

OVERVIEW OF THE UNINSURED EL DORADO COUNTY 2002

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COUNTY PROFILE¹

Population²

In 2000, the population of El Dorado County was approximately 156,300. Since 1990, the population had increased by 24%.

Geography

The state of Nevada and Alpine, Amador, Sacramento and Placer Counties border El Dorado County. The 1,805 square mile county is home to parts of the Sierra Nevada Mountains, Lake Tahoe and the El Dorado National Forest.

Economy³

With many popular vacation destinations, recreation and tourism are significant components of the County's economy and labor force. Services and retail trade account for 33% and 21%, respectively, of employment. The majority of retail jobs are in food and beverage services. Government, is another significant employer, accounting for 20% of the labor force. Many of these jobs are in local government, specifically public education.

Unemployment fell slightly in El Dorado County between 2000 and 2001 from 3.9% to 3.8%. The County's unemployment rate has been declining since 1997. California's 2001 rate of unemployment was 5.3%.

DEMOGRAPHICS

Health Coverage Status:

- 12% are uninsured⁴
- 8% are covered by Medi-Cal⁵
- 1.5% are covered by Healthy Families^{6 7}
- .8% use County health programs⁸

¹ Numbers in this report without decimal points have been rounded to the nearest whole number.

² US Census Bureau. *Census 2000*, www.census.gov

³ State of California, *County Snapshots*, 2002, www.calmis.ca.gov/htmlfile/subject/cosnaps.htm

⁴ **Percentage taken of non-elderly population.** E.R. Brown, N. Ponce, T.Rice, S.A. Lavarreda. *The State of Health Insurance in California: Findings from the 2001 California Health Interview Survey (CHIS)*. UCLA Center of Health Policy Research, June 2002, www.healthpolicy.ucla.edu

⁵ Percentage taken of total population. Medi-Cal Policy Institute. *California County Data*, Jan. 2002, www.medi-cal.org

⁶ Percentage taken of non-elderly population. Managed Risk Medical Insurance Board. *Healthy Families Program Subscribers Enrolled By County*, February 2003, www.mrmib.ca.gov

⁷ In comparison, CHIS data reported 11.2% Medi-Cal/Healthy Families non-elderly enrollment.

⁸ Percentage taken of non-elderly population. CMSP Governing Board, 2002.

Ethnicity:⁹

The population of El Dorado County consists of:

- Non-Hispanic White –85%
- Hispanic –9%
- African-American –.5%
- Asian & Pacific Islander –2%
- American Indian –1%
- Other –7%¹⁰

Income Breakdown:¹¹

In 2000, 20% of El Dorado County residents had incomes below 200% of the Federal Poverty Level (FPL):

- 7% below 100% FPL
- 13% between 100 and 200% FPL

COMMUNITY CLINICS¹²

Community clinic information was reviewed for the 2000 calendar year. In that year, community clinics in El Dorado County served 8,867 unduplicated patients and provided 28,607 visits. Total revenues and spending were \$4.8 million and \$3.3 million, respectively.

Uninsured patients accounted for approximately 1/3 of unduplicated patients and visits, though only contributed 12% of patient revenues. Medi-Cal patients accounted for smaller shares of patients and visits, yet accounted for the largest share of patient revenues, 41%. The privately insured accounted for the largest proportion of patients and the second largest shares of visits and patient revenues.

Among the uninsured, county programs accounted for the largest percentage of patient revenues (39%), despite comprising low percentages of patients and visits, 9% each. Self-pay patients were the largest patient group (47%). Non-paying patients accounted for the largest share of visits (61%) and averaged the most visits per patient, 11.8.

⁹ US Census Bureau. *Census 2000*, www.census.gov

¹⁰ "Other" is defined as person reporting race other than the above or multiple races. The total percentage can exceed 100% due to duplicate reporting.

¹¹ California Department of Finance, August 2002.

¹² Office of Statewide Health Planning and Development. *Annual Utilization Report of Primary Care Clinics*, 2000 www.oshpd.states.ca.gov

- El Dorado community clinics provided .6 uninsured visits per uninsured county resident.

Clinic Utilization and Patient Revenues

Insurance Status	Unduplicated Patients¹³	Visits	Average Annual Visits Per Patient	Patient Revenues
Total	8,867	28,607	3.2	\$2.3M
Uninsured	30%	33%	3.6	12%
Medi-Cal	16%	25%	5.2	41%
Medicare	12%	9%	2.4	12%
Private Insurance	42%	32%	2.5	34%
Other Payer	1%	1%	2.3	.2%

Uninsured Clinic Utilization and Patient Revenues

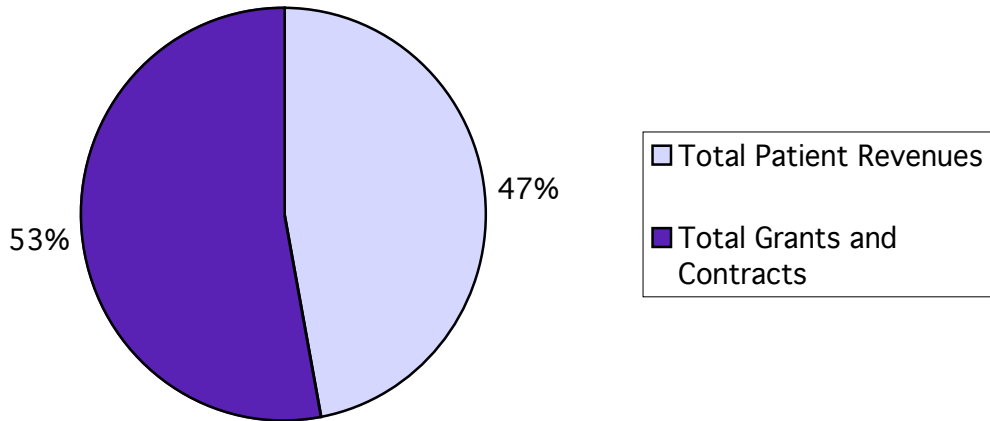
Payer	Unduplicated Patients	Visits	Average Annual Visits Per Patient	Patient Revenues
Total Uninsured	2,168	9,529	3.6	\$281,100
County Programs	9%	9%	3.8	39%
EAPC	0%	0%	0	0%
CHDP	18%	5%	1.1	9%
Other State Programs	8%	5%	2.0	14%
Self-Pay	47%	20%	1.6	38%
Non-Pay	19%	61%	11.8	0%

Clinic Revenue from Contracts and Grants

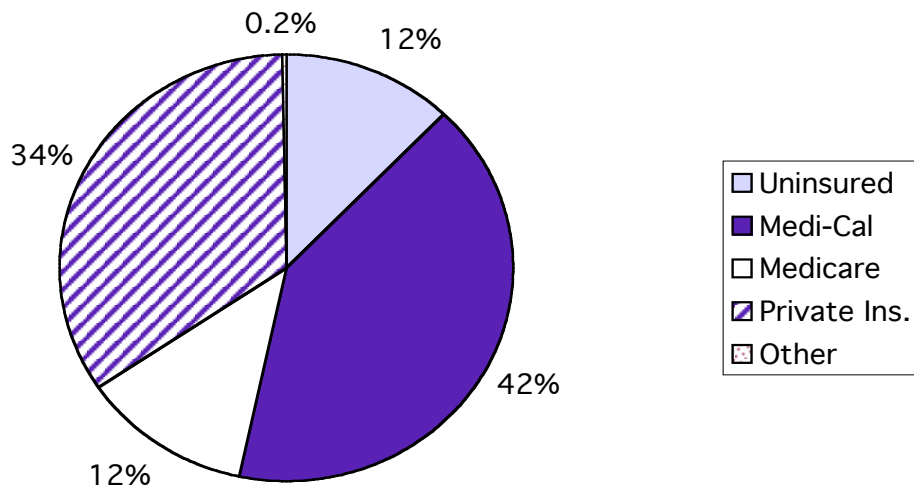
Federal Contracts and Grants	27% (\$2.3M)
State Contracts and Grants	11% (\$1.3M)
County & Local Contracts and Grants	.5% (\$506,100)
Other Contracts and Grants	12% (\$585,400)
HMO Contracts and Grants	3% (\$152,000)
Private Donations	0% (\$0)

¹³ We used “Patients by Payer” for our calculations of clinic utilization and patient revenue. “Patients by Payer” doesn’t include patient care financed by contracts and grants. Patient care financed by grants and contracts are included under “Total Unduplicated Patients.”

Total Community Clinic Revenue



Total Patient Revenue by Payer



Delivery System

There are 3 community clinic sites in El Dorado County, including one Indian Health Services clinic.

- Barton Memorial Hospital Family Clinic in South Lake Tahoe accounted for the largest share of net patient revenue (57%), followed by Shingle Springs Tribal Health Program clinic (42%).
- Barton Memorial Hospital Family Clinic in South Lake Tahoe had the most uninsured patients (55%), followed by Shingle Springs Tribal Health Program (28%).
- Barton Memorial Hospital Family Clinic in South Lake Tahoe saw the most Medi-Cal patients (55%), followed by Shingle Springs Tribal Health Program (44%).
- Barton Memorial Hospital Family Clinic in South Lake Tahoe saw the most Medicare patients (94%), followed by Shingle Springs Tribal Health Program (6%).
- Barton Memorial Hospital Family Clinic in South Lake Tahoe saw the most privately insured patients (86%), followed by Barton Memorial Hospital Family Clinic at Sierra at Tahoe (9%).

HOSPITALS¹⁴

Hospital information was reviewed for fiscal year 2001. Hospitals in El Dorado County provided 49,304 inpatient days, 332,933 outpatient visits and 81,105 emergency room visits, at a cost of approximately \$123.4 million.

County indigent patients accounted for very small shares of inpatient days, outpatient visits and ER visits (1% each). Medicare accounted for the largest percentage of inpatient days. Privately insured patients accounted for the greatest share of outpatient and ER visits. Medi-Cal patients averaged the longest length of stay, at least twice as long as each of the other patient categories. This figure may reflect long-term care.

Insurance Status	Inpatient Days	Average Length of Stay	Outpatient Visits (Including ER)	ER Visits¹⁵
Total	49,304	4.9	332,933	81,105
County Indigent	1%	2.7	1%	1%
Medi-Cal	25%	11.3	9%	7%
Medicare	41%	4.3	27%	22%
Private Insurance	15%	3.2	45%	39%
Other Indigent	0%	0	0%	0%
Other Payer	18%	5.2	18%	31%

¹⁴ Office of Statewide Health Planning and Development. *Hospital Annual Financial Data*, 2001
www.oshpd.ca.gov

¹⁵ER data reporting cycle may differ from other OSHPD hospital data categories.

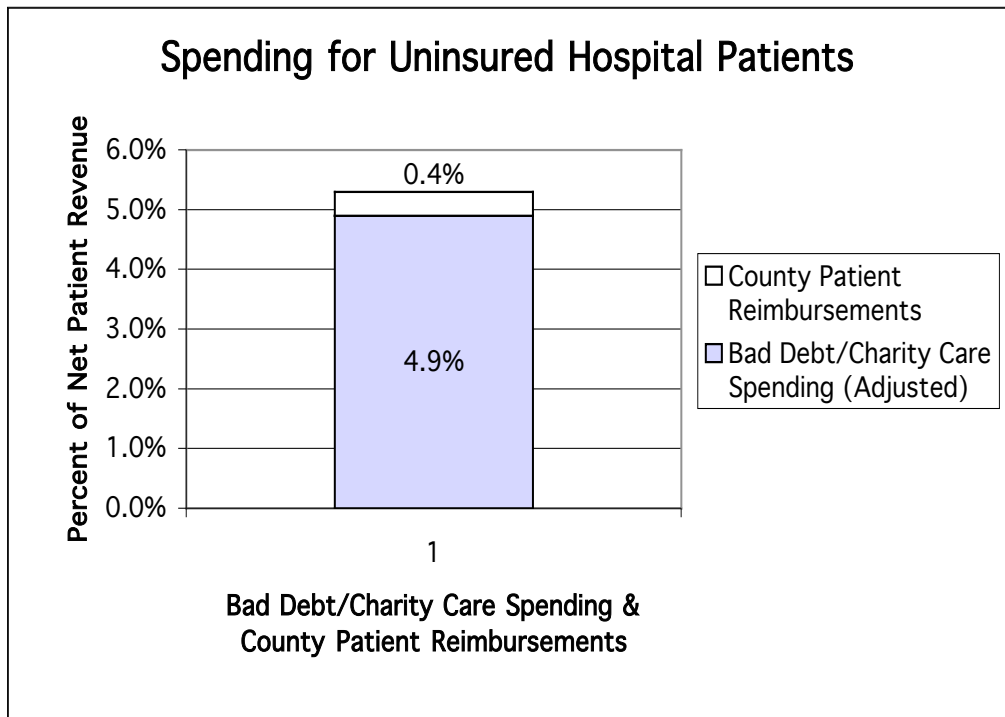
Delivery System

There are 2 hospitals in El Dorado County,¹⁶ Barton Memorial Hospital and Marshall Hospital.

- Marshall Hospital accounted for the largest share of net patient revenue (58%).
- Marshall Hospital provided the greatest proportion of bed days to county indigent patients (72%).
- Barton Memorial Hospital provided the most bed days for Medi-Cal patients (86%).
- Marshall Hospital provided the most bed days for Medicare patients (74%).
- Marshall Hospital provided the most bed days for privately insured patients (55%).

Care to the County Indigent

Hospitals in El Dorado County reported an aggregate loss of approximately \$5.8 million in bad debt and charity care (4.9% of net patient revenues). Reported reimbursements for county indigent patients totaled \$421,500 (.4% of net patient revenues). This seems to be a reporting error.



¹⁶ Comparable hospitals are acute care hospitals and do not include Prepaid Health Plan Hospitals such as Kaiser Permanente Hospitals.

Both OSHPD and CMSP report utilization and financial data for care for the county indigent. Hospitals report the services and expenses reimbursed by the county to OSHPD. The county reports the services and payments to providers to CMSP.¹⁷

	OSHPD Data	County Health Data¹⁸
# Inpatient days per 1000 uninsured	39	105
# Outpatient visits per 1000 uninsured	283	450
# ER visits per 1000 uninsured	62	NA
Hospital Revenue from County¹⁹	\$421,500	
County spending		\$6.0M
Gross DSH	\$0	\$0 ²⁰

CMSP Data²¹

County Spending for the Uninsured

	Number of Days or Visits	Expenditures in Dollars	Expenditure as Percentage of Total
Inpatient Days	1,699	\$3.8M	63%
Outpatient Visits	7,262	\$530,590	9%
Pharmacy Claims	17,567	\$909,340	15%
Medical/Physician Visits	12,787	\$785,100	13%
Total		\$6.0M	100%

Net Public Health Spending:²² NA

¹⁷ Theoretically, these reports should be identical for hospital inpatient days and emergency room visits. However, there is often considerable variation between these sources' figures. County health data on outpatient visits include hospital outpatient visits and county & community clinic and private physician visits, whereas OSHPD outpatient data accounts for hospital outpatient visits only.

¹⁸ CMSP Governing Board, 2002.

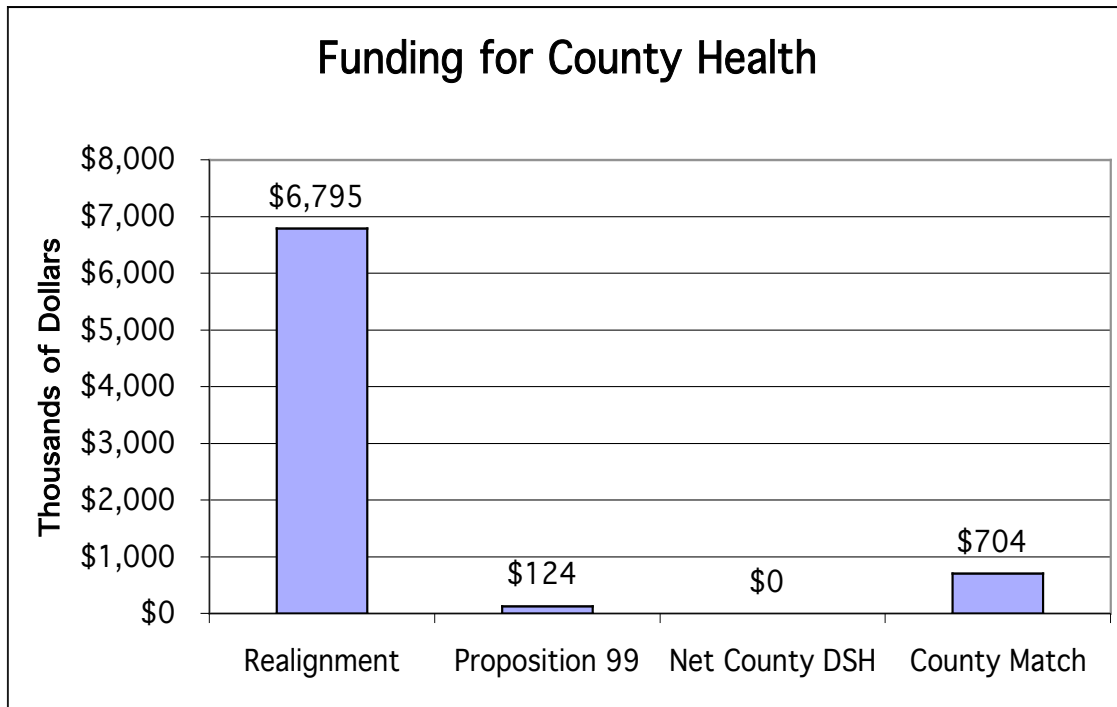
¹⁹ This figure may include private donations for indigent care.

²⁰ Office of County Health Services. *SB 855 – Actual Payments and Transfers County and Non County Hospitals FY 2000-01*, Aug. 2002.

²¹ CMSP Governing Board, 2002.

²² Office of County Health Services. *Budget/Actual Data Fiscal Year 2001-02*.

FUNDING FOR COUNTY HEALTH^{23 24}



Funding Per Capita²⁵

	Realignment	Proposition 99	Net County DSH	County Match
Per County Resident	\$50	\$9	\$0	\$5
Per Uninsured County Resident	\$421	\$8	\$0	\$44

DSH Distribution²⁶

El Dorado County hospitals did not receive DSH funding in FY 2001.

²³ Office of County Health Services. *Table of Proposition 99 and Realignment Funds and County Match, Fiscal Year 2000-01/2001-02.*

²⁴ Net County DSH Source: Office of County Health Services, Aug. 2002.

²⁵ Non-elderly population

²⁶ Office of County Health Services, Aug. 2002.

HEALTH COVERAGE AND HEALTH SERVICES UTILIZATION BY ETHNICITY

Ethnicity	Percent of Uninsured ²⁷	Percent of Medi-Cal Enrollment ²⁸	Percent of Healthy Families Enrollment ²⁹	Percent of Community Clinic Patients ³⁰	Percent of County Indigent Patients ³¹
Non-Hispanic White	79%	81%	66%	55%	89%
Hispanic	NA	16%	23%	8%	7%
African-American	NA	1%	.2%	1%	1%
Asian & Pacific Islander	NA	1%	2%	6%	3%
American Indian	NA	1%	1%	8%	1%
Other³²	NA	NA	8%	22%	.3%

PUBLIC MANAGED CARE

Medi-Cal Managed Care³³

- None, Fee-for-Service only

Healthy Families Managed Care³⁴

- Current Enrollment: 2,105
- Community Provider Plan: Health Net HMO (17%)
- Commercial Plan: Blue Cross EPO (76%)

JOB-BASED INSURANCE³⁵

	El Dorado County	California
Non-Elderly Adults	71%	65%
Children	71%	59%

²⁷ California Health Interview Survey, 2001.

²⁸ Medi-Cal Policy Institute. *Medi-Cal County Data Book*, Jan. 2002.

²⁹ Managed Risk Medical Insurance Board, Feb. 2003, www.mrmib.ca.gov

³⁰ Office of Statewide Health Planning and Development, 2000, www.oshpd.states.ca.gov

³¹ CMSP Governing Board, 2002.

³² "Other" is defined differently in each data source, such as "unreported," "multiple ethnicities" or "other than listed options." Please see respective sources for further information.

³³ Medi-Cal Policy Institute. *California County Data*, Jan. 2002, www.medi-cal.org.

³⁴ Managed Risk Medical Insurance Board. *Healthy Families Program Subscribers Enrolled in Community Provider Plan by County*, Feb. 2003, www.mrmib.ca.gov

³⁵ Brown et al, 2002.

HEALTH PLANS FOR SMALL EMPLOYERS

PacAdvantage – Purchasing Pool³⁶

PacAdvantage contracts with Blue Shield, Health Net and Kaiser Permanente in El Dorado County. Each of these carriers offers three HMO plans through PacAdvantage, but are only available in part of the County. Health Net also offers two PPOs. Benefits for the standard PacAdvantage HMO and the two PPOs are listed below.

PacAdvantage Standard HMO and PPO Benefits

Health Plan	Patient Out-of-Pocket						
	Deductible	Office Visits	Inpatient Admission	Outpatient Services	ER Visits	Brand-Name Drugs	Generic Drugs
Standard HMO	\$0	\$30 co-pay	\$1,000	Co-pays vary by service	\$100	\$30 co-pay	\$15 co-pay
Health Net PPO Saver	\$500 per individual/ 2 per family	\$20 co-pay, limited visits	20% after deduct.	Cost after deduct. varies by service	20% after \$100 deduct.	20% co-pay	20% co-pay
Health Net PPO 30	\$1000 per individual/ 2 per family	\$30 co-pay	20% after \$250 deduct.	Cost after deduct. varies by service	20% after \$100 deduct.	\$30 co-pay	\$20 co-pay

PacAdvantage Monthly Premiums for Standard HMOs and PPOs

Premiums vary by the type of plan and employee's age and family size.

Health Plan	35 yr-old, Single	50 yr-old, Single	35 yr-old, with Spouse and Dependent Children	50 yr-old, with Spouse and Dependent Children
Blue Shield HMO	\$242	\$283	\$718	\$910
Health Net HMO	\$243	\$407	\$892	\$1,063
Kaiser HMO	\$148	\$235	\$502	\$636
Health Net PPO Saver	\$133	\$227	\$451	\$560
Health Net PPO 30	\$204	\$349	\$692	\$859

³⁶ PacAdvantage. 2002 Rate Information, July 2002, www.pacadvantage.org. These figures represent group sizes of 15+ eligible employees. The cost for a group size of 2-5 employees is approximately 10% more than the cost listed above.

Other Health Insurance for Small Employers³⁷

Blue Cross, Blue Shield, Health Net, Kaiser Permanente and PacifiCare³⁸ offer health plans for small employers who do not participate in PacAdvantage in El Dorado County. Standard HMO options and PPOs with comparable benefits and low deductibles are listed below.

Benefits Offered by Standard HMOs and PPOs under Other Small Employer Plans

Health Plan	Patient Out-of-Pocket						
	Deductible	Office Visits	Inpatient Admission	Outpatient Services	ER Visits	Brand-Name Drugs	Generic Drugs
Blue Cross Saver HMO	\$1500 per member/2 member max	\$10	No charge after deduct.	No charge after deduct.	NA□	\$25 after \$150 deduct	\$10
Blue Shield Access + HMO 15	\$0	\$15	No charge	No charge	\$100	\$25 after \$250 deduct.	\$15
Health Net HMO 15	\$0	\$15	No charge	No charge	\$75	\$25	\$15
Kaiser Permanente HMO 15-N	\$0	\$15	No charge	NA□	\$50	\$20	\$10
Blue Cross PPO 30	\$250 per member	\$30	30% after deduct.	30% after deduct.	NA*	\$25 after \$150 deduct.	\$15
Blue Shield PPO 80/60	\$500 per member/\$1000 per family	\$35	20% after deduct.	20% after deduct.	\$50 + 20%	\$25 after \$150 deduct.	\$10
Health Net PPO Value 30	\$500 per member/3 per family	\$30	20% after \$250 deduct.	20% after \$250 deduct.	\$75 after deduct.	\$30 after deduct.	\$15 after deduct.

³⁷ Blue Cross of California. *Small Group Sales and Enrollment Guide*, April 2001; Blue Cross of California. *Monthly Rates for Small Group Medical, Dental and Basic Term Life Plans*, March 2002; Blue Shield of California. *Group Health Plans - Summary of Benefits and Provisions*, April 2002; Blue Shield of California. *Group Health Plans - Monthly Rates*, May 2002; Health Net. *Plans and Rates - Small Business Group Plans*, July 2002; Health Net. *Plans and Rates-Small Business Group Rates*, July 2002; Kaiser Permanente. *Traditional Plan for Small Business - Northern California, Jan. 2002*; Kaiser Permanente. *Traditional Plan for Small Business Rates- Northern California*, July 2002.

³⁸ PacifiCare benefits and rates for small employer plans were not available to us at the time of this report.

□ Information not available

Monthly Premiums of Standard HMOs and PPOs for Other Small Employer Plans

Premiums vary by the type of plan and employee's age and family size.

Health Plan	35 yr-old, Single	50 yr-old, Single	35 yr-old, with Spouse and Dependent Children	50 yr-old, with Spouse and Dependent Children
Blue Cross Saver HMO	\$202	\$275	\$603	\$725
Blue Shield Access + HMO 15	\$143	\$212	\$535	\$680
Health Net HMO 15	\$206	\$345	\$755	\$900
Kaiser Permanente HMO 15-N	\$158	\$251	\$537	\$682
Blue Cross PPO 30	\$157	\$284	\$477	\$625
Blue Shield PPO 80/60	\$170	\$334	\$593	\$858
Health Net PPO Value 30	\$215	\$373	\$664	\$838

INDIVIDUAL HEALTH PLANS³⁹

Blue Cross, Blue Shield, Health Net, Kaiser Permanente and PacifiCare offer health plans for individuals and families in El Dorado County. Standard HMO options and PPOs with comparable benefits and low deductibles are listed below.

Benefits Offered by Standard HMOs and PPOs of Individual Health Plans

Health Plan	Patient Out-of-Pocket						
	Deductible	Office Visits	Inpatient Admission	Outpatient Services	ER Visits	Brand-Name Drugs	Generic Drugs
Blue Cross Saver HMO	\$1500 per member/ \$3000 per family	\$10	No charge after \$1500 deduct.	20% after \$1500 deduct.	\$50 + 20%	\$30 after \$250 deduct.	\$10
Blue Shield Access + HMO	\$1500 per member/ \$3000 per family	\$10	No charge after deduct.	\$25-\$35	\$100 + 20%	\$30	\$10
Health Net HMO 15	\$0	\$15	No charge	No charge	\$75	\$25 after \$100 deduct.	\$15 after \$100 deduct.
Kaiser Permanente Personal Advantage	\$0	\$15	No charge	\$15	\$50	\$25	\$10
PacifiCare HMO 10	\$0	\$10	No charge	Cost varies per service	\$50	\$25	\$10
Blue Cross PPO 1000	\$1000 per member/ \$2000 per family	30%	30% after deduct.	30% after deduct.	\$30 + 30%	\$30 after \$250 deduct.	\$10
Blue Shield PPO 500	\$500 per member/ \$1000 per family	\$30	25% after deduct.	25% after deduct.	25% after deduct.	\$25 after \$50 deduct.	\$7
Health Net PPO 20	\$1000 per member/ \$2000 per family	\$20	20% after deduct.	20% after deduct.	\$75 + 20%	\$35 after \$100 deduct.	\$10 after \$100 deduct.

³⁹ Blue Cross of California. *Individual and Family Health Programs*, Dec. 2001; Blue Cross of California. *Monthly Rates for Individual and Family Medical and Life Plans*, August 2002; Blue Shield of California. *Health Plans for Individuals and Families-Summary of Benefits and Provisions*, April 2002; Blue Shield of California. *Monthly Rates for Individuals and Families*, April 2002; Health Net. *Individual and Family Coverage - Summary of Benefits and Provisions of Coverage*, Feb. 2002; Health Net. *Monthly Rate Guide - Individual and Family Plans*, Feb. 2002; Kaiser Permanente. *Personal Advantage 2002 Benefits*, Jan. 2002; Kaiser Permanente. *Personal Advantage 2002 Rates - Northern California*, Jan. 2002; PacifiCare. *Benefits Summary - Individual HMO Plans*, Jan. 2002; PacifiCare. *Monthly Premiums for Individual Plans*, Jan. 2002.

Monthly Premiums of Standard HMOs and PPOs for Individual Health Plans

Premiums vary by the type of plan and individual's age and family size.

Health Plan	35 yr-old, Single	50 yr-old, Single	35 yr-old, with Spouse and Dependent Children	50 yr-old, with Spouse and Dependent Children
Blue Cross Saver HMO	\$212	\$273	\$518	\$637
Blue Shield Access + HMO	\$230	\$298	\$683	\$755
Health Net HMO 15 Eastern El Dorado Cnty.	\$356	\$425	\$1,010	\$1,157
Health Net HMO 15 Western El Dorado Cnty.	\$263	\$321	\$749	\$871
Kaiser Permanente Personal Advantage	\$149	\$230	\$441	\$523
PacifiCare HMO 10	\$245	\$431	\$733	\$1,085
Blue Cross PPO 1000	\$186	\$380	\$465	\$843
Blue Shield PPO 500	\$181	\$361	\$546	\$848
Health Net PPO 20 Eastern El Dorado Cnty.	\$189	\$430	\$529	\$1,008
Health Net PPO 20 Western El Dorado Cnty.	\$135	\$312	\$374	\$714