

PHSSR Research-In-Progress Series:

Bridging Health and Health Care

Wednesday, July 1, 2015

12-1pm ET/9-10am PT

**The Affordable Care Act and Childhood
Immunization Delivery in Rural Communities**

***To download today's presentation & speaker bios, see the 'Resources' box
in the top right corner of the screen.***

PHSSR NATIONAL COORDINATING CENTER AT THE UNIVERSITY OF KENTUCKY COLLEGE OF PUBLIC HEALTH

Agenda

Welcome: C.B. Mamaril, PhD, Research Assistant Professor, Health Management & Policy, University of Kentucky College of Public Health

“The Affordable Care Act and Childhood Immunization Delivery in Rural Communities”

Presenter: Van Do-Reynoso, MPH, PhD Candidate, U. of California, Merced and Public Health Director, Madera County, California vdo-reynoso@ucmerced.edu

Commentary:

Paul Brown, PhD, Chair of Public Health; U. of California, Merced
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Susan Buckley, RN, PHN, MPH, Public Health Director, Humboldt County, CA
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Questions and Discussion

Presenter



Van Do-Reynoso, MPH

PhD Candidate, Public Health Services
and Systems Research
University of California, Merced

Public Health Director
Madera County, California

*Pre-doctoral Scholar in Public Health
Delivery, 2014 PHSSR Award*

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PHSSR Bridging Health and Health Care
Research-in-progress Webinar

The Affordable Care Act and
Childhood Immunization Delivery in
Rural Communities: Phase 1

Van Do-Reynoso, MPH
Doctoral Candidate in Public Health
UC Merced

July 1, 2015

Acknowledgements

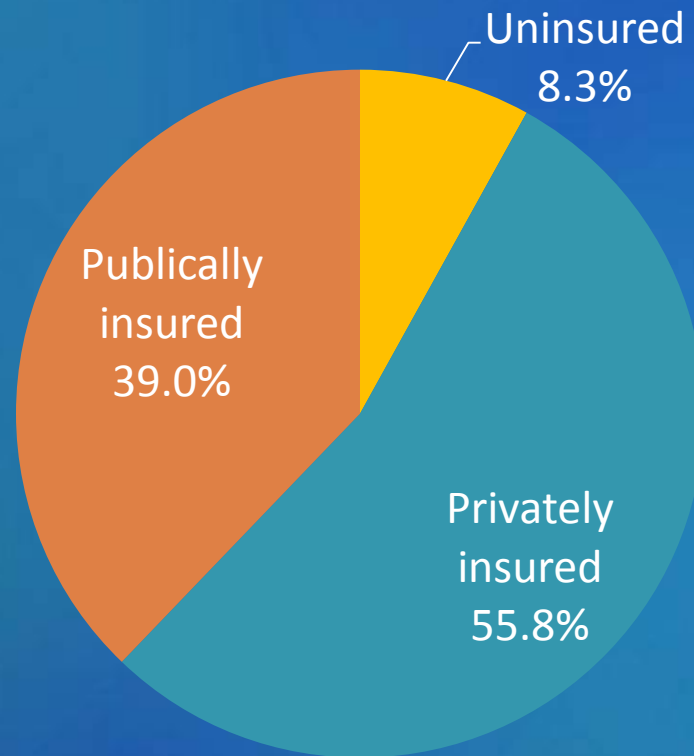
- Robert Wood Johnson Foundation
 - Public Health Services and Systems Research Pre-Doctoral Scholar Award
- PHSSR National Coordinating Center
- Mentor
 - Paul Brown, PhD, UC Merced
- Reference Group
 - Humboldt, Kings, Merced, Nevada, and Fresno Counties

The Affordable Care Act in California

- 2014:
 - ~3 million newly enrolled in Medi-Cal
 - > 1 million newly enrolled in private coverage via Covered California
 - Not yet available gains from employment-based coverage
- 2.7 to 3.4 million people under 65 years will remain uninsured by 2019
 - Up to 50% will be undocumented immigrants
 - Remaining uninsured will be eligible, but unenrolled due to barriers

The Affordable Care Act in CA

- For children 0 -17:



Changing Landscape for LHDs

- 31 out of 58 counties are small and rural
- Responsible for uninsured or indigent population by Welfare & Institution Code 17000
- Decreasing Health Realignment revenues due to economy
- Decreasing state funding for immunization program
- Changing federal vaccine guidelines

New role?

Study Objective

- To evaluate whether the ACA has led to an increase in childhood immunizations in rural counties, and to define the role of the local public health department in this new era.

Methods

- Literature review
 - Reviewed work related to expanded health coverage, immunization rates, health care access rural communities, and changing role of LHDs
 - Identified common themes to address in key informant interviews & survey
- Phase 1: Key Informant Interviews
 - 14 participants in 4 counties
 - Public Health, FQHC, & RHC
 - In-person, via WebEx, and via telephone using semi-structured format
 - Qualitative analysis to find common and unique themes

Results

ACA, Medi-Cal Expansion,
317 vaccines

- Key themes:
 - Increased number of children eligible for services
 - Decrease in publically-insured children seeking immunizations @ LHDs

Results

Immunization rates

- Key themes:
 - Under-insured children face barriers to timely immunizations
 - Personal Belief Exemptions affect rates in local communities

Results

Access to immunizations

- Key themes:
 - Lack of immediate appointments @ community and private providers
 - Community partnerships crucial to improve rates
 - Not an issue for uninsured children

Results

Funding for immunization

- Key themes:
 - Decrease in state funding to LHDs
 - Insufficient reimbursements for private providers
 - Contracts with private insurance available to some LHDs

Results

Cost of immunizations as a barrier

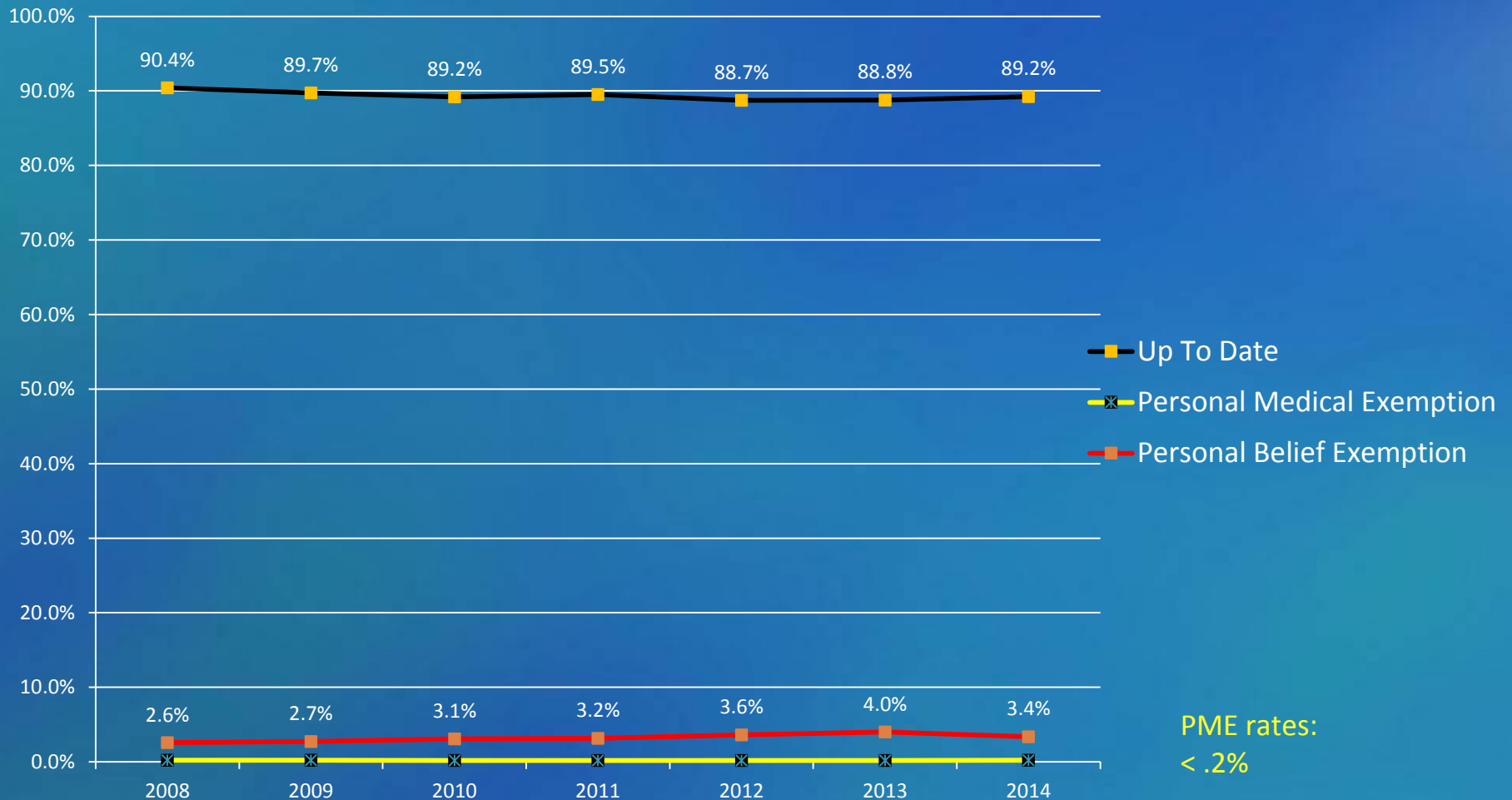
- Key themes:
 - High cost for under-insured children
 - 317s & VFCs readily available for non-insured or publically-insured children

Results

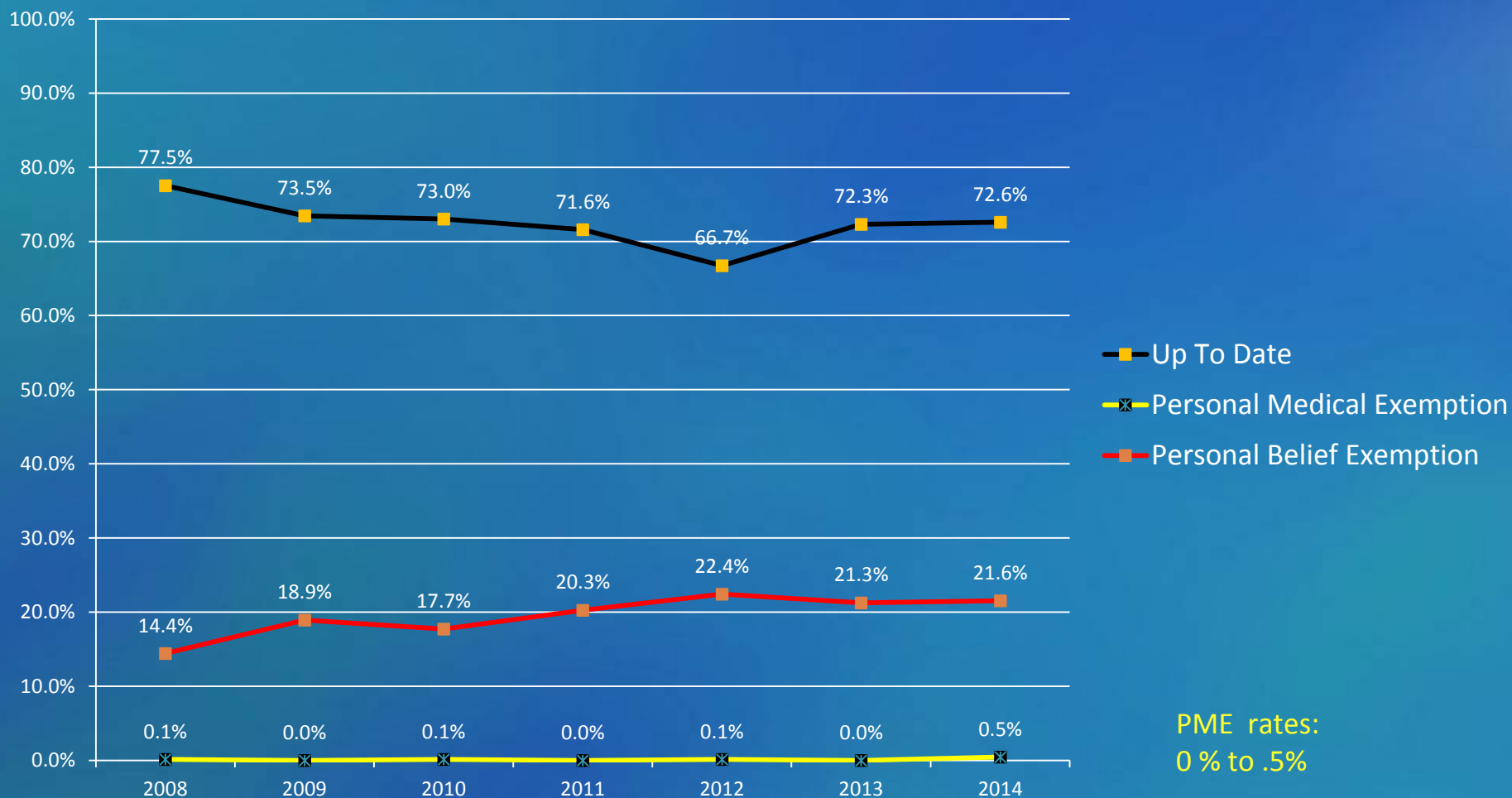
Role of LHDs

- Key themes:
 - Decreased role in direct service for publically-insured children
 - Increased role in outreach and education
 - Maintaining capacity to serve safety net populations
 - Seeking new funding to maintain capacity

Preliminary Findings: Immunization Rates for Kindergarten Entrants in California



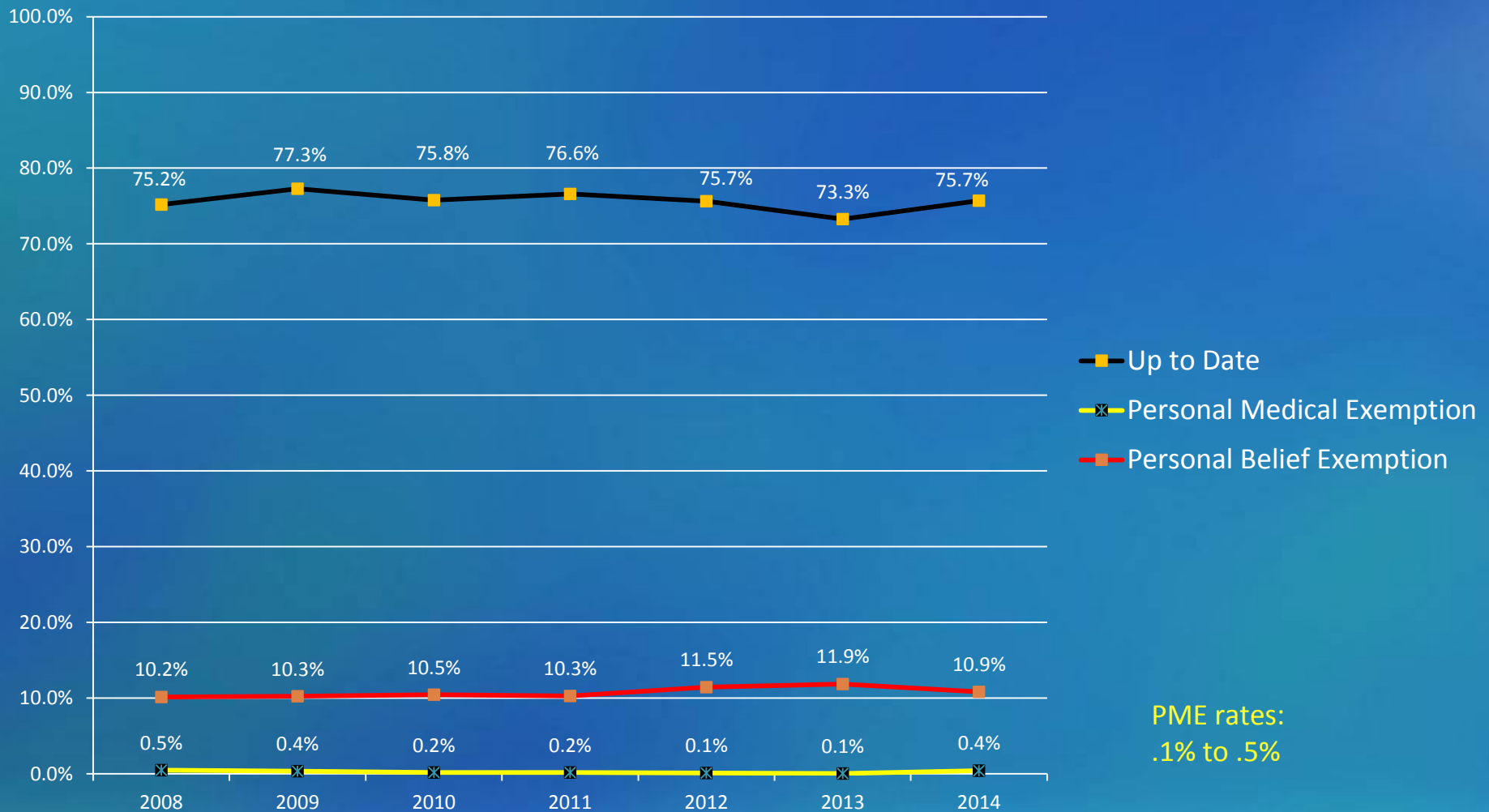
Preliminary Findings: Immunization Rates for Kindergarten Entrants in Nevada County



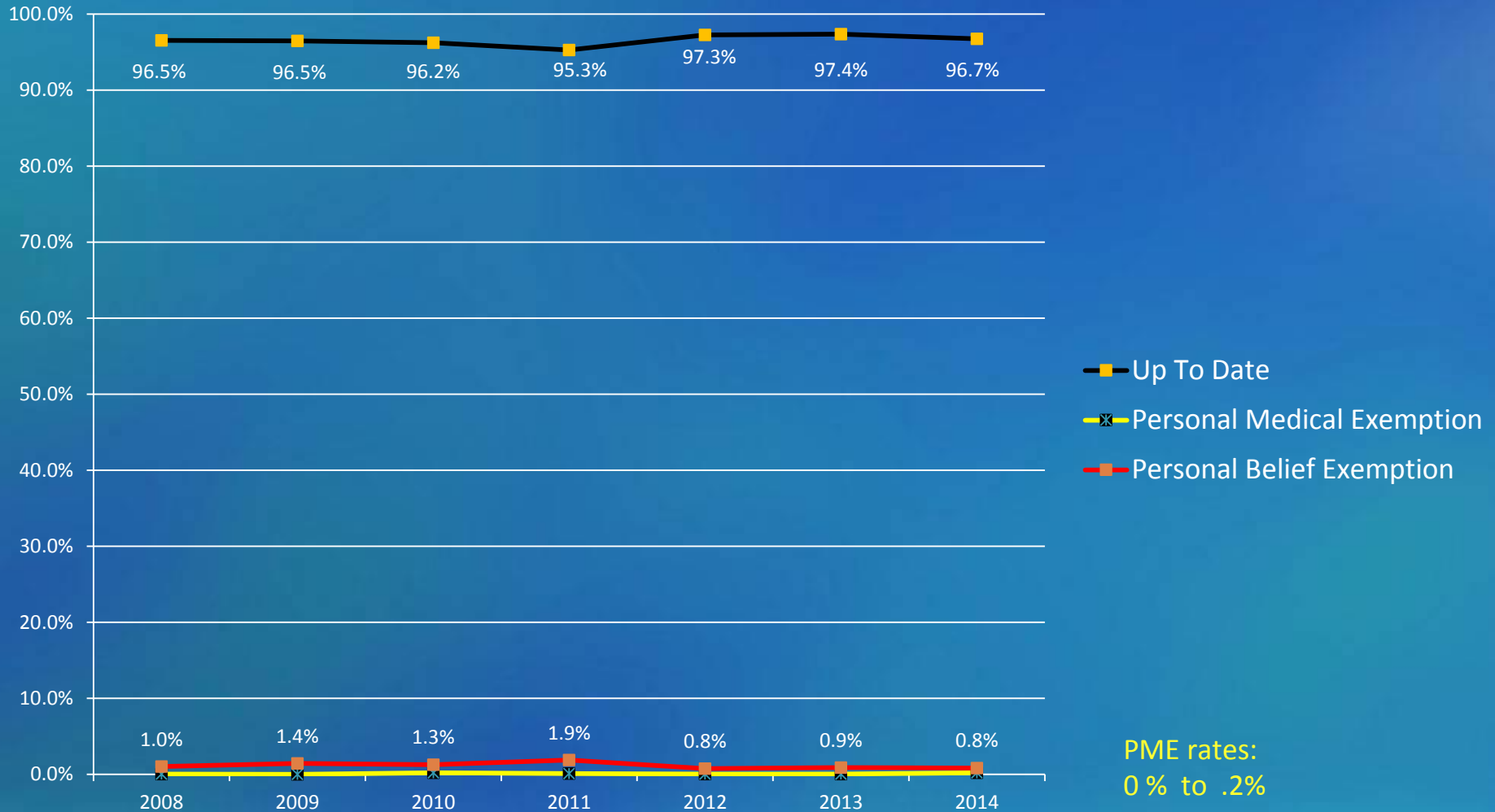
Preliminary Findings: Immunization Rates for Kindergarten Entrants in Shasta County



Preliminary Findings: Immunization Rates for Kindergarten Entrants in Humboldt County



Preliminary Findings: Immunization Rates for Kindergarten Entrants in Kings County



Conclusion

- LHDs concerns:
 - maintaining capacity for mass vaccination efforts
 - maintaining immunization coverage rates by ability to provide IZ to anyone seeking it
- Cost estimations: variance in how LHDs and community providers capture cost information for providing immunization services

Conclusion

- Three new arrangements for LHDs in rural areas:
 - Type 1: Does not provide IZ to children covered by Medi-Cal
 - Type 2: Provides IZ services for privately insured children
 - Type 3: More efforts on referrals to other providers; convening coalitions and workgroups to improve rates

Next Steps: Phase 2

- Analyze immunization database of kindergarten entrants from 2008 to 2014 at zip code level
- Distribute final survey to all 58 jurisdictions
- Analyze survey responses for themes and costs
- Construct predictive model for immunization rates

Final Products

- Cost estimation of childhood immunization services (Fall 2015)
- Presentations & Briefs on survey findings and predictive model to Immunization Workgroups, Public Health Directors, and Health Officers (Winter 2015/Spring 2016)
- Dissertation defense (January 2016)

Commentary



Paul Brown, PhD

Chair, Public Health

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Questions and Discussion

Archives of all Webinars available at:

<http://www.publichealthsystems.org/phssr-research-progress-webinars>

Upcoming Webinars – July and August 2015

Wednesday, July 8 (12-1pm ET)

NATIONAL EVALUATION OF LEADERSHIP STYLES AND OUTCOMES IN LOCAL HEALTH DEPARTMENTS

Laura Cassidy, MS, PhD, Medical College of Wisconsin *(RWJF PHS3 award)*

Wednesday, August 5 (12-1pm ET)

APPLYING FAILURE MODES & EFFECTS ANALYSIS TO PUBLIC HEALTH: BREATHE EASY AT HOME PROGRAMS

Megan Sandel, MD, MPH, FAAP, Boston Medical Center

Margaret Reid, RN, MPA, Director, Healthy Homes and Community Supports,
Boston Public Health Commission *(RWJF PHS3 award)*

Thank you for participating in today's webinar!

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