

ITUP's regional overview¹ of Southern California's uninsured covers six counties: Imperial, Los Angeles, Orange, Riverside, San Bernardino and San Diego.

Economy²

Southern California's diversified economy has grown faster than the Bay Area over the past few years due in part to the Bay Area's dependence on the ailing high tech sector.

Industries

Significant industries in the region include agriculture, technology, entertainment, tourism and recreation, manufacturing, government, services, and retail and international trade. These industries account for varying proportions of each county's economy. For example, agriculture is surprisingly significant in San Diego County, the country's tenth largest agriculture producer. San Bernardino County's Death Valley and Joshua Tree National Monuments are popular tourist and recreation attractions. The entertainment industry is a unique component of the Los Angeles County economy. Overall, services (32%), retail trade (17%) and government (16%) dominate employment in the region.

Unemployment (2001)

The regional unemployment rate is slightly lower than that of the state. Riverside, Los Angeles and Imperial Counties, however, have higher rates of unemployment than California as a whole. Imperial County is particularly high due to the cyclical nature of agricultural employment.

- Southern California study counties – 4.9% (range: 3.0% Orange, 21.3% Imperial).
- Statewide – 5.3%.

Demographics

Population³

With the exception of Imperial County, the Southern California counties are among the state's most densely populated counties, far exceeding the populations of California's other populous, urban counties such as Alameda, Santa Clara, Sacramento and San Francisco.

- The total population of the study area is 18.6M, 55% of California residents.
- Range: 142,361 Imperial, 9.5M Los Angeles.
- Population growth between 1990 and 2000 was 13%. (range: 7.4% Los Angeles, 30% Imperial)

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

Southern California's population has greater percentages of minorities, particularly Hispanics and African-Americans, than the state at large. The population of the study counties consists of:

- Non-Hispanic White – 41% (range: 20% Imperial, 55% San Diego)
- Hispanic – 39% (range: 27% San Diego, 72% Imperial)
- African-American – 8% (range: 2% Orange, 10% Los Angeles)
- Asian & Pacific Islander – 11% (range: 2% Imperial, 14% Orange)
- American Indian – 1% (all except Imperial average 1%, Imperial 2%)
- Other⁵ – 10% (range: 13% San Diego, 43% Imperial)
- 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 Southern California study counties, 35% of residents had incomes below 200% FPL. Imperial is one the poorest counties in the state.

- 15% below 100% FPL (range: 10% Orange, 21% Imperial)
- 20% between 100 and 200% FPL (range: 16% Orange, 27% Imperial)

Health Coverage Status

Compared to other regions in the state,⁷ Southern California has the highest rate of uninsured. Medi-Cal participation, Healthy Families enrollment and utilization of county programs (MISP and CMSP) within the region also exceed state averages.

- 18% are uninsured⁸ (range: 15% Orange and San Diego, 20% Los Angeles)
 - State – 15%
- 20% are covered by Medi-Cal⁹ (range: 12% Orange and San Diego, 31% Imperial)
 - State – 19%

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, Sacramento Valley, Bay Area, 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

⁹ Percentage taken of total population. Medi-Cal Policy Institute. *California County Data*, Jan. 2003, www.medi-cal.org

- 2.5% are covered by Healthy Families^{10 11} (range: 2.3% San Diego and Los Angeles, 3.5% Riverside)
 - State – 2.2%
- 6.0% use county health programs¹² (range: 2.1% Imperial, 8.7% Los Angeles)
 - State – 4.7%

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

There is a correlation between rates of poverty and of the uninsured within the study counties. Poorer counties tend to have higher rates of uninsured. However, a direct correlation does not exist. For example, Imperial County, the poorest county of the study region, reportedly has a lower rate of uninsured than Los Angeles County. We think this may be a data error in the numbers of uninsured in Imperial.

The correlation between poverty and Medi-Cal participation is much more direct as rates of Medi-Cal participation increase with poverty. There is not, however, such an apparent relationship between poverty and Healthy Families enrollment; this may be an indicator of the comparative success in enrollment efforts. The greatest disparity, however, is found between rates of poverty and utilization of county programs, either MISP or CMSP. This disconnect could be due to reporting differences among the counties and differences in the design of county programs. Orange County, however, had a high rate of county program utilization given its low rate of poverty in the region.

Community Clinics¹³

Non-profit free and community clinics provide a large volume of care to the uninsured. Within the study counties, there are 291 community clinics,¹⁴ including 35 Planned Parenthood facilities and 3 Indian Health Centers. Approximately 55% of community clinics are in Los Angeles County. Imperial has the fewest number of community clinics, six.

Utilization

Community clinics in the study counties provided a total of 3.9 million visits, including 2.2 million uninsured visits (56% of total visits).

- California's uninsured average 2 outpatient visits annually.

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

¹¹ In comparison, CHIS data reported 16.9% 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 2000-2001*, CMSP Governing Board, September 2002.

¹³ Office of Statewide Health Planning and Development. *Annual Utilization Report of Primary Care Clinics*, 2002 www.oshpd.states.ca.gov.

¹⁴ Dental community clinics are not included.

- The region's community clinics provided **.8** uninsured visits per uninsured county resident (range: **.2** San Bernardino and Riverside, **1.5** San Diego).
- The uninsured accounted for 57% of clinic visits (range: 28% Imperial, 72% Orange).
- Medi-Cal patients accounted for 28% of visits (range: 19% Orange, 48% Imperial).
- County programs accounted for the greatest proportion of uninsured visits, 30% (range: 11% San Diego and Riverside, 44% Los Angeles).
- Family Pact patients accounted for the second largest proportion of uninsured visits, 22% (range: 13% San Bernardino, 40% Riverside).

Patient Revenue

Community clinics' patient revenue for the study counties totaled \$305.1M. Their uninsured patient revenue totaled approximately \$144M or 47% of clinics' patient revenues.

- Uninsured revenues accounted for 47% of patient revenue (range: 20% Imperial, 63% Orange).
- Medi-Cal revenue accounted for 37% of patient revenue (range: 24% Orange and Riverside, 56% Imperial).
- Among the uninsured, county programs accounted for the greatest proportion of clinics' uninsured revenues, 41% (range: 14% San Diego, 60% Los Angeles).
- Family Pact patients accounted for the second largest proportion of uninsured revenue, 27% (range: 13% Imperial and San Bernardino, 63% Riverside).

Other Revenue

Clinics also receive revenues from grants and contracts. These sources totaled \$177.7 million for community clinics (range: \$3.5M Imperial, \$96.9M Los Angeles), and represented 37% of total clinic revenue for the study counties.

- Federal grants and contracts totaled 12% of clinic revenue (range: 3% Orange, 44% Riverside).
- State grants and contracts totaled 5% of clinic revenue (range: 2% San Bernardino and Orange, 12% Imperial).
- County and local grants and contracts totaled 6% of clinic revenue (range: 0% Riverside, 13% Orange).
- Private grants were 5% of clinic revenue (range: 2% San Bernardino and Riverside, 9% Orange).
- Other grants and contracts totaled 3% of clinic revenue (range: 0% Imperial, 3% Los Angeles and San Bernardino).
- Donations were 6% of clinic revenue (range: 0% Imperial, 16% Orange).

Community Clinics' Funding from the County

County funding for free and community clinics' care to the uninsured was strongest in Los Angeles County, which has a §1115 waiver to help pay for this care, and weakest in Riverside and San Bernardino Counties, where the clinic structure is less developed than elsewhere in the region.

Hospitals¹⁵

Hospital information reported to OSHPD was reviewed for fiscal year 2001. In all study counties, uninsured county indigent patients accounted for low percentages of hospital services while Medi-Cal patients accounted for a large share of hospital services. Uninsured county indigent patients were disproportionate users of emergency room services in many of the counties, but accounted for surprisingly small shares of inpatient days. In some counties, Medi-Cal patients accounted for very large shares of ER visits, while in others their use was comparatively low.

Inpatient Days

- The county indigent accounted for 3% of inpatient days (range: 2% San Diego and Orange, 4% all other counties).
- Medi-Cal patients accounted for 28% of inpatient days (range: 19% Orange, 35% San Bernardino).

ALOS

The average length of inpatient stay for the study region was 5.6 days (range: 3.7 Imperial, 6.0 Los Angeles).

- County indigent patients averaged 5.3 inpatient days (range: 4.1 San Bernardino, 5.6 San Diego)
- Medi-Cal patients averaged 6.3 days (range: 3.1 Imperial, 7.9 San Diego).

Outpatient Visits

- The county indigent accounted for 6% of outpatient visits (range: 1% Imperial, 9% San Bernardino and Los Angeles).
- Medi-Cal patients accounted for 19% of outpatient visits (range: 13% Orange County, 34% Imperial).

Emergency Room Services

- The county indigent accounted for 7% of ER visits (range: 2% San Diego and Orange, 10% Los Angeles and San Bernardino).
- Medi-Cal patients accounted for 25% ER visits (range: 13% Orange, 52% Imperial).

¹⁵ Office of Statewide Health Planning and Development. *Hospital Annual Financial Data, FY 2001-02*
www.oshpd.ca.gov

Reimbursed and Uncompensated Care to the Uninsured

- Uncompensated bad debt and charity care for the six study counties totaled \$625.1M, accounting for 3.1% of total net patient revenues for the region (range: 2.8% Orange and Los Angeles, 5.4% Imperial), a decline from 3.4% in 2002. These percentages were typically lower in those counties with public hospitals.
- OSHPD reported county reimbursements to hospitals totaling \$838.3M, 4.7% of net patient revenues (range: 1.6% San Diego, 5.5% Los Angeles). In general, counties with public hospitals had higher rates of county reimbursed care to the uninsured.

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 Imperial County's indigent residents are treated in San Diego County facilities, the CMSP data for Imperial County would report these hospital days and the OSHPD data for San Diego hospitals would also report the visit. 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 visits per 1000 uninsured so it is possible to compare hospital use by county patients between counties.

Inpatient Days per 1000 Uninsured

- OSHPD: 111 days per 1000 (range: 65 Imperial, 132 Los Angeles)
- MICRS/CMSP: 83 days per 1000 (range: 51 San Diego, 151 Imperial)
- Total difference between data reporting sources: 28 days per 1000
- Smallest data reporting discrepancy: 5 days, Orange
- Largest data reporting discrepancy: 86 days, Imperial

Emergency Room Visits per 1000 Uninsured

- OSHPD: 94 visits per 1000 (range: 29 San Diego, 159 San Bernardino)
- MICRS:¹⁶ 102 visits per 1000 (range: 27 Orange, 144 San Bernardino).
- Total discrepancy between reporting sources: 8 visits per 1000
- Smallest reporting discrepancy: 1 visit, Los Angeles
- Largest discrepancy: 71 visits, San Diego

County Spending/Hospital Reimbursement

With the exception of Orange 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 the 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: \$838.3M (range: \$2.4M Imperial, \$636.5M Los Angeles)
- MICRS/CMSP: \$1.0B (range: \$14.1M Imperial, \$752.2M Los Angeles)
- Total difference between reporting sources: \$165.7M
- Smallest reporting discrepancy: \$11.7M, Imperial
- Largest discrepancy: \$115.7M, Los Angeles

Gross DSH

- OSHPD reported gross DSH: \$1.3B (range: \$1.8M Imperial, \$860.4M Los Angeles)
- DHS reported gross DSH: \$1.3B (range: \$6.7M Imperial, \$789.5M Los Angeles)
 - Imperial, Orange and San Diego Counties do not have a public hospital and therefore do not receive any County DSH.

County Reported Spending and Care for the Uninsured¹⁷

Imperial County reported the highest rate of inpatient and outpatient hospital access and San Bernardino County reported the highest rates of ER use.

Number of Days or Visits Per 1000 Uninsured

- Inpatient days: 83 per 1000 (range: 51 San Diego, 151 Imperial)
- Outpatient visits: 957 per 1000 (range: 264 Riverside, 1,711 Imperial)
- ER visits: 102 per 1000 (range: 27 Orange, 144 San Bernardino)

¹⁶ Average for MISP counties only. CMSP does not report ER visits.

¹⁷ Medically Indigent Care Reporting Systems (MICRS). *County Health Care Program Expenditures for Medically Indigent FY 2000-01*.

Expenditures as Percentage of Total

Imperial County reported the highest percentage of spending on inpatient services.

- Inpatient: 50% (range: 41% San Diego, 79% Imperial)
- Outpatient: 41% (range: 24% Imperial, 52% Orange)
- ER: 7% (range: 3% Orange, 12% San Bernardino)

Expenditures in Dollars

- Inpatient: \$475.6M (range: \$5.8M Imperial, \$369.4M Los Angeles)
- Outpatient: \$410.7M (range: \$1.8M Imperial, \$322.2M Los Angeles)
- ER: \$70.1M (range: \$1.3M Orange, \$48.1M Los Angeles)

Uninsured County Spending

Spending on the uninsured per uninsured county resident was highest in Imperial and lowest in Orange.

- Total: \$1.0B (range: \$14.1M Imperial, 752.2M Los Angeles)
- Per uninsured county resident: \$338 (range: \$121 Orange, \$580 Imperial).

Net Public Health Spending¹⁸

Net public health spending per county resident was highest in San Diego County.

- Total: \$306.8M (range: \$14.9M San Bernardino, \$143.5M Los Angeles).
- Per county resident: \$19 (range: \$10 San Bernardino, \$32 San Diego).

Funding For County Health¹⁹

Funding Per County Resident

Los Angeles and Imperial Counties were at the top in four of the five funding categories.

- Realignment: \$44 (range: \$32 Orange, \$97 Imperial).
- Proposition 99: \$2 (range: \$1 all but LA, \$4 Los Angeles).
- Net County DSH:²⁰ \$16 (range: \$0 San Diego, Orange County and Imperial, \$23 Los Angeles and San Bernardino).
- County Match: \$11 (range: \$2.0 San Diego, \$19 Los Angeles).
- Total funding: \$74 (range: \$39 Orange, \$103 Imperial).

¹⁸ Office of County Health Services. *County Health Services Budget/Actual Data, FY 2001-02*. Imperial data was not available.

¹⁹ Office of County Health Services. *Final Maintenance of Effort Calculation, Fiscal Year 2001-02; Rural Health Services Program Allocations, FY 2002-03; California Healthcare for Indigents Program Allocations, FY 2002-03*

²⁰ Office of County Health Services. *SB 855 – Actual Payments and Transfers County and Non County Hospitals FY 2001-02, April 2003*

Funding Per Uninsured County Resident

Imperial received the most realignment funding per uninsured county resident. San Bernardino received the most net county DSH per uninsured county resident. Los Angeles made the largest county contribution per uninsured county resident. Orange had the least funding per uninsured county resident.

- Realignment: \$250 (range: \$206 Riverside, \$508 Imperial).
- Proposition 99: \$12 (range: \$4 Imperial, \$15 Los Angeles).
- Net County DSH: \$87 (range: \$0 San Diego, Orange and Imperial, \$143 San Bernardino).
- County Match: \$65 (range: \$12 San Diego, \$94 Los Angeles).
- Total funding: \$414 (range: 253 Orange, \$544 Imperial)

DSH Distribution²¹

San Bernardino hospitals had the most DSH funding per uninsured county resident. Among the three counties with public hospitals, Los Angeles private hospitals received the greatest percentage of DSH funds.

- Total Net DSH: \$664.3M (range: \$2.3M Imperial, \$415.5M Los Angeles).
- Total Net DSH for county hospitals: \$259.0M (range: \$0 San Diego, Orange and Imperial, \$199.6M Los Angeles).
- Total net DSH for non-county hospitals: \$405.4M (range: \$2.3M Imperial, \$215.9M Los Angeles)
- Total net DSH per uninsured county resident: \$224 (range: \$96 Imperial, \$295 San Bernardino).

²¹ Office of County Health Services, April 2003.

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. Healthy Families outreach program efforts to Hispanics appear to have been comparatively successful.

Ethnicity	Percent of Uninsured ²²	Percent of Medi-Cal Enrollment ²³	Percent of Healthy Families Enrollment ²⁴	Percent of County Indigent Patients ²⁵
Non-Hispanic White	24%	24%	11%	14%
Hispanic	59%	54%	63%	51%
African-American	NA*	15%	3%	10%
Asian & Pacific Islander	NA*	4%	12%	6%
American Indian	NA*	NA	.2%	.4%
Other ²⁶	NA*	NA	11%	16%

Ethnicity of Community Clinics Patients

Ethnicity	Percent of Community Clinic Patients ²⁷
White	59%
African-American	7%
Asian & Pacific Islander	6%
American Indian	1%
Other	27%

Ethnicity	Percent of Community Clinic Patients
Hispanic	60%
Non-Hispanic	35%
Unknown	5%

²² Age 0-64. California Health Interview Survey, 2001.

²³ Medi-Cal Policy Institute. *Medi-Cal County Data Book*, Jan. 2003.

²⁴ Managed Risk Medical Insurance Board, August 2003, www.mrmib.ca.gov

²⁵ Medically Indigent Care Reporting System (MICRS). *Unduplicated Count of County Indigent Patients By Race and Ethnicity, FY 2000-2001*.

* Insufficient sample size does not allow for statistically significant results.

²⁶ "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.

²⁷ Office of Statewide Health Planning and Development, 2002, www.oshpd.states.ca.gov

Uninsured

- Non-Hispanic White: 24% (range: 20% Los Angeles, 35% San Bernardino).
- Hispanic: 59% (range: 47% Orange, 85% Imperial).
- African-American, Asian & Pacific Islander, American Indian and other: NA²⁸

Medi-Cal

- Non-Hispanic White: 24% (range: 16% Imperial, 37% Riverside).
- Hispanic: 54% (range: 40% San Diego and Riverside, 70% Imperial).
- African-American: 15% (range: 2% Imperial, 18% San Bernardino).
- Asian & Pacific Islander: 4% (range: 1% Riverside, 14% Orange)
- American Indian and other: NA

Healthy Families

- Non-Hispanic White: 11% (range: 3% Imperial, 18% Riverside).
- Hispanic: 63% (range: 62% Los Angeles, 79% Imperial).
- African-American: 3% (range: .7% Orange, 4% San Bernardino).
- Asian & Pacific Islander: 12% (range: 2% Imperial, 16% Orange and Los Angeles).
- American Indian: 0.2% (range: 0.1% Orange and Los Angeles, 0.8% Imperial).
- Other: 11% (range: 10% Orange, 14% Imperial).

Community Clinic Patients

- White: 59% (range: 10% Imperial, 62% Los Angeles).
- African-American: 7% (range: 1% Orange, 10% San Bernardino and Los Angeles).
- Asian & Pacific Islander: 6% (range: .5% Imperial, 12% Orange).
- American Indian: 1% (range: .3% Imperial and Los Angeles, 13% Riverside).
- Other: 27% (range: 22% Los Angeles, 88% Imperial).
- Hispanic: 60% (range: 43% Riverside, 86% Imperial).
- Non-Hispanic: 35% (range: 13% Imperial, 53% Riverside).
- Other: 5% (range: 1% Imperial, 6% San Diego).

County Indigent

- Non-Hispanic White: 14% (range: 11% Los Angeles and Orange, 34% San Bernardino).
- Hispanic: 51% (range: 38% Riverside, 82% Imperial).
- African-American: 10% (range: 2% Imperial, 30% Riverside).
- Asian & Pacific Islander: 6% (range: 0.6% Riverside, 9% Orange).
- American Indian: .4% (range: 0.1% San Bernardino, 2% Riverside).
- Other: 16% (range: .4% Imperial, 50% Orange).

²⁸ Sample sizes in all but LA County are insufficient for statistically significant results.

Public Managed Care

Medi-Cal Managed Care Market Share²⁹

- Local Initiatives: Los Angeles (60%), Riverside (71%) and San Bernardino (71%).
- County Organized Health System (COHS): Orange (100%, CalOptima).
- Geographic Managed Care: San Diego (38%, Community Health Group – largest of seven plans).
- Fee-for-Service only: Imperial

Healthy Families - Community Provider Plans' Market Share³⁰

- Community Provider Plans: 27% (range: 14% Los Angeles, 93% Imperial)

Job-Based Insurance³¹

Job-based coverage in Southern California was slightly below the state average and substantially below the state average in Imperial County.

- Southern CA non-elderly adults: 62% (range: 50% Imperial, 67% Orange and San Diego).
- Southern CA children: 50% (range: 42% Imperial, 62% San Diego).
- CA non-elderly adults: 65%
- CA children: 59%

²⁹ Medi-Cal Policy Institute. *California County Data*, Jan. 2003, www.medi-cal.org

³⁰ Managed Risk Medical Insurance Board. *Healthy Families Program Subscribers Enrolled in Community Providers Plans by County*, August 2003, www.mrmib.ca.gov

³¹ Brown et al, 2002.

Health Plans

PacAdvantage³²

Coverage through the PacAdvantage Purchasing Pool was most expensive in Imperial and least costly in Los Angeles.

- Average monthly standard HMO premium for 35-year old single adult: \$206 (average range: \$187 Los Angeles, \$254 Imperial).
 - Least expensive health plan: \$166 for Universal Champion in Los Angeles.
 - Most expensive health plan: \$313 Health Net in Imperial.
- Average monthly standard HMO premium for 50-year old single adult: \$334 (average range: \$293 Los Angeles, \$407 Imperial).
 - Least expensive health plan: \$267 Universal Champion in Los Angeles.
 - Most expensive health plan: \$524 Health Net in Imperial.

Other Small Employer Plans³³

Coverage through small employer plans outside of PacAdvantage was most expensive in Imperial and least costly in Orange and Los Angeles.

- Average monthly basic HMO premium for 35-year old single adult: \$180 (average range: \$170 Orange, \$210 Imperial).
 - Least expensive health plan: \$153 Health Net in Los Angeles.
 - Most expensive health plan: \$234 Blue Cross in Imperial, Riverside, San Bernardino and San Diego.
- Average monthly basic HMO premium for 50-year old single adult: \$281 (average range: \$271 Los Angeles, \$301 Imperial).
 - Least expensive health plan: \$240 Blue Shield in Riverside, San Bernardino and San Diego.
 - Most expensive health plan: \$324 Blue Cross in Imperial, Riverside, San Bernardino and San Diego.

³² PacAdvantage. *2003 Rate Information*, July 2003, www.pacadvantage.org.

³³ Aetna. *Small Business Solutions*, April 2003; Blue Cross of California. *Small Group Sales and Enrollment Guide*, April 2003; Blue Cross of California. *Monthly Rates for Small Group Medical, Dental and Basic Term Life Plans*, March 2003; Blue Shield of California. *Group Health Plans - Summary of Benefits and Provisions*, April 2002; Blue Shield of California. *Group Health Plans - Monthly Rates*, May 2003; Health Net. *Plans and Rates - Small Business Group Plans*, July 2003; Kaiser Permanente. *Traditional Plan for Small Business - Southern California*, Jan. 2003; Kaiser Permanente. *Traditional Plan for Small Business Rates - Southern California*, July 2003.

Individual Health Plans³⁴

Individual health plan coverage was least expensive in Los Angeles and most costly in San Bernardino.

- Average monthly basic HMO premium for 35-year old single adult: \$245 (range: \$235 Los Angeles, \$252 San Bernardino).
 - Least expensive health plan: \$186 Kaiser in all counties.
 - Most expensive health plan: \$327 Health Net in Imperial, Riverside, San Bernardino and San Diego.
- Average monthly basic HMO premium for 50-year old single adult: \$332 (range: \$322 Los Angeles, \$339 San Bernardino).
 - Least expensive health plan: \$262 Blue Shield in Los Angeles.
 - Most expensive health plan: \$384 Health Net in San Diego and Orange.

³⁴ Blue Cross of California. *Individual and Family Health Programs*, Feb. 2003; Blue Cross of California. *Monthly Rates for Individual and Family Medical and Life Plans*, April 2003; Blue Shield of California. *Health Plans for Individuals and Families-Summary of Benefits and Provisions*, July 2003; Blue Shield of California. *Monthly Rates for Individuals and Families*, July 2003; Health Net. *Individual and Family Coverage - Summary of Benefits and Provisions of Coverage*, July. 2003; Health Net. *Monthly Rate Guide - Individual and Family Plans*, August 2003; Kaiser Permanente. *Personal Advantage 2003 Benefits*, Jan. 2003; Kaiser Permanente. *Personal Advantage 2003 Rates - Southern California*, Jan. 2003; PacifiCare. *Benefits Summary – Individual HMO Plans*, July 2003; PacifiCare. *Monthly Premiums for Individual Plans*, July 2003.