



Healthcare Access Initiative Evaluation Brief

The Healthcare Access Initiative has been successful in serving the community by enrolling children into healthcare and assisting families in maintaining coverage and accessing health services.

The Healthcare Access Initiative (HAI) was launched in February 2004 in response to the high number of uninsured children ages 0-5 in San Diego County. Six programs were funded to help increase insurance enrollment, retention, and appropriate utilization of health services. The programs focus on children eligible for Healthy Families or Medi-Cal for Children (Medi-Cal) and on pregnant women eligible for Medi-Cal or AIM (Access for Infants and Mothers program).

Key Aspects of the Initiative

- Contractors work in collaboration with a network of subcontractors and community partners to maximize resources.
- Program staff not only provides insurance assistance but also help families navigate the healthcare system.
- Staff emphasize family support to help ensure that families utilize the services available to them.
- Program staff assists families in maintaining coverage throughout the year.
- Contractors meet regularly to discuss challenges and share emerging best practices, enabling them to improve their programs.

Education

"I teach them the importance of why they have insurance. Most of the time they say, 'Oh my children don't get sick, I don't need insurance.' So I tell them you never know when you're going to have an emergency."

~ First 5 CAAs



Evaluation Highlights

The 2004-05 evaluation findings and highlights were compiled by Harder+Company Community Research from contractor reports, family surveys, and meetings with Program Managers, Certified Application Assistants (CAAs), and Retention Specialists. In addition, a focus group was held with 12 CAAs and a Retention Specialist. Evaluation highlights reveal:

- HAI is successfully providing outreach and support services that increase health insurance enrollment, retention and appropriate healthcare utilization.
- Outreach efforts are innovative and contractors continually seek new opportunities for reaching underserved groups.
- The application assistance offered by contractors is crucial for families who are unable to navigate the centralized state enrollment system.
- Once enrolled, families are better prepared to find their way through the healthcare system and report positive outcomes in terms of linkage to a medical home and healthcare services utilization.

It is clear that the key to the success of the initiative is the commitment of the CAAs to their work and to their clients, a task that is not without challenges.

Outreach to Children and Families

As a result of outreach efforts, 8008 children were enrolled by CAAs during FY 2004-2005. It is important to make a distinction between the terms "assistance" and "confirmed enrollment." The bulk of the CAAs' focus is on assisting with the application process.

Number of People Reached by the Healthcare Access Initiative, FY 2004-2005

Families who received outreach services	84,266
Children 0-5 assisted	12,843
Children 0-5 confirmed enrolled	8008
Pregnant women enrolled	3836

However, the hours invested may not translate into enrollment numbers, because final approval is in the hands of state (Healthy Families) and federal (Medi-Cal) programs. Because CAAs make every effort to ensure that a family is eligible before providing application assistance, the relatively fewer confirmed enrollments are not so much due to eligibility issues but rather to difficult enrollment and processing delays. Thus, during FY 2004-2005, the CAAs assisted in the application process for 12,843 children, but only 8008 were confirmed to be enrolled in a health insurance program.

Healthcare Access Initiative Contractors

Home Start, Inc. (South)

Website Address: www.home-start.org

Phone: (619) 422-9208 x 5462

Neighborhood Health Care (East)

Website Address: www.nhcare.org

Phone: (619) 517-7993

North County Health Services (North Inland)

Website Address: www.nchs-health.org

Phone: (760) 736-8661

SAY San Diego, Inc. (Central)

Website Address: www.saysandiego.org

Phone: (619) 582-9056 x 234

SAY San Diego, Inc. (North Central)

Website Address: www.saysandiego.org

Phone: (858) 974-3603

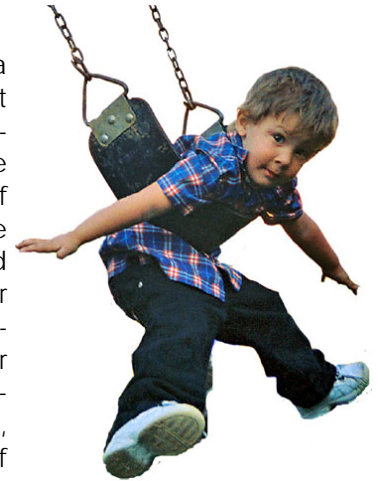
Vista Community Clinic (North Coastal)

Website Address: www.vistacommunityclinic.org

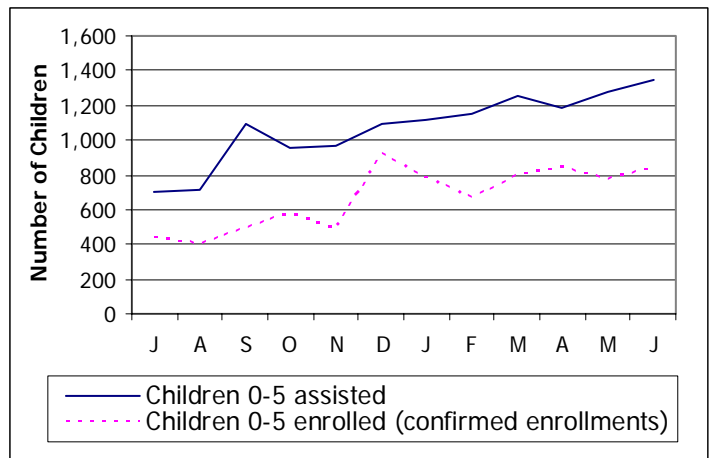
Phone: (760) 407-1220 x 113 or x 126

Health Insurance Enrollment

A look at assistance and enrollment numbers on a monthly basis (see exhibit below) suggests continued gradual increase throughout the course of the fiscal year. The "spike" in assistance and enrollment in September is due to increased outreach and demand for health services (i.e., immunizations, check-ups, etc.) at the beginning of the school year.



Children Assisted & Enrolled by Month (2004-05)



The gap between confirmed enrollments and assisted applications has narrowed over the course of the Initiative. In the early days, only one in three of those assisted were confirmed as enrolled. By December 2004, 50% of those assisted were confirmed enrolled, and since January 2005, an average of 64% of those assisted were confirmed enrolled.

This positive trend indicates that larger system issues (such as start-up problems with the State's eligibility and enrollment web-based system) have seen improvement. However, according to the CAAs, there are still a few areas that need streamlining. It is also important to note there is an inherent information gap, given that CAAs rely on families for confirmation that their application was approved. This challenge is compounded in areas where contractors work with transient populations.

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Making a Difference: Healthcare Access in Action

The Healthcare Initiative contractors collectively tracked data to address five key outcomes. The chart below presents findings based on 2363 follow-up surveys received during FY 2004-2005.

Enrollment Status

At six months, 94.6% of clients reached had maintained the insurance for their child(ren) obtained through the Initiative. At the 12 month follow-up, of the clients contacted approximately 86.2% had children still enrolled. Contractors attribute this high positive response rate to the intensive education and on-going support they provide families. They ensure that parents understand the importance of keeping all their paperwork, carrying provider verification with them, showing their insurance card at the pharmacy, and keeping appointments. Families develop trust in the CAAs and frequently turn to them if they have problems.

Outcome Areas	Results (FY 2004-2005)	
Enrollment status	6-month follow-up*	94.6% of respondents had their child(ren) still enrolled in the insurance provided through the Healthcare Access Initiative.
	12-month follow-up**	86.2% of respondents had their child(ren) still enrolled in the insurance provided through the Healthcare Access Initiative.
	County comparison***	N/A
Linkage to a medical home (proxy indicator)	6-month follow-up	98.0% of respondents could name their child's clinic or doctor.
	12-month follow-up	99.0% of respondents could name their child's clinic or doctor.
	County comparison	97.2% of currently insured children, ages 0-5 in San Diego County have a usual place to go when they are sick or need health advice.
Utilization of health care	6-month follow-up	95.9% of respondents had taken their child to a doctor or healthcare provider in the past 6 months.
	12-month follow-up	97.2% of respondents had taken their child to a doctor or healthcare provider in the past 12 months.
	County comparison	63.2% of currently insured children, ages 0-5 in San Diego County had seen a doctor a year ago or less.
Utilization of dental care	6-month follow-up	59.1% of respondents with children two or older had taken their child to a dentist in the past 6 months.
	12-month follow-up	64.4% of respondents with children two or older had taken their child to a dentist in the past 12 months.
	County comparison	42.6% of children two or older in San Diego county had a dental visit in the past 1-6 months.
Emergency room utilization	6-month follow-up	10.7% of respondents had taken their child to an emergency room in the past 6 months.
	12-month follow-up	19.5% of respondents had taken their child to an emergency room in the past 12 months.
	County comparison	24.6% of currently insured children, ages 0-5 in San Diego county had visited an emergency room in the past 6 months.

* 6-month follow-up: A total of 1854 surveys were received, representing a response rate of approximately 68.2%.

** 12-month follow-up: 507 surveys were received, representing a response rate of approximately 70.6%.

*** County comparison: All comparison data originates from the 2003 California Health Interview Survey, with the exception of data for emergency room utilization, which is from the 2001 California Health Interview Survey.

NOTE: Non-responses include people who could not be reached, have moved, as well as disconnected or wrong telephone numbers. Contractors contacted each family 3 times before considering them non-respondents

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Service Utilization

Survey findings indicate that through the continued support of the CAAs, families are linked to a medical home and utilize health services appropriately.

- 98% of the six-month respondents and 99% of the 12-month respondents could name their child's clinic or doctor, indicating that they knew where to go for their child's healthcare needs.
- 95.9% of the six-month respondents had taken their child to a doctor or healthcare provider, suggesting that they had established a relationship with a provider. At 12 months, the rate rose slightly to 97.2%, which is higher than county comparison data suggesting that the continued support of the CAAs makes a tangible difference for child health prevention outcomes.



Utilization of dental care

At six months, 59.1% of those with children aged two and over (n=975) had taken their child to a dentist, which is higher than county comparison data (44.9%). At 12 months, the Initiative rate is 64.4%. According to the CAAs, the increase in percentage of those who had taken their child to the dentist occurred because many six-month respondents stated they did not know they had coverage for dental services and program staff then took the opportunity to explain the coverage.

Utilization of emergency room

Only 10.7% of six-month respondents and 19.5% of 12-month respondents had taken their child to an emergency room since being enrolled in insurance through a First 5 CAA. Since these figures include legitimate emergency services, it is estimated that the rates of children who went to an emergency room for a non-emergency are even lower. As part of the health education, CAAs discourage families from using emergency rooms unless absolutely necessary by explaining the difference between going to an emergency room and a healthcare provider.

Promising Practices

Contractors funded through the HAI meet on a monthly basis to share their experiences, learn from each other, and discuss how to best meet the needs of their communities. The following summarizes emerging promising practices as shared by program staff and focus group participants:

- **Tailored Outreach:** Strategies that are most responsive to the needs of each community are most successful. They include a combination of the following flyers, word of mouth, visiting clinics and HHS sites, and partnerships with Family Resource Centers (FRCs), HHS sites (Health and Human Services), and WIC (Women, Infants and Children) programs.
- **Persistence:** The key to getting families enrolled has been the consistent follow-up of the CAAs. When families were overwhelmed by the application process, the CAAs walked them through the system and continued to make phone calls until enrollment was confirmed. One CAA explained that his enrollment numbers are high only because of follow-up. He often takes the extra step to call the Consumer Center for Health Education and Advocacy to help expedite a delayed application.
- **Education and Support:** As mentioned earlier, CAAs and retention staff invest in educating their families so they can maximize the use of their coverage.
- **Access to Resources:** Program staff provides transportation, offer bus tokens, and/or make home visits to families who do not have easy access to an enrollment site. They also offer assistance through the Hardship Fund.