

Access to the Health Care Safety Net

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Supported with funding from California Program on Access to Care

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What is the health care safety net?

- Comprised of public hospital systems, clinics, and hospital emergency departments
- Serves Californians regardless of ability to pay:
 - Uninsured
 - Publicly insured
 - Other vulnerable populations
- Medicaid is major funding source



Why is access to the health care safety net a critical issue?

- Affordable Care Act (ACA) will expand coverage
 - But 3-4 million Californians projected to remain uninsured
- Safety net providers need to prepare
 - Expand to serve newly insured, but maintain access for uninsured
 - Need local-level information on distribution of remaining uninsured



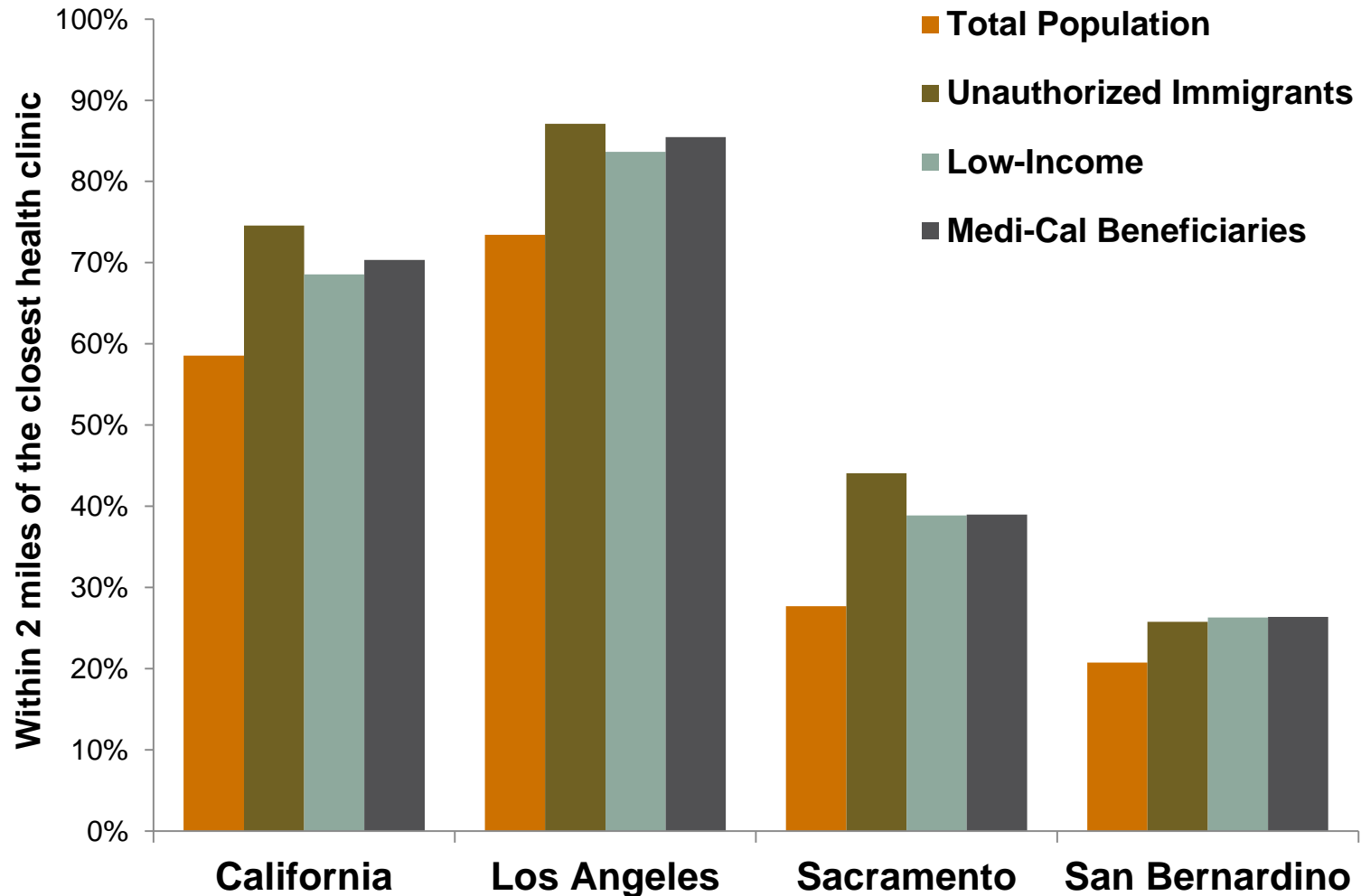
Access can be measured a few different ways

- Simple proximity: How far away is the closest safety net provider?
 - Does not tell you whether people can get care when they need to
- Accessibility measure: How much capacity is available relative to potential demand?
 - Ratio of primary care providers to possible users within a certain distance
- Safety Net Populations: Low-income (under 200% FPL); Medi-Cal beneficiaries; unauthorized immigrants



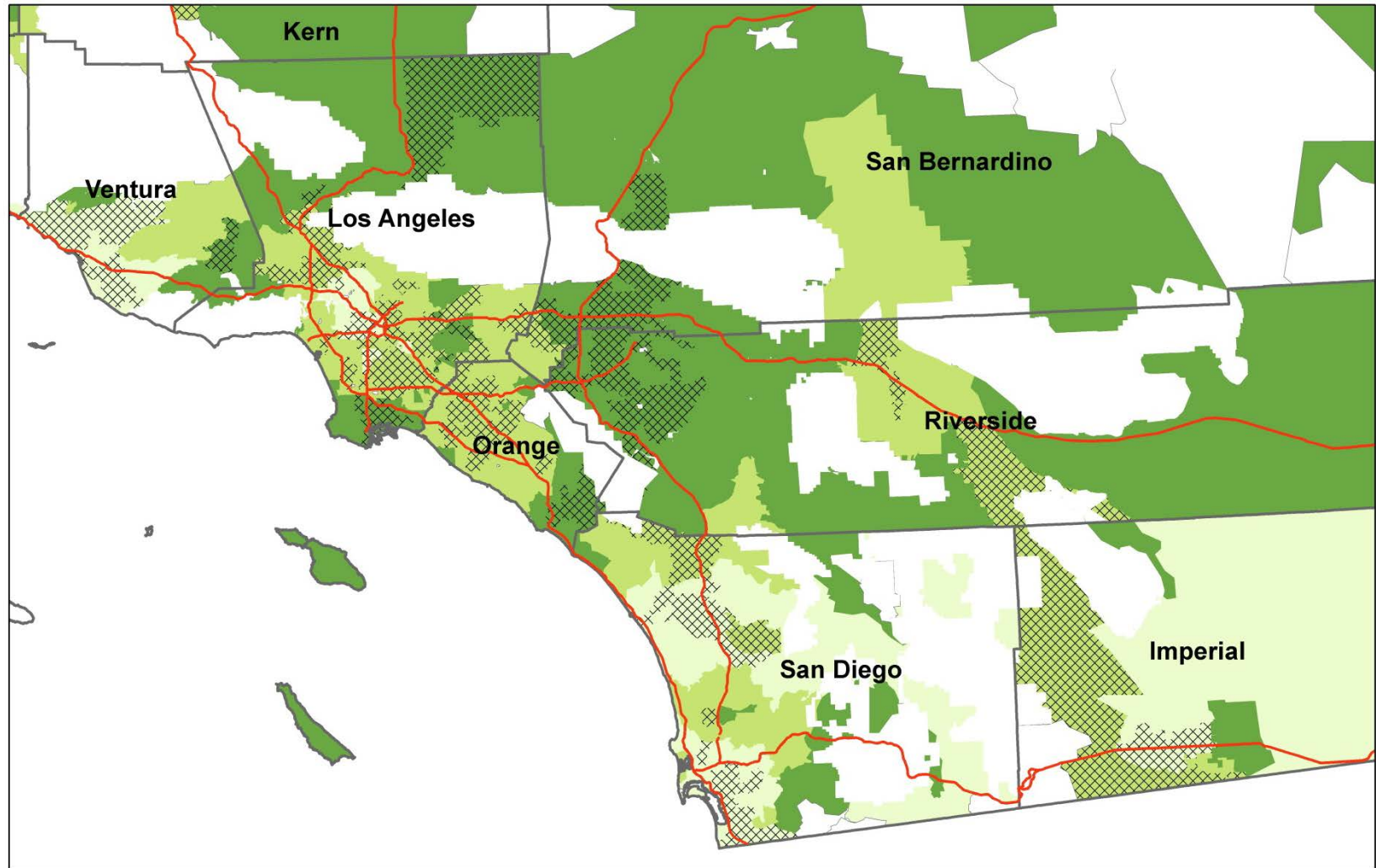
Proximity to clinics is good, but varies across regions

Percentage of population that lives within 2 miles of the closest health clinic



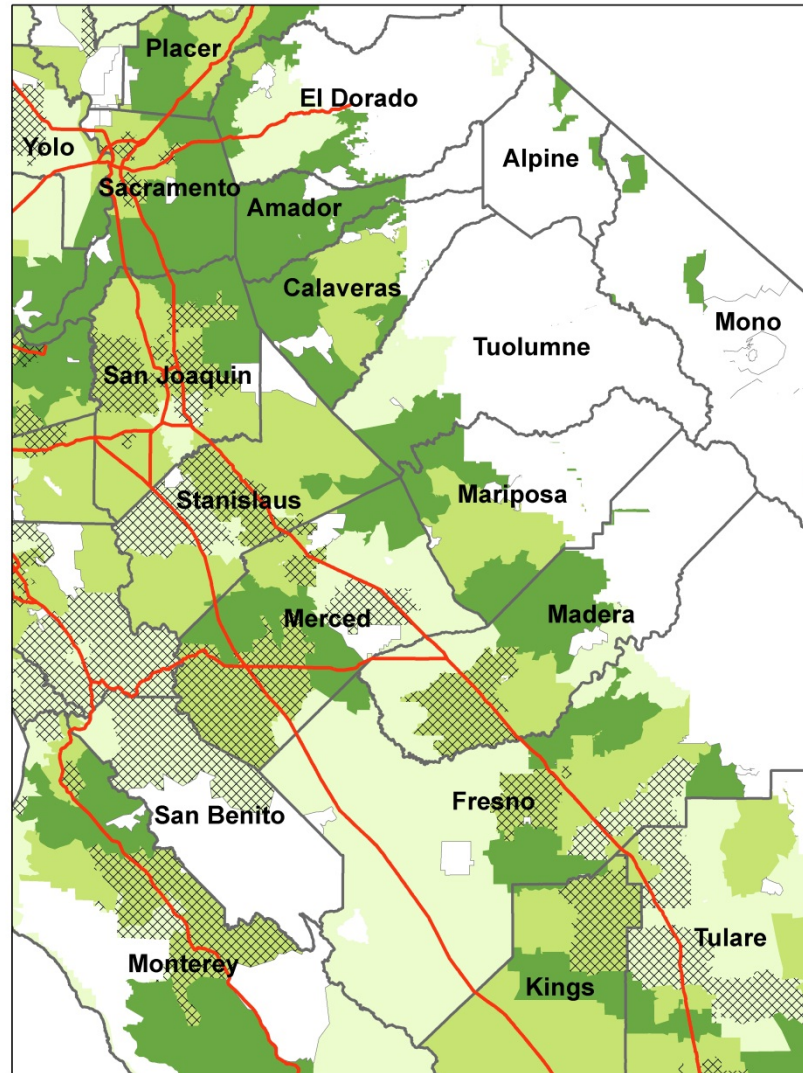
Accessibility measures reveal more local variation

Clinic Access and Unauthorized Immigrant Distribution, Southern California



Accessibility measures reveal more local variation

Clinic Access and Unauthorized Immigrant Distribution, Central California



Proximity and accessibility measures don't tell the whole story

- Depends on planning by local providers and community groups
 - Need to balance “provider of last resort” *and* “provider of first choice” post-ACA
 - Maintain access for groups left out of coverage expansions



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Notes on the use of these slides

These slides were created to accompany a presentation. They do not include full documentation of sources, data samples, methods, and interpretations. To avoid misinterpretations, please contact:

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Thank you for your interest in this work.

