

Adventist Health

Priority Area Overview



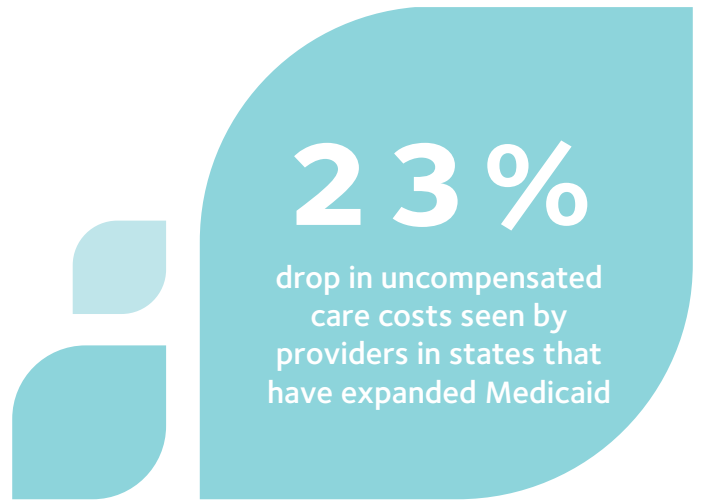
Access to Care

Access to care pertains to a person's ability to access needed health or social services. Interventions may include any effort that contributes to the improvement of a community's ability to obtain health or social services.

IMPLICATIONS

Health: Access to care impacts one's overall physical, social, and mental health status and quality of life. Barriers to accessing health services leads to unmet health needs, delays in receiving appropriate care, inability to get preventive services, financial burdens and preventable hospitalizations.

Cost: With the expansion of coverage under the ACA, providers in states that expanded Medicaid are seeing reductions in uncompensated care costs. For example, between 2013 and 2015, total uncompensated care costs for hospitals (including charity care costs and bad debt) dropped from \$37.3 billion to \$28.7 billion, a \$8.6 billion or 23% drop. Eleven states that expanded Medicaid saw greater declines in uncompensated care than states that have not expanded. Anticipating fewer uninsured and lower levels of uncompensated care, the ACA called for a reduction in federal Medicaid disproportionate share hospitals (DSH) payments; these cuts have been



postponed and are now scheduled to begin in 2020. Financial burden can also affect a patient's quality of life and access to medical care. For example, a patient may not take a prescription medicine or may avoid going to the doctor to save money.

POTENTIAL PARTNERS



PUBLIC HEALTH DEPARTMENTS



HEALTH CENTERS



SCHOOL DISTRICTS



LOCAL SOCIAL SERVICE ORGANIZATIONS



HEALTH PLAN ORGANIZATIONS

SUBJECT-MATTER EXPERTS



PUBLIC HEALTH OFFICER



COMMUNITY CLINIC LEADERSHIP



HOSPITAL UTILIZATION AND CASE MANAGERS

GLOSSARY OF COMMON TERMS:

Coverage: Health insurance coverage helps patients gain entry into the health care system. Lack of adequate coverage makes it difficult for people to get the health care they need and, when they do get care, burdens them with large medical bills

Financial Burdens: Not having health insurance or having a lot of costs for medical care not covered by health insurance

Preventable Hospitalizations: Admissions to a hospital for certain acute illnesses or worsening chronic conditions that might not have required hospitalization had these conditions been managed successfully by primary care providers in outpatient settings.

Timeliness: Timeliness is the health care system's ability to provide health care quickly after a need is recognized.

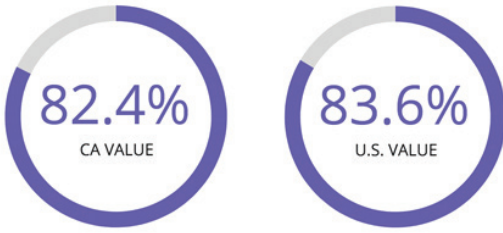
Unmet Health Needs: Needed health care services that were not received for reasons such as financial barriers, long waiting lists and transportation problems.

Usual Medical Source: The particular medical professional, doctor's office, clinic, health center, or other place where a person would usually go if sick or in need of advice about his or her health.

Vulnerable Populations: Groups or communities at higher risk for poor health due to illness or disability status or who experience social, economic, and environmental barriers to health. These are patients who are racial or ethnic minorities, children, elderly, socioeconomically disadvantaged, underinsured or those with certain medical conditions.

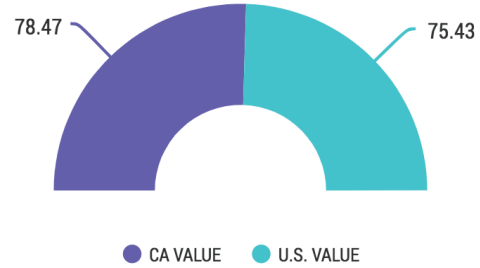
Adults with Health Insurance (5-year)

POM: 2012-2016 | Sources: American Community Survey



Primary Care Provider Rate

POM: 2016 | Sources: County Health Rankings



Providers per population of 100,000

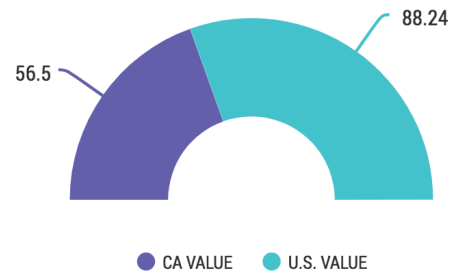
People Delayed or had Difficulty Obtaining Care

POM: 2017-2018 | Sources: California Health Interview Survey



Non-Physician Primary Care Provider Rate

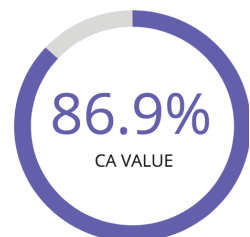
POM: 2018 | Sources: County Health Rankings



Providers per population of 100,000

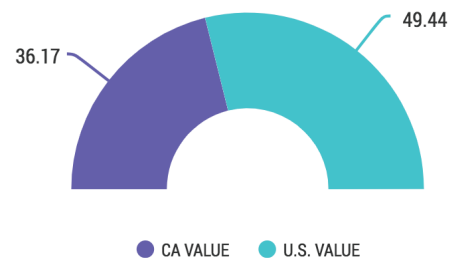
People with a Usual Source of Health Care

POM: 2016-2018 | Sources: California Health Interview Survey



Preventable Hospital Stays

POM: 2015 | Sources: The Dartmouth Atlas of Health Care



Discharges/1,000 Medicare enrollees

Evidence Matters

Explore the County Health Rankings and Roadmaps "What Works for Health" tool to help find policies and programs that are a good fit for your communities health priorities:

www.countyhealthrankings.org/take-action-to-improve-health/what-works-for-health

RESOURCES

Centers for Disease Control and Prevention (CDC): The leading national public health institute of the United States.

County Health Rankings and Roadmaps (CHR&R): The annual County Health Rankings measure vital health factors, including access to care.

Health Resources and Services Administration (HRSA): the primary federal agency for improving access to health care services for people who are uninsured, isolated or medically vulnerable

HealthyPeople.gov: A Federal Government Web site managed by the U.S. Department of Health and Human Services.