

# Strategic Planning Project

## Executive Summary

### **INTRODUCTION**

In early 2006, Methodist Healthcare Ministries (MHM) initiated a study focused on the provision of Primary Care and Dental services for the low-income and uninsured in Bexar County. This project was undertaken in partnership with four other organizations (the Partner Organizations) including:

- University Health System
- CentroMed
- CommuniCare Health Centers
- Daughters of Charity Services of San Antonio

The objectives of the study were:

- 1) To determine the optimal location and configuration of Community Health Clinics.
- 2) To develop a data-driven framework for rationalizing the resource allocation of all Partner Organizations.
- 3) To develop consensus on the coordination and prioritization of facility projects.

For this study, the population with incomes below 200% of the Federal Poverty Line (FPL) was used as a proxy for the target population most likely to be in need of the Partner Organizations' services.

### **KEY FINDINGS**

- There is currently a large unmet need for Primary Care and Dental services for the low income population of Bexar County.
  - Primary Care: In 2005 the Partner Organizations provided over 495,000 visits to residents of Bexar County, however this represents only 40.6% of the 1,219,000 expected visits for the target population.
  - Dental: In 2005 the Partner Organizations provided over 62,500 visits to residents of Bexar County, however this represents only 15.3% of the 409,000 expected visits for the target population.
- Over the next 10 years, very strong growth in demand for Primary Care and Dental services for the low income population of Bexar County is projected.
  - Primary Care: Demand for services is expected to grow by over 225,000 visits, an 18.5% increase. To continue to provide 40.6% of the expected visits, Partner Organizations will need to provide an additional 74,000 Primary Care visits by 2016, a 14.3% increase.
  - Dental: Demand for services is expected to grow by over 70,000 visits, a 17.2% increase. To continue to provide 15.3% of expected Dental visits, Partner Organizations will need to provide an additional 8,100 Dental visits by 2016, a 12.2% increase.
  - To improve the percentage of expected Primary Care or Dental visits significantly, much larger commitments of resources will be required.

## **KEY FINDINGS (continued)**

- The low income population in Bexar County utilizes Primary Care and Dental services at far lower rates than national and regional benchmarks. These lower use rates are driven by the capacity constraints of the Partner Organizations, the resulting limitation of access to healthcare services, and the utilization patterns of the target population. Multiple studies conducted by the Centers for Disease Control and Prevention (CDC), the National Institutes of Health (NIH), the James A. Baker III Institute for Public Policy, and other nationally recognized organizations demonstrate conclusively that underutilization of Primary Care services results in:
  - Higher healthcare costs to the community, both short-term and long-term caused by:
    - Overuse of Emergency Services
    - Less Preventive Care
    - Less Early Detection and Treatment of Disease
  - Lower Quality of Life
- Existing Partner Organization Locations:
  - Positioned well to serve current low income population in most areas
  - Not as well located to accommodate areas where much of future growth is projected to occur

The following report describes in more detail the analysis and findings summarized above.

## **POVERTY LEVELS**

Poverty rates in Bexar County are significantly higher than those of Texas and the United States. As stated above, the population with incomes below 200% of the Federal Poverty Line (FPL) was used as a proxy for the target population.

In Bexar County in 2003:

- 43.0% of the Total Population lived in households with incomes below 200% FPL
- 55.1% of the 0 – 17 Population lived in households with incomes below 200% FPL

Between 2006 and 2016 the 200% FPL population is projected to increase by over 100,000 lives, a 15.3% increase. Poverty is currently most heavily concentrated inside Loop 410 and the southern portions of the county outside the Loop, however the majority of the increases are projected to occur in the northern half of Bexar County outside of Loop 410.

**UTILIZATION RATES**

Utilization Rates were calculated by dividing the Partner Organizations’ visits by the total number of expected visits for the 200% FPL population of Bexar County.

**Primary Care**

In 2005 the Partner Organizations provided 495,040 Primary Care visits to residents of Bexar County which accounted for 40.6% of the expected 1,218,972 Primary Care visits for the 200% FPL population. This utilization varied widely by age cohort as indicated by the table below.

**Bexar County Primary Care Visits by Organization**

Partner Organization	0-17 Years	18 - 64 Years	65+ Years	Total
University Health System	35,348	222,791	28,600	286,738
CentroMed	46,610	75,666	6,086	128,361
CommuniCare	15,438	36,956	4,413	56,807
Methodist Healthcare Ministries	2,665	9,051	1,054	12,769
Daughters of Charity	3,282	6,387	694	10,364
<b>Total - Partner Organizations</b>	<b>103,343</b>	<b>350,850</b>	<b>40,847</b>	<b>495,040</b>
<b>Total Expected Market - 200% FPL</b>	<b>474,479</b>	<b>606,998</b>	<b>137,495</b>	<b>1,218,972</b>
<b>Variance</b>	<b>371,136</b>	<b>256,148</b>	<b>96,648</b>	<b>723,932</b>

The large variances in utilization by age cohort were as expected, primarily because of the insurance coverage which is often available to lower income individuals aged 0 – 17 (e.g. Medicaid, SCHIP) and 65+ (e.g. Medicare).

**Dental Care**

In 2005 the Partner Organizations provided 62,545 Dental visits to the residents of Bexar County which accounted for 15.3% of the expected 408,929 Dental visits for the 200% FPL population. As with Primary Care, this utilization varied widely by age cohort as indicated by the table below.

**Bexar County Dental Visits by Organization**

Partner Organization	0-17 Years	18 - 64 Years	65+ Years	Total
CommuniCare	4,212	18,176	4,190	26,578
CentroMed	8,709	11,086	1,457	21,252
Methodist Healthcare Ministries	2,807	6,826	1,318	10,951
Daughters of Charity	372	2,952	440	3,764
<b>Total - Partner Organizations</b>	<b>16,100</b>	<b>39,041</b>	<b>7,404</b>	<b>62,545</b>
<b>Total Expected Market - 200% FPL</b>	<b>145,970</b>	<b>235,141</b>	<b>27,818</b>	<b>408,929</b>
<b>Variance</b>	<b>129,871</b>	<b>196,100</b>	<b>20,414</b>	<b>346,385</b>

## **DEMAND ANALYSIS**

Demand models were developed to estimate future growth in demand for Primary Care and Dental services for the low-income population of Bexar County. These demand models reflect population growth & aging, poverty rates, and potential changes in utilization rates.

### **Primary Care**

Strong growth is projected for the demand for Primary Care for the 200% FPL population in Bexar County. Incremental demand is estimated at over 225,000 visits between 2005 and 2016, which represents an 18.5% increase.

Merely to continue providing 40.6% of the expected Primary Care visits, the Partner Organizations would have to provide an additional 74,000 visits by 2016, a 14.3% increase from 2005. Approximately 19 additional Primary Care Physicians would be needed by the Partner Organizations to support these incremental visits.

To increase their percentage of expected Primary Care visits to 50.0%, the Partner Organizations would have to provide over 231,000 additional visits by 2016, a 44.8% increase from 2005. Approximately 59 additional Primary Care Physicians would be required to support this number of new visits.

### **Dental Care:**

Similar strong growth is projected for Dental Care, with an incremental demand of over 70,000 visits between 2005 and 2016, a 17.2% increase.

Just to continue providing 15.3% of the expected Dental visits, the Partner Organizations would have to provide nearly 8,100 additional visits by 2016, a 12.2% increase.

To increase their percentage of expected Dental dental visits by only 2.0% to 17.3%, the Partner Organizations would have to provide nearly 15,000 additional visits by 2016, a 31.8% increase.

## **PRELIMINARY RECOMMENDATIONS**

Preliminary recommendations have been developed by the Partner Organizations concerning key issues raised by this study. Although they are still under development, the recommendations address:

- 1) Strategies for cost-effectively providing greater coverage to the low-income uninsured.
- 2) Collaborative opportunities for the Partner Organizations to better serve the community.
- 3) Strategies to improve communications with community stakeholders.