.001
Accommodations Food Services	208	8.9%
Other Services	106	4 5%
Public Administration	208	89%

#### Household (HH) Income (2006 Estimates)

Household Income Categories		
< \$15.000	167	9.7%
\$15,000 - \$30,000	370	21.5%
\$30.000 - \$45.000	360	20.9%
\$45,000 - \$60,000	283	16.4%
\$60.000 - \$75.000	197	11.4%
\$75.000 - \$100.000	189	11.0%
\$100.000 - \$125.000	86	5.0%
\$125.000 - \$150.000	39	2.3%
>\$150.000	33	1.9%
Total Households	1	724
Median Household Income	\$39.214	
Persons Per Household		3.66

Primary Language Spoken at Home (2000 Census)		
Total Population 5+ Years	5.0	685
English	1 768	31.1%
Spanish	3.072	54.0%
Asian/Pacific Islander	756	13.3%
Other Language	89	1.6%

#### Completed Education (2000 Census)

Total Population 25+ Years	3.0	510
< High School Graduate	1.372	38.0%
High School Graduate	877	24.3%
Some College or AA	1.033	28.6%
Bachelor Degree	252	7.0%
Graduate Degree	76	2.1%

#### Vehicle Availability (2000 Census)

2.2%

School Enrollment Estimate (2000 Census)		
Total Public School Enrollment	1.4	443
Pre-School	61	4.2%
Grades K - 8	938	65.0%
Grades 9 - 12	444	30.8%
Total Private School Enrollment 85		
Pre-School	30	35.3%
Grades K - 8	42	49.4%
Grades 9 - 12	13	15 3%

#### Household Poverty Estimates

Total Households (2006 Est)	1.724	
<100% of FPL	290	
<150% of FPL	537	
<200% of FPL	778	
Household Population (2000 Census)		
Percent Below Poverty	18.8%	

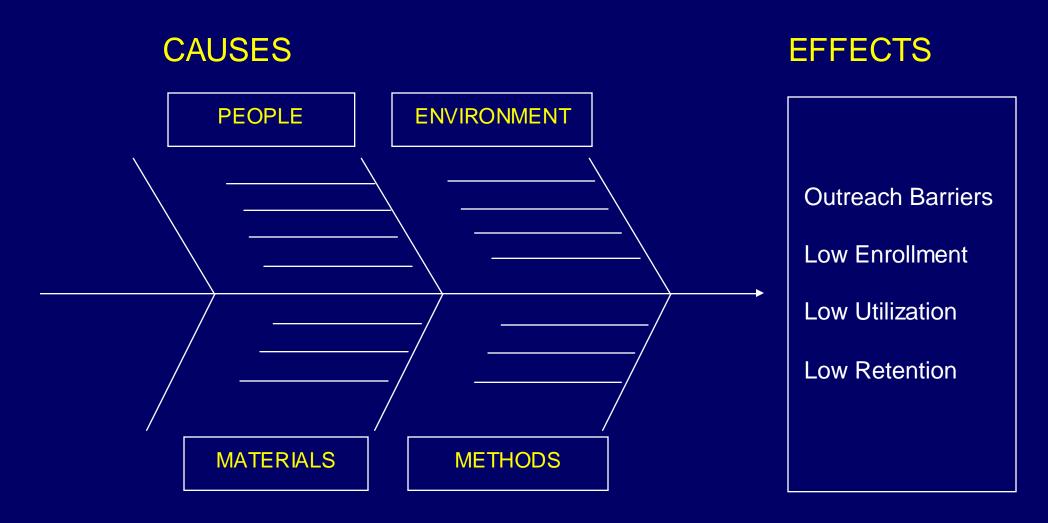
Households With Children <18 Poverty Estimates		
Total Households (2006 Est)	929	
<100% of FPL	156	
<150% of FPL	289	
<200% of FPL	419	
Families With Children <18 (2000 Census)		
Percent Below Poverty	21.4%	

Medi-Cal Eligibility and Enrollment		
Number of Children Enrolled During Month		
November 2004	269	
December 2006	350	
Percent Change in Enrollment	30.1%	
Number of Income Eligible but Unenrolled Children		
2006-Estimates (~ 200% FPL). Copyright 2007, Hony Ship Medi-Cal Unenrollment Rate	<del>p, holl≩</del> 500	
2006 Estimates (<200% FPL)	0.50 to 0.75	

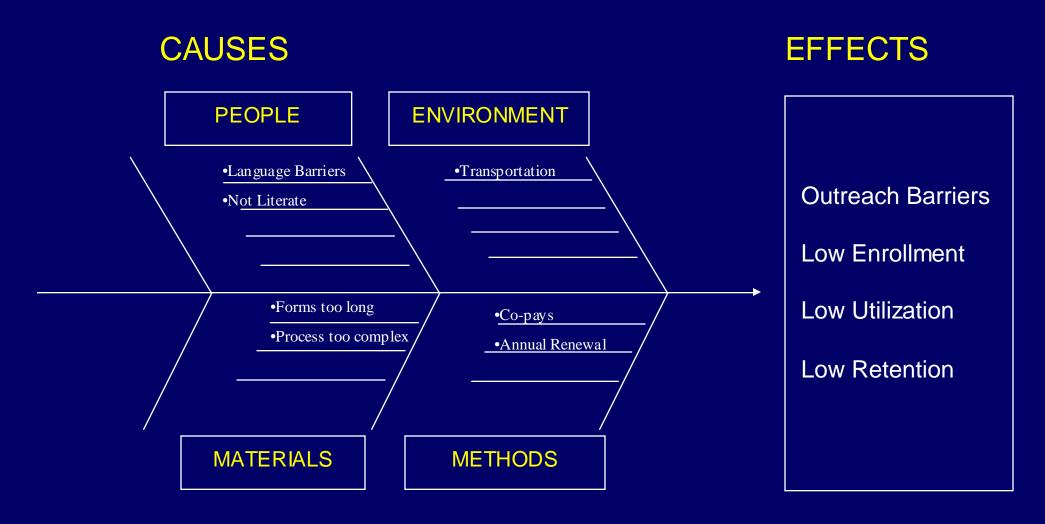




### **Root-Cause Determination**



### **Root-Cause Determination**



## Impact/Effort Decision Grid

Impact or Benefit

Easy/High	Difficult/High
Easy/Low	Difficult/Low

### **Difficulty to Accomplish**

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## Impact/Effort Decision Grid

### Impact or Benefit

Easy/High Open enrollment clinics at easy to access locations in the community (laundry mats, grocery stores, employers w/out insurance)	Difficult/High
Easy/Low	Difficult/Low

### **Difficulty to Accomplish**

# **Results of ACT Gap Analysis**

- The use of data and GIS technology gave participants new insight into the enrollment characteristics of each community.
- Forums provided a unique opportunity for experts to come together and use existing resources to develop solutions.
- While common barriers and solutions were present, community-level data revealed specific results by target area, including issues surrounding language, communication, education, culture, transportation, crime and clinic hours.

### **Recommendations from Forums**

- Develop outreach presentations for small businesses, church groups, and apartment associations to focus on increasing the awareness of program benefits.
- Distribute simple, easy-to-read and understand information brochures to churches, schools, small businesses and other non-traditional locations describing coverage benefits.
- Include Saturday enrollment at locations such as grocery stores, schools and churches in the target community.

## **Next Steps**

- Information from each regional forum is being combined into a comprehensive report
- Report will be presented to the County Board of Supervisors as well as to the general public
- Location specific data will be directed back to local organizations to target efforts to increase enrollment and retention
- Local enrollment data will be monitored for evaluation purposes

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