

PRESENTATION AGENDA

CCLHO 10/15/15 Presentation

Title: Affordable Care Act's Impact on Public Health Services

Background: San Diego County is one of the largest in the US, covering approximately 4,200 square miles. There are currently 3.2 million residents living in the County. With the implementation of the Patient Protection and Affordable Care Act (ACA) in 2014, the number of beneficiaries enrolled in Medi-Cal has increased significantly. The ACA's Impact on Public Health Services project aims to understand the number of clients and services provided by the PHCs. The project also evaluated if there is adequate access in the community to immunization, Sexually Transmitted Disease (STD), and Tuberculosis (TB) services provided at Federally Qualified Health Centers (FQHC). Lastly, the project assessed the feasibility of establishing medical homes in FQHCs for clients seeking services at PHCs to improve their access to necessary primary care services. Due to time constraints and the amount of available data, the initial assessment focused on immunization services.

Methods: The assessment consisted of three parts. (1) PHC data was compiled and analyzed to assess utilization of immunization, STD, and TB services. (2) Approximately 2,000 patient questionnaires were administered at PHCs to gain insight about patient preferences and why they are accessing services at the PHCs. (3) Key informant interviews with FQHCs were conducted to learn about their capacity to provide immunization, STD, and TB services to their patients.

Results: (1) The immunization administered from 2012 to 2014 has been trending downward. The number of immunizations administered went from 91,910 down to 79,513. The PHCs administered 80% of their immunizations to children 0 to 18 years of age. The remaining 20% were given to clients older than 18 years old. (2) Patients indicated that their primary reason for going to PHCs was that it was less expensive. Other reasons were that the location was convenient and they could receive services without scheduling an appointment. (3) According to the interviews, the FQHCs are not referring patients to PHCs except for cases of active TB and infectious syphilis. Clinics were willing to work with the County during disasters and during times of surge capacity. FQHCs were interested in becoming more adept in the latest treatment protocols for TB and syphilis.

Recommendations: The main focus of this project was to ensure that the provision of immunization services was in a medical home with the PHCs being the safety net for residents to be immunized. The recommendations included working more closely with FQHC to ensure clients are receiving immunizations in their medical home, ensuring PHC resources were deployed in services not provided by other community partners, and training and updating medical professionals about immunization best practices. The future direction of TB and STD services will be the next phase of assessment and analysis.