Mini summit II - Public Health and Primary Care at Ground Zero of Health Reform

Robert Harmon, MD, MPH
Director, Duval County (FL) Health Dept.
Presented to Sixth Annual Medicaid Congress
Washington, DC, June 14, 2011
Mini Summit II: 1:15 pm
The Role of Local Health Departments in the New Medicaid

- Robert Harmon, MD, MPH, Director, Duval County Health Dept., Jacksonville, FL
- Uma Ahluwalia, MSW, Director, Montgomery County Dept. of Health & Human Services, Rockville, MD
- Phred Pilkington, DPA, CEO & Director of Public Health, Cabarrus Health Alliance, Kannapolis, NC
Mini Summit II: 2:15 pm
Community Health Centers on the Front Lines

Anita Monoian, CEO & President, Yakima Neighborhood Health Services, Yakima, WA
Mini Summit II: 2:25 pm
Oral Health in Community Health Centers for Medicaid and the Uninsured

Mark Doherty, DMD, MPH, CCHP, Executive Director, DentaQuest Institute, Westborough, MA
1:15 pm Session Overview

- Data from NACCHO 2008 and 2010 profiles of local health departments
  - Primary care and other clinical services
  - Medicaid
  - Health IT
- Comments on the impact of the Affordable Care Act
- Case studies from two local health departments
  - Montgomery County, MD
  - Cabarrus Health Alliance, NC
- Q&A
Response Rate, Total Number of LHDs in the Study Population, and Number of LHDs Completing Questionnaire, by Size of Population Served

<table>
<thead>
<tr>
<th>Size of Population Served</th>
<th>Response Rate</th>
<th>Total LHDs</th>
<th>LHDs Completing Questionnaire</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt;25,000</td>
<td>76%</td>
<td>1,200</td>
<td>912</td>
</tr>
<tr>
<td>25,000–49,999</td>
<td>85%</td>
<td>586</td>
<td>501</td>
</tr>
<tr>
<td>50,000–99,999</td>
<td>91%</td>
<td>414</td>
<td>376</td>
</tr>
<tr>
<td>100,000–249,999</td>
<td>92%</td>
<td>331</td>
<td>303</td>
</tr>
<tr>
<td>250,000–499,999</td>
<td>86%</td>
<td>132</td>
<td>114</td>
</tr>
<tr>
<td>500,000–999,999</td>
<td>97%</td>
<td>91</td>
<td>88</td>
</tr>
<tr>
<td>1,000,000+</td>
<td>95%</td>
<td>40</td>
<td>38</td>
</tr>
<tr>
<td>Total</td>
<td>83%</td>
<td>2,794</td>
<td>2,332</td>
</tr>
</tbody>
</table>

*Source: 2008 National Profile of Local Health Departments*
Percentage of LHDs and Percentage of U.S. Population Served, by Size of Population Served

<table>
<thead>
<tr>
<th>Size of Population Served</th>
<th>Percentage of U.S. Population Served</th>
<th>Percentage of all LHDs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Small (&lt;50,000)</td>
<td>12%</td>
<td>64%</td>
</tr>
<tr>
<td>Medium (50,000–499,999)</td>
<td>41%</td>
<td>31%</td>
</tr>
<tr>
<td>Large (500,000+)</td>
<td>46%</td>
<td>5%</td>
</tr>
</tbody>
</table>

Source: 2008 National Profile of Local Health Departments

N=2,794
Percentage of LHD Jurisdictions with Other Health Services Provided by Governmental Agencies

- Oral Health
- Home Healthcare
- Comprehensive Primary Care
- Behavioral/Mental Health Services
- Substance Abuse Services

*Provided by other agency only, not LHD.
Selected agency combinations only; does not include all possible combinations.

Source: 2008 National Profile of Local Health Departments
### Percentage of LHDs Providing Other Health Services, by Size of Population Served

<table>
<thead>
<tr>
<th>Service</th>
<th>All LHDs</th>
<th>&lt;25,000</th>
<th>25,000–49,999</th>
<th>50,000–99,999</th>
<th>100,000–499,999</th>
<th>500,000+</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oral Health</td>
<td>29%</td>
<td>20%</td>
<td>24%</td>
<td>33%</td>
<td>43%</td>
<td>57%</td>
</tr>
<tr>
<td>Home Healthcare</td>
<td>25%</td>
<td>28%</td>
<td>25%</td>
<td>26%</td>
<td>18%</td>
<td>11%</td>
</tr>
<tr>
<td>Comprehensive Primary Care</td>
<td>11%</td>
<td>7%</td>
<td>9%</td>
<td>16%</td>
<td>16%</td>
<td>25%</td>
</tr>
<tr>
<td>Behavioral/Mental Health Services</td>
<td>9%</td>
<td>5%</td>
<td>9%</td>
<td>12%</td>
<td>13%</td>
<td>27%</td>
</tr>
<tr>
<td>Substance Abuse Services</td>
<td>7%</td>
<td>4%</td>
<td>7%</td>
<td>8%</td>
<td>9%</td>
<td>24%</td>
</tr>
</tbody>
</table>

*Source: 2008 National Profile of Local Health Departments*
Mean Percentage of Total LHD Revenues from Selected Sources, by Size of Population Served

<table>
<thead>
<tr>
<th>Size of Population Served</th>
<th>Local</th>
<th>State Direct</th>
<th>Federal Pass-Through</th>
<th>Federal Direct</th>
<th>Medicaid and Medicare</th>
<th>Fees</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt;25,000</td>
<td>25%</td>
<td>19%</td>
<td>15%</td>
<td>18%</td>
<td>11%</td>
<td></td>
</tr>
<tr>
<td>25,000–49,999</td>
<td>25%</td>
<td>20%</td>
<td>17%</td>
<td>16%</td>
<td>11%</td>
<td></td>
</tr>
<tr>
<td>50,000–99,999</td>
<td>25%</td>
<td>21%</td>
<td>17%</td>
<td>16%</td>
<td>12%</td>
<td></td>
</tr>
<tr>
<td>100,000–499,999</td>
<td>25%</td>
<td>23%</td>
<td>19%</td>
<td>10%</td>
<td>12%</td>
<td></td>
</tr>
<tr>
<td>500,000+</td>
<td>27%</td>
<td>24%</td>
<td>19%</td>
<td>6%</td>
<td>9%</td>
<td>8%</td>
</tr>
</tbody>
</table>

n=1,629

Source: 2008 National Profile of Local Health Departments
Mean Percentage of Total LHD Revenues from Selected Sources, by Type of LHD Governance

![Bar Chart]

Source: 2008 National Profile of Local Health Departments

*Note:* This chart illustrates the distribution of total LHD revenues from various sources, categorized by the type of LHD Governance (Unit of Local Government versus Unit of State Health Agency). The chart includes data on Local, State Direct, Federal Pass-Through, Federal Direct, Medicaid and Medicare, and Fees. The sample size is 1,629.
Percent of LHDs that assessed the gaps in access to medical, dental, and behavioral healthcare services in their jurisdiction in the past year (n=509, NACCHO 2010 Profile)

- Did not assess gaps in any of the three healthcare services: 35%
- Assessed gaps in behavioral healthcare: 32%
- Assessed gaps in dental healthcare: 47%
- Assessed gaps in medical healthcare: 55%
Percent of LHDs that addressed the gaps in access to medical, dental, and behavioral healthcare services through direct provision of these services in their jurisdiction in the past year (NACCHO 2010 Profile)

- Direct provision of none of the three healthcare services: 53%
- Direct provision of behavioral healthcare services: 13%
- Direct provision of dental healthcare services: 27%
- Direct provision of medical healthcare services: 38%
Percent of LHDs that implemented strategies to increase accessibility of existing medical, dental, and behavioral healthcare services in their jurisdiction in the past year (n=507, NACCHO 2010 Profile)

Increased accessibility of none of the three services: 34%
Increased accessibility of behavioral services: 27%
Increased accessibility of dental services: 38%
Increased accessibility of medical services: 58%
Percent of LHDs that implemented strategies to target medical, dental, and behavioral healthcare needs of underserved populations in their jurisdiction in the past year (n=506, NACCHO 2010 Profile)

- Targeted none of the three healthcare needs of underserved populations: 34%
- Targeted behavioral healthcare needs of underserved populations: 22%
- Targeted dental healthcare needs of underserved populations: 38%
- Targeted medical healthcare needs of underserved populations: 57%
Percent of LHDs with specific level of awareness or activity by information technology area (NACCHO 2010 Profile)
Primary Care Coverage by County Health Departments in Florida – March, 2011

- CHD is only safety net for primary care = 13/67 (19%, all rural)
- CHD primary care programs needed for capacity = 25/67 (37%, 3 metros)
- CHD not directly providing primary care = 29/67 (43%, 4 metros)

*CHD has FQHC grant (8)
Question:
Is Health Reform a Threat or an Opportunity for Local Health Departments?

Answer:
Yes.
Affordable Care Act: New LHD Roles and Functions to Consider

• Expanded role in Medicaid enrollment and in outreach and enrollment for state health insurance exchanges
• Expanded role in case management
• Enhanced role as health data and information experts for the community
New LHD Roles and Functions to Consider (cont)

• Collaborate with non-profit hospitals to conduct community health needs assessments required by IRS
• Develop new business models to bill or contract for services
• Develop a public entity FQHC
Affordable Care Act: New Partnerships to Consider

• Convene partnerships for population-based prevention, including the engagement of new partners in policy development
• Pursue relationships with groups forming Accountable Care Organizations
• Establish new arrangements with FQHC’s for co-location of services, referrals, and/or purchase of services
Contact Information

- [www.naccho.org](http://www.naccho.org)
- [robert_harmon@doh.state.fl.us](mailto:robert_harmon@doh.state.fl.us)
- Phone 904-253-1010