

Sonoma County

Demographics

Sonoma County has a population of 458,614:¹

- 17% are uninsured²
- 7% are covered through Medi-Cal³
- 1% through Healthy Families⁴

*Ethnic breakdown:*⁵

Sonoma's population consists of:

- Non-Hispanic White (82%)
- Hispanic (17%)
- Asian (3%)

*Income breakdown:*⁶

24% of Sonoma's residents live below 200% of the federal poverty level,

- 9% below 100%
- 15% between 100-200% FPL.

*Community Clinics*⁷

Community clinic information was reviewed for 1999.

¹ US Census Bureau, Census 2000, www.census.gov

² E. Richard Brown, Ninez Ponce, Thomas Rice. The State of Health Insurance in California: Recent Trends, Future Prospects. Los Angeles: Regents of The University of California, 2001.

E. Richard Brown, Ying-Ying Meng, Carolyn A Mendez. Hongjian. Uninsured Californians in Assembly and Senate Districts, 2000. Los Angeles: Regents of the University of California, 2001.

The data concerning the uninsured in the Northern California study counties changed significantly from year to year in 1997-2000. Due to the small county populations and the small sample size for the CPS data set, the numbers of uninsured in the study counties is far less reliable than in large Southern California counties.

³ Medi-Cal Policy Institute, California County Data, (Jan. 2000), www.medi-cal.org

⁴ Managed Risk Medi-Cal Insurance Board, Healthy Families Program Subscribers Enrolled by County, June 2000-June 2001, (June 2001), www.mrmib.ca.gov

⁵ US Census Bureau, Census 2000, www.census.gov

⁶ California Rural Health Policy Council, 1996 Estimated Populations, www.ruralhealth.oshpd.state.ca.us

⁷ Office of Statewide Health Planning and Development, Annual Utilization Report of Primary Care Clinics, 1999, www.oshpd.state.ca.gov

Patient demographics

Sonoma County community clinics served 53,451 unduplicated total patients in 1999.

Uninsured

The uninsured accounted for 57% of clinic patients. Uninsured clinic patients increased by 25% between 1996 and 1999.

- CMSP covered approximately 3% of the uninsured
- EAPC reimbursed approximately 11%
- CHDP and other state programs paid for 12% and 31% respectively
- 31% of uninsured clinic patients were self-pay
- non-pay patients constituted less than 12%

Medi-Cal

20% of clinic patients were covered by Medi-Cal. The number of Medi-Cal patients declined by 40% between 1996 and 1999.

Private Insurance and Medicare

18% had private insurance and Medicare covered 4%. The number of privately insured patients increased between 1996 and 1999, by 215% while Medicare patients decreased by 12%.

Utilization

In 1999, community clinics provided 181,4009 patient visits

- Medi-Cal paid for 28% of clinic visits. Medi-Cal patients averaged 4.7 annual visits per patient. Medi-Cal patients' utilization decreased by 28% since 1996.
- Uninsured patients accounted for 45% of visits. The average annual visits per uninsured patient was 2.7. Uninsured patients' utilization of Sonoma County clinics increased by 20% between 1996 and 1999. Clinics provide approximately 1 visit per uninsured Sonoma County resident.

1. CMSP paid for 8% uninsured clinic visits. CMSP patients averaged 6.3 visits.

2. EAPC paid for 13% of uninsured clinic visits. EAPC patients averaged 3.1 visits
 3. Self-pay accounted for 13% of uninsured patient visits. Self-pay patients averaged 1.8 visits.
 4. CHDP and "other state programs" paid for 10% and 28%, respectively, of uninsured visits. CHPD and other state patients averaged 2.2 and 2.4 visits.
 5. Non-paying patients accounted for 12% of uninsured visits. Non-paying patients averaged 3 visits.
- Privately insured patients accounted for 19% of clinic visits and averaged 3.4 visits and Medicare patients accounted for 37%, averaging 6.1 visits per patient. Utilization for both groups increased (262% and 22% respectively) between 1996 and 1999.

Clinic Revenues

1999 clinic revenues and expenses were \$19,245,517. The largest revenue source for Sonoma community clinics was patient fees (51%). Most were reimbursements for Medi-Cal (40%) and uninsured patients (38%).

- CMSP payments accounted for 12% of uninsured revenue.
- EAPC payments accounted for 13%.
- CHDP and other state programs contributed 10% and 35%, respectively.
- 30% of uninsured revenues came from self-pay patients.

28% of revenues were federal grants and contracts, a 10% decrease between 1996 and 1999. 4% of revenues came from state grants and contracts, demonstrating a 175% increase over the same time period. County and local contracts and grants comprised 1% of revenues and private donations totaled 9% of clinic revenues. County and local funds increased by 10% since 1996, whereas private funds decreased by 33%.

*Community Hospitals*⁸

Hospital data for Sonoma County was reviewed for 1997. In that year, Sonoma County hospitals provided 52,797 inpatient days, 95,701 outpatient and 61,345 emergency visits, at a cost of approximately \$121,000,000.

Inpatient

- Medicare patients accounted for 48% of inpatient days. Medicare patients had a 4.7 day average length of stay.
- Privately insured patients accounted for 36% of days. The privately insured averaged 4.3 days.
- Medi-Cal patients accounted for 19% of inpatient days. Medi-Cal patients averaged 3.7 days.
- The county indigent uninsured accounted for 4% of hospital days. The county indigent uninsured had an average length of stay of 5.2 days,

Outpatient

Outpatient visits were dominated by the privately insured (42%), followed by Medicare patients (33%). Medi-Cal and the county indigent uninsured accounted for 16% and 3%, respectively, of outpatient visits.

Emergency Services

The privately insured also dominated emergency room visits (40%). Medicare patients accounted for 21%. Medi-Cal patients and the county indigent uninsured accounted for 19% and 4%.

Delivery system

Of Sonoma County's ten hospitals, Sutter Medical Center in Santa Rosa treated the greatest proportion of Medi-Cal and uninsured patients. 76% of Medi-Cal outpatient services, 44% ER, and 58% inpatient services. This facility also treated the greatest

⁸ Office of Statewide Health Planning and Development. Individual Hospital Financial Data for California, 1997-1998, Vol. 1-2. 1999.

proportions of uninsured patients; 92% of county indigent outpatient services, 41% of ER services and 45% of inpatient services.

Care to the uninsured

Sonoma community hospitals lost approximately \$6,000,000 (2.3% of net patient revenues) in bad debt and charity care to the uninsured. CMSP patient reimbursements totaled \$6,400,000, approximately 2.5% of net patient revenues in Sonoma County hospitals. These facilities provided:

- 5868 inpatient days of care to CMSP patients (75 bed days per 1000 uninsured county residents),
- 10256 outpatient visits to CMSP patients (.13 visits per uninsured county resident).
- 3581 emergency room visits to CMSP patients (.05 visits per uninsured county resident).

*CMSP Data*⁹

The CMSP Governing Board reports the following observations and expenditures for county indigent uninsured care for 1999.

- Hospital Inpatient Services– 1,221 admissions at a cost of \$10,500,000
- Emergency Room and Hospital Outpatient Services– 24,000 visits at a cost of \$1,600,000
- Pharmacy – 44,000 claims at a cost of \$2,300,000
- Physician/Medical Services (includes clinic, inpatient and outpatient visits) – 27,500 visits at a cost of \$1,800,000
- Total - \$16,200,000

*Health Plans for Small Employers*¹⁰

HIPC/PacAdvantage Plans

PacAdvantage contracts with Aetna US Healthcare, Blue Shield, Health Net, and Kaiser Permanente health plans for employees of small businesses in Sonoma County.

⁹ CMSP Governing Board, 1999 Summary of CMSP Expenditures and Number of Observations Reported by County and Claim Type, August 2001.

Premiums of the three least expensive plans are listed below. Premiums vary by the type of plan selected and depend upon an employee's age and family size.

Aetna US Healthcare

- For a 35 year old employee without dependents, monthly premiums are \$153 for the standard HMO plan.
- For a 35 year old employee with spouse and dependent children, premiums are \$490 for the standard plan.
- For a 50 year old employee the premiums are \$240.
- A 50 year old employee with a family the premiums are \$622.

Health Net

- For a 35 year old employee without dependents, monthly premiums are \$138 for the standard HMO plan.
- For a 35 year old employee with spouse and dependent children, premiums are \$467 for the standard plan.
- For a 50 year old employee the premiums are \$207.
- A 50 year old employee with a family the premiums are \$534.

Kaiser Permanente

- For a 35 year old employee without dependents, monthly premiums are \$115 for the standard plan.
- For a 35 year old employee with spouse and dependent children, premiums are \$395 for the standard plan.
- For a 50 year old employee, the premiums are \$192.
- For a 50 year old employee with a family, the premiums are \$521.

Sonoma County HIPC participants also have access to dental care through Humana Dental, the PM Group, PacifiCare Dental, Denticare, Safeguard, and Dental Benefit

¹⁰PacAdvantage Health Plan Rates, (Jan. 2001), www.pacadvantage.org

Providers. Vision care is available through AVP and VSP Vision. American Specialty Health Plans cover chiropractic and acupuncture care.

Health Plans for Individuals and Families

Private commercial insurers in Sonoma County include Blue Cross, Blue Shield, Health Net, Health Plan of the Redwoods, Kaiser Permanente, PacifiCare, and Principle. Below premium information is listed for three of these carriers' HMO plans.

Blue Cross¹¹

- For a 35 year old employee without dependents, monthly premiums are \$168 for the standard HMO plan.
- For a 35 year old employee with spouse and dependent children, premiums are \$411 for the standard plan.
- For a 50 year old employee, the premiums are \$212.
- For a 50 year-old employee with a family, the premiums are \$502.

Health Net¹²

- For a 35 year old employee without dependents, monthly premiums are \$155 for the standard HMO plan.
- For a 35 year old employee with spouse and dependent children, premiums are \$445 for the standard plan.
- For a 50 year old employee, the premiums are \$188.
- For a 50 year-old employee with a family, the premiums are \$513.

Kaiser Permanente¹³

- For a 35 year old employee without dependents, monthly premiums are \$128 for the standard HMO plan.

¹¹ Blue Cross Health Plan Benefits and Rates, (August 2001), www.bluecross.com

¹² Health Net, Monthly Rate Guide, (August 2001).

¹³ Kaiser Permanente Personal Advantage Benefits and Rates, (2001), www.kaiserpermanente.org

- For a 35 year old employee with spouse and dependent children, premiums are \$370 for the standard plan.
- For a 50 year old employee, the premiums are \$207.
- For a 50 year old employee with a family, the premiums are \$472.