Increasing access to care for underserved patients in San Diego

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Barbara Mandel
San Diego County Medical Society Foundation
J. Nwando Olayiwola, MD, MPH, FAAFP
Ashley Rubin, MS
Center for Excellence in Primary Care

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TABLE OF CONTENTS

Specialty Care
Oral Health
Diagnostic Imaging
Pharmacy Care
Hospital Care
Assess Your Practice
References
Webinars
About CEPC

Facilitating Care Integration

Nearly half of adults with health issues report problems with the coordination of their care in the United States. As Community Health Centers (CHCs) and other safety net settings transform into Patient-Centered Medical Homes, their role in the larger medical neighborhood will become pronounced. However, challenges with care coordination are magnified in the safety net setting and continue to be increasingly complex.

In 2014, the UCSF Center for Excellence in Primary Care, with funding from the Blue Shield of California Foundation, completed a comprehensive literature review outlining strategies CHCs use to integrate into the medical neighborhood in the domains of primary care-specialty care, primary care-diagnostic imaging, primary care-pharmacy, primary care-oral health and primary care-hospital care. A conceptual model which was used to classify innovations and strategies for integration can be found in the full report here.

The UCSF Center for Excellence in Primary Care has partnered with the Center for Care Innovations to develop this online resource center. The purpose of this Care Integration site is to disseminate...
Improving Health...

Changing Lives
Our Mission:

To improve community health and wellness, access to care for all, and support for physicians through engaged volunteerism.
Problem:

- No publicly funded hospital or primary care system for uninsured.
- Inappropriate/excess use of Emergency Departments.
- Long-term disability due to lack of care.
1 in 4 Adults in San Diego County do not have health insurance
Project Access San Diego

Pro bono specialty and surgical care to low-income San Diego County residents uninsured, with limited access to care.
Patient Care Management

- Project Access
  - Primary Care Visit
  - Project Access Assessment Screening
  - Diagnostic Imaging / Labs
  - Specialty Care
  - Patient Care Review

Referral
Innovation: Collaboration

- 80+ community clinics
  - Serving as safety net’s safety net

- 625+ volunteer physicians, 10 hospitals and 14 outpatient surgical centers
  - Integrated and “Saturday Surgery Day” models
625+ Physician Volunteers
Ancillary Health Partners

Provide most testing, labs, imaging, physical therapy, prosthetics, medical devices, and other items pro bono.
Innovation: Patient Care Management

- Intensive patient navigation
- Efficient specialty visits
- Enabling services (e.g. translation, transportation)
- 35% patients require surgery/procedures – improved preparation
- Excellent volunteer experience!
The Impact of Project Access San Diego
75% Reduction in Work Days Missed

902 Surgeries and GI Procedures

9,444 Specialty Healthcare Appointments

$8.8 Million in donated care thanks to Physicians, Hospitals, Surgery Centers & Ancillary Healthcare Providers
Patient Criteria & Demographics

- Household income < 350% FPL
  - 90% < 100% FPL
- Uninsured and not eligible for public benefits
- Reside in San Diego County
- Referred by community health center or primary care MD
Key Partners

• Community clinics
  • to reach target population

• Physician volunteers, 14 surgery centers, 10 hospitals, and other healthcare centers
  • to provide pro bono specialty and surgical care
Diagnostic Imaging Key to Care

• #1 Need
• Few providers – decreasing
Program Model

• 100 Access-type programs in US
• Project Access Dallas model
• Unique – both specialty consults and surgeries
• West Coast partners
• Communities Joined in Action
San Diego Has Unique Challenges

- MediCaid not available to undocumented residents
- No County-paid hospital or clinics
- FQHCs cannot provide broad specialty care
Funding Sources

- Corporate and foundation grants
- Individual donations
- Fundraising events
- Limited funding from hospitals
Funding Challenges

- Foundation grants typically focused on new programs
- Individual donations low
- Perceptions re population served
- Need to diversify services
- Make the case to stakeholders
Funding Challenges

• Who do the services benefit, and are they willing to contribute?
Leverage

• Every $1 in contributions leverages $2.30 in pro bono care
The Impact of Project Access San Diego

- Total in physician donated care
- Total patients served

Year 2008: $168,493, 19
Year 2009: $901,421, 183
Year 2010: $2,414,307, 707
Year 2011: $4,700,969, 1,380
Year 2012: $6,485,269, 1,984
Year 2013: $8,043,542, 2,369
Year 2014: $8,987,092, 2,797
Results

• 2,700+ lives improved
• 88% reduction in emergency department visits
• 94% reduction in hospital days
• 75%+ fewer number of work days missed
Results

• Improved Health, Changed Lives
• Healthcare system money saved
• People back to work, contributing to economy
Increasing Capacity

- eConsultSD – 95% do not require face to face visit
- Colorectal cancer screening & diagnostics
- Breast cancer screening
Lessons Learned

• Relationships are key

• Funding can be a challenge

• Physician recruitment and retention are factors for success
Questions

Care Integration Resource Center
For further inquiries about the San Diego Medical Society Foundation Contact:

Barbara Mandel, MBA
Executive Director
San Diego County Medical Society Foundation
858.300.2780 direct
Barbara.Mandel@sdcms.org