

ITUP's regional overview¹ of Northern Central California's uninsured covers seven counties: El Dorado, Napa, Placer, Sacramento, Solano, Sonoma and Yolo.

Economy²

Industries

Significant industries in the Northern Central region include agriculture, recreation, tourism, government and services. These industries account for varying proportions of each county's economy. For example, government is a significant component to Sacramento County's economy as the home of the state capital. Agriculture plays a major role in the economies of Napa, Solano, Sonoma and Yolo Counties. The University of California at Davis is the largest employer in Yolo County and also a pivotal component of the County's economy. As one of the world's most popular wine-producing areas, Napa and Sonoma Counties benefit substantially from tourism. As homes to popular vacation destinations, El Dorado and Placer Counties rely heavily on the recreation and tourism industries. Overall, services, government and retail dominate employment in the region, accounting for 27%, 23% and 16%, respectively, of the labor force. Though a significant component of the region's economy, agriculture accounts for only 2% of employment.

Unemployment (2001)

The regional unemployment rate is significantly lower than that of the state. Sacramento and Yolo Counties have the highest rate of unemployment in the region.

- Northern Central study counties average – 3.9% (range: 2.9% Sonoma, 4.2% Sacramento and Yolo).
- Statewide – 5.3%.

Demographics

Population³

In 2000, the total population of the Northern Central study area was 2.8 million, approximately 8% of California residents.

- Range: 124,279 Napa, 1.2M Sacramento.
- Population growth between 1990 and 2000 was 15%. (range: 4% Placer, 24% El Dorado)

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

² State of California. *County Snapshots*, 2002 www.calmis.ca.gov/htmlfile/subject/cosnaps.htm

³ US Census Bureau. *Census 2000*, www.census.gov

Ethnicity⁴

The Northern Central study counties have higher percentages of non-Hispanic whites smaller percentages of minorities compared to the state as a whole. The population of the study counties consists of:

- Non-Hispanic White – 64% (range: 49% Solano, 85% El Dorado)
- Hispanic – 17% (range: 9% El Dorado, 26% Yolo)
- African-American – 7% (range: .5% El Dorado, 15% Solano)
- Asian & Pacific Islander – 9% (range: 2% El Dorado, 13% Solano)
- American Indian – 1% (equal in all study counties)
- Other⁵ – 13% (range: 7% El Dorado and Placer, 19% Yolo)
- Statewide: Non-Hispanic White 47%; Hispanic 32%; African-American 7%; Asian & Pacific Islander 11%; American Indian 1%; Other 22%.

Income and Poverty⁶

In 2000, 32% of California residents lived below 200% of the Federal Poverty Level (FPL). Within the Northern Central study counties, 26% of residents had incomes below 200% FPL. Placer County had the lowest rate, 17%, and Yolo County had the highest, 36%.

- 11% below 100% FPL (range: 6% Placer, 18% Yolo)
- 15% between 100 and 200% FPL (range: 11% Placer, 18% Yolo)

Health Coverage Status

Compared to other regions in the state,⁷ the Bay Area and Northern Central region share the lowest rate of uninsured. Medi-Cal participation, Healthy Families enrollment, and county programs utilization (MISP and CMSP) in the Northern Central region were each lower than state rates.

- 9% are uninsured⁸ (range: 4% Placer, 12% El Dorado and Sonoma)
 - State – 15%

⁴ Ibid.

⁵ “Other” is defined as person reporting race other than the above or multiple races. The total percentage can exceed 100% due to duplicate reporting.

⁶ California Department of Finance. August 2002.

⁷ Compared to Northern Rural, Southern California, Central Valley and Central Coast regions.

⁸ **Percentage taken of non-elderly population.** E.R. Brown, N. Ponce, T.Rice, S.A. Lavarreda. *The State of Health Insurance in California: Finding from the 2001 California Health Interview Survey (CHIS)*.

UCLA Center of Health Policy Research, June 2002, www.healthpolicy.ucla.edu

- 14% are covered by Medi-Cal⁹ (range: 7% Placer, 20% Sacramento)
 - State – 17%
- 1.2% are covered by Healthy Families^{10 11} (range: 1.0% Solano, 1.7% Sonoma)
 - State – 2.1%
- 2.3% use county health programs¹² (range: .6% Napa, Solano and Sonoma, 4% Sacramento)
 - State – 4.4%

Poverty (Under 200% of the Federal Poverty Level) and Health Insurance Status

There is no apparent correlation between rates of poverty and of the uninsured within the study counties. For example, El Dorado County has one of the lowest rates of poverty in the region (20%) and also has one of the areas' highest percentages of uninsured 12%. There are similarly no correlations between poverty and health coverage program enrollment or utilization.

Community Clinics¹³

Non-profit free and community clinics provide a large volume of care to the uninsured. Within the study counties, there are 50 community clinics, including 10 Planned Parenthood facilities and 4 Indian health centers. Sacramento County has the most community clinics, 17, and Napa County has the fewest, 2.

Utilization

Community clinic information was reviewed for the 2000 calendar year. In that year, community clinics in the study counties provided a total of 527,300 visits, including 277,000 uninsured visits.

- California's uninsured average 2 outpatient visits annually.
- The region's community clinics provided **1.2** uninsured visits per uninsured county resident (range: **.5** Sacramento, **4.3** Placer).
- The uninsured accounted for 53% of clinic visits (range: 33% El Dorado, 71% Yolo).

⁹ Percentage taken of total population. Medi-Cal Policy Institute. *California County Data*, Jan. 2002, www.medi-cal.org

¹⁰ Percentage taken of non-elderly population. Managed Risk Medical Insurance Board. *Healthy Families Program Subscribers Enrolled By County*, Feb. 2003 www.mrmib.ca.gov

¹¹ In comparison, CHIS data reported 10.8% Medi-Cal & Healthy Families non-elderly enrollment for the region.

¹² Percentage taken of non-elderly population. Medically Indigent Care Reporting System (MICRS). *Medically Indigent Patients Utilizing Services Provided in County Health Programs FY 1999-2000*, July 2002; CMSP Governing Board, September 2002.

¹³ Office of Statewide Health Planning and Development. *Annual Utilization Report of Primary Care Clinics*, 2000 www.oshpd.states.ca.gov

- Medi-Cal patients accounted for 30% of visits (range: 21% Napa, 48% Solano).
- Other state programs accounted for the greatest proportion of uninsured visits, 30% (range: 4% Napa, 47% Sacramento).
- County programs accounted for 11% of uninsured visits (range: 6% Sacramento, 48% Napa).

Patient Revenue

Community clinics' patient revenue for the study counties totaled \$31.2 million. Their uninsured patient revenue totaled approximately \$13.5 million.

- Uninsured revenues comprised 43% of patient revenue (range: 12% El Dorado, 77% Napa).
- Medi-Cal revenues accounted for 40% of patient revenue (range: 5% Napa, 54% Solano).
- Among the uninsured, other state programs accounted for the greatest proportion of uninsured patients' revenues, 43% (range: 21% Yolo, 63% Sacramento).
- County programs accounted for the third largest proportion of uninsured revenue, 20% (range: 10% Sacramento and Solano, 47% Yolo). Self-paying patients accounted for 23% of uninsured revenues.

Other Revenue

Clinics also receive revenues from grants and contracts. These sources totaled \$38.4 million for Northern Central community clinics (range: \$1.6M Solano, \$14.1M Sacramento), and represented 55% of total clinic revenue for the study counties.

- Federal grants and contracts totaled 23% of clinic revenue (range: 0% Napa, 35% Placer).
- State grants and contracts totaled 16% of clinic revenue (range: 3% Placer, 27% Napa and Sacramento).
- County and local grants and contracts totaled 7% of clinic revenue (range: .5% El Dorado, 13% Placer).
- HMO contracts were 1% of clinic revenue (range: 0% Napa, Placer, Solano & Yolo, 3% El Dorado).
- Private donations were 3% of clinic revenue (range: 0% El Dorado, 10% Placer).
- Other grants and contracts totaled 6% of clinic revenue (range: 1% Placer, 23% Napa).

Hospitals¹⁴

Hospital information reported to OSHPD was reviewed for fiscal year 2001. In all study counties, county indigent patients accounted for low percentages (generally 6% and less) of all hospital services. Sonoma County had the highest rates of county indigent utilization in the region, including a high rate of ER use, 13%. Medi-Cal patients accounted for larger shares, generally accounting for up to 30% of services. Compared with other California regions, the Northern Central area averaged a low percentage of Medi-Cal ER visits. Solano County is the one exception, where Medi-Cal patients accounted for 97% of ER visits. This is likely a reporting error.

Inpatient Days

- The county indigent accounted for 3% of inpatient days (range: 1% El Dorado & Placer, 6% Sonoma).
- Medi-Cal patients accounted for 22% of inpatient days (range: 8% Placer, 27% Sacramento).

ALOS

The average length of inpatient stay for the study region was 5.2 days (range: 3.0 Yolo, 5.9 Napa).

- County indigent patients averaged 5.2 inpatient days (range: 2.7 El Dorado, 7.0 Sonoma)
- Medi-Cal patients averaged 5.7 days (range: 2.7 Yolo, 11.3 El Dorado).

Outpatient Visits

- The county indigent accounted for 2% of outpatient visits (range: 1% El Dorado, Placer & Sacramento, 4% Sonoma).
- Medi-Cal patients accounted for 15% of outpatient visits (range: 8% Placer, 26% Solano).

Emergency Room Services

- The county indigent accounted for 2% of ER visits (range: 0% Napa, 13% Sonoma).
- Medi-Cal patients accounted for 15% ER visits (range: 3% Placer, 97% Solano).

Reimbursed and Uncompensated Care to the Uninsured

- Uncompensated bad debt and charity care for the seven study counties totaled approximately \$66.3 million, accounting for 2.6% of total net patient revenue for the region (range: 1.5% Napa, 4.9% El Dorado).

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

- OSHPD reported county reimbursements to hospitals totaling approximately \$61.7 million, 2.4% of net patient revenue (range: .4% El Dorado & Placer, 4.6% Sonoma).

Reported OSHPD and County Data for Care to the Uninsured

OSHPD, MICRS and CMSP all report utilization and financial data for care to the county indigent. Hospitals report the services and expenses reimbursed by the county through OSHPD. The county reports the services and payments to hospitals and other providers through MICRS or the CMSP Governing Board, depending on the county. Theoretically, these reports should be identical for hospital inpatient days and emergency room visits. There are exceptions; for example if El Dorado County's indigent residents were treated in facilities in Sacramento County, the CMSP data for El Dorado County would report these hospital days, as would the OSHPD data for Sacramento hospitals. There is, however, often a very considerable variation between the OSHPD, MICRS and CMSP data, which we attribute to reporting errors. We reported both data.

MICRS/CMSP data on outpatient visits include hospital outpatient visits as well as county, community clinic and private physician visits; whereas OSHPD's hospital outpatient data reports hospital outpatient visits only. The reports therefore differ with respect to reporting of outpatient visits.

Data discrepancies were found in almost all reporting categories within each county. Neither data source consistently reported higher or lower figures than the other. We reported days and visits per 1000 uninsured so it is possible to compare hospital use by county patients between counties.

Inpatient Days per 1000 Uninsured

- OSHPD: 129 days per 1000 (range: 37 Yolo, 188 Sonoma)
- MICRS/CMSP: 106 days per 1000 (range: 40 Yolo, 164 Solano)
- Average difference between data reporting sources: 23 days per 1000
- Smallest data reporting discrepancy: 3 days per 1000, Yolo
- Largest data reporting discrepancy: 66 days per 1000, El Dorado

County Spending/Hospital Reimbursement

With the exception of Sacramento County, OSHPD reports of county reimbursements to hospitals for indigent care were less than what the counties reported spending for care to the uninsured to MICRS and CMSP. Part of this reporting difference is attributable to county payments for care outside of hospitals. It is not possible from the MICRS and CMSP reports to distinguish county spending on care inside and outside hospital settings.

- OSHPD total: \$61.7M (range: \$.4 El Dorado, \$36.1M Sacramento)
- MICRS/CMSP total: \$77.9M (range: \$2.2M Yolo, \$31.9M Sacramento)

- Average difference between reporting sources: \$16.1M
- Smallest reporting discrepancy: \$.7M, Yolo
- Largest discrepancy: \$8.6M, Solano

Gross DSH

Only hospitals in Sacramento, Solano and Sonoma Counties received DSH in FY 2001.

- OSHPD gross DSH: \$50.8M (range: \$.1M Solano, \$44.5M Sacramento)
- DHS gross DSH: \$53.2M (range: \$1.5M Solano, \$45.4M Sacramento)

County Reported Spending and Care for the Uninsured¹⁵

Solano County reported the highest rate of inpatient hospital access for county indigent patients and Placer County reported the greatest use of outpatient services. Current county emergency room information is unavailable for CMSP counties and Sacramento County. The ER information listed below represents Yolo County only.

Average Number of Days or Visits Per 1000 Uninsured

- Inpatient days: 106 days per 1000 (range: 40 Yolo, 164 Solano)
- Outpatient visits: 674 per 1000 (range: 450 El Dorado, 1,243 Placer)
- ER visits: 38 per 1000 (Yolo)

Expenditures as Percentage of Total

Yolo County reported the lowest percentage of spending on inpatient services and the highest on outpatient services.

- Inpatient: 58% (range: 29% Yolo, 69% Napa & Solano)
- Outpatient: 25% (range: 6% Napa & Solano, 65% Yolo)
- ER: 6% (Yolo)

Expenditures in Dollars

- Inpatient: \$6.5M (range: \$.6M Yolo, \$16.1M Sacramento)
- Outpatient: \$2.7M (range: \$.3M Napa, \$13M Sacramento)
- ER: \$123,800 (Yolo)

¹⁵ Medically Indigent Care Reporting Systems (MICRS). *County Health Care Program Expenditures for Medically Indigent FY 1999-2000*, July 2002; CMSP Governing Board, September 2002.

Uninsured County Spending per Uninsured County Resident

Spending per uninsured county resident was highest in Solano and lowest in Yolo.

- Average spending: \$349 per uninsured county resident (\$133 Yolo, \$567 Solano).

Net Public Health Spending¹⁶

Net public health spending information was only available for Yolo County.

- Total: \$4.4M
- Per county resident: \$29

Funding For County Health¹⁷

Of the Northern Central study counties, Napa received the most funding per capita. Yolo and Placer received the least.

Funding Per County Resident

- Realignment: \$43 (range: \$23 Placer, \$58 Sonoma).
- Proposition 99: \$1 (range: \$1 El Dorado, Napa, Placer, Solano, Sonoma, \$2 Sacramento, Yolo).
- Net County DSH: \$0.
- County Match: \$4 (range: \$.3 Solano, \$7 Sacramento, Yolo).
- Total funding: \$49 (range: \$26 Placer, \$61 Napa).

Funding Per Uninsured County Resident

Solano County received the most realignment funding per uninsured county resident. Sacramento County made the largest county contribution per uninsured county resident. Yolo County had the least total funding per uninsured county resident.

- Realignment: \$478 (range: \$312 Yolo, \$662 Solano).
- Proposition 99: \$15 (range: \$8 El Dorado, Sonoma, \$25 Placer).
- Net County DSH: \$0.
- County Match: \$47 (range: \$5 Solano, \$69 Sacramento).
- Total funding: \$540 (range: \$399 Yolo, \$683 Napa).

¹⁶ Office of County Health Services. *Budget/Actual Data Fiscal Year 2001-2002*.

¹⁷ Office of County Health Services. *Table of Proposition 99 and Realignment Funds and County Match, Fiscal Year 2000-01/2001-02*.

DSH Distribution¹⁸

With no public hospitals, the Northern Central study counties did not receive county DSH. Only Sacramento, Solano and Sonoma facilities received non-county DSH.

- Total Net DSH: \$24.0M (range: \$1.5 M Solano, \$16.2M Sacramento).
- Net DSH per Uninsured County Resident: \$108 (range: \$69 Solano, \$157 Sacramento).

Health Coverage and Health Services Utilization By Ethnicity

Our review of program use by ethnicity, showed a smaller than anticipated use of Healthy Families and community clinics by African Americans and non-Hispanic whites.

Uninsured

- Non-Hispanic White: 54% (range: 29% Solano, 80% Placer).
- Hispanic, African-American, Asian & Pacific Islander, American Indian and other: NA¹⁹

Medi-Cal

- Non-Hispanic White: 48% (range: 34% Solano, 81% El Dorado).
- Hispanic: 21% (range: 15% Placer, 42% Napa).
- African-American: 19% (range: 1% El Dorado, 34% Solano).
- Asian & Pacific Islander: 7% (range: .3% Placer, 10% Sacramento)
- American Indian and other: NA

Healthy Families

- Non-Hispanic White: 32% (range: 18% Napa, 66% El Dorado).
- Hispanic: 39% (range: 17% Placer, 67% Napa).
- African-American: 4% (range: .2% El Dorado, 11% Solano).
- Asian & Pacific Islander: 9% (range: 2% El Dorado, 14% Sacramento).
- American Indian: 1% (range: 0.3% Napa & Sonoma, 1% all others).
- Other: 15% (range: 8% El Dorado, 19% Sacramento).

¹⁸ Ibid.

¹⁹ Sufficient information was not available.

Community Clinic Patients

- Non-Hispanic White: 34% (range: 23% Sacramento, 55% El Dorado).
- Hispanic: 46% (range: 5% El Dorado, 64% Napa).
- African-American: 6% (range: .4% Placer, 26% Solano).
- Asian & Pacific Islander: 3% (range: 1% Napa, Placer & Sonoma, 5% Sacramento).
- Average percent American Indian: 7% (range: 0.1% Solano, 13% Placer).
- Other: 6% (range: 1% Napa, 22% El Dorado).

County Indigent

- Non-Hispanic White: 51% (range: 34% Yolo, 89% El Dorado).
- Hispanic: 21% (range: 7% El Dorado, 51% Yolo).
- African-American: 13% (range: 1% El Dorado & Placer, 23% Solano).
- Asian & Pacific Islander: 6% (range: 1% Placer, 22% Solano).
- American Indian: 3% (range: 0.4% Placer, 4% Sonoma).
- Other: 7% (range: .3% El Dorado, 8% Sacramento).

Job-Based Insurance²⁰

Rates of job-based coverage in the Northern Central region are among the highest in the state. The Bay Area and Northern Central region share the highest rate of job-based coverage for children. Coverage rates for adults in Northern Central California are second only to the Bay Area.

- Northern Central CA non-elderly adults: 74% (range: 71% El Dorado & Yolo, 82% Placer).
- Northern Central CA children: 75% (range: 71% El Dorado, 83% Placer).
- CA non-elderly adults: 65%
- CA children: 59%

Health Plans

PacAdvantage²¹

PacAdvantage contracts with Blue Shield, Health Net and Kaiser Permanente in the Northern Central region. Each of these carriers offers three HMO plans through PacAdvantage. Health Net also offers two PPOs. Kaiser Permanente offers the least expensive Standard HMO.

²⁰ Brown et al, 2002.

²¹ PacAdvantage. 2002 Rate Information, July 2002, www.pacadvantage.org.

- Average monthly standard HMO premium for 35-year old single adult: \$252
 - Range: \$167 Napa, \$211 El Dorado, Placer & Yolo
 - Least expensive health plan: \$148 Kaiser Permanente in all Northern Central counties
 - Most expensive health plan: \$243 Health Net in El Dorado, Placer and Yolo.
- Average monthly standard HMO premium for 50-year old single adult: \$293
 - Range: \$273 Napa, \$308 El Dorado, Placer & Yolo
 - Least expensive health plan: \$235 Kaiser Permanente in all Northern Central counties
 - Most expensive health plan: \$407 Health Net in El Dorado, Placer and Yolo

Other Small Employer Plans²²

Coverage through small employer plans outside of PacAdvantage is overall most expensive in Napa and least costly in Sonoma and Yolo.

- Average monthly basic HMO premium for 35-year old single adult: \$177
 - Range: \$171 El Dorado, Sonoma & Yolo, \$182 Napa
 - Least expensive health plan: \$143 Blue Shield in El Dorado
 - Most expensive health plan: \$206 Health Net in El Dorado and Napa
- Average monthly basic HMO premium for 50-year old single adult: \$269
 - Range: \$260 Sonoma & Yolo, \$282 Napa
 - Least expensive health plan: \$212 Blue Shield in El Dorado
 - Most expensive health plan: \$345 Health Net in El Dorado and Napa

²²Blue 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.

Individual Health Plans²³

Blue Cross, Blue Shield, Health Net, Kaiser Permanente and PacifiCare offer health plans for individuals and families in the study counties. Individual health plan coverage is least expensive in Sonoma and most costly in Placer.

- Average monthly basic HMO premium for 35-year old single adult: \$224
 - Range: \$209 Sonoma, \$220 Sacramento
 - Least expensive health plan: \$149 Kaiser Permanente in all Northern Central counties
 - Most expensive health plan: \$425 Health Net in Yolo
- Average monthly basic HMO premium for 50-year old single adult: \$314
 - Range: \$292 Sonoma, \$335 Placer
 - Least expensive health plan: \$230 Kaiser Permanente in all Northern Central counties
 - Most expensive health plan: \$425 Health Net in Yolo

²³ 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.