

DIRECTOR'S REPORT



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Looking into the Crystal Ball

Usually in January I give you a glimpse of what might be hot issues in the coming year. When I look into my crystal ball this year, I see restructure of the Medi-Cal program looming large.

This is a very complicated and extremely important issue, so I'm going to devote this month's message to providing some basic information about Medi-Cal (known as Medicaid at the federal level) and explaining why I am so concerned about the proposed changes, particularly those that may be described by Governor Arnold Schwarzenegger this month when he presents his budget to the Legislature.

The ABCs of Medi-Cal

First, a little information about Medi-Cal. The state's largest and most expensive social safety net, Medi-Cal covers one in six Californians and one in four of the state's children. The annual cost is \$33 billion, with the state's contribution amounting to 15 percent of the total state budget. For every dollar the state spends on Medi-Cal, the federal government provides another dollar.

People often think Medi-Cal is a government health program for low-income people only. In California, seven million low-income and uninsured people are covered by Medi-Cal but low-income families are only about a third of the program's spending. Two out of every three Medi-Cal dollars are spent on the aged and disabled, including people born with severe disabilities, Californians with AIDS and elderly retirees who require long-term care that is not covered by Medicare, the federal health program for senior citizens.

Medi-Cal spending has almost doubled in the past seven years, fueled by rising drug prices and growing enrollment. In just the last three years, the increase has been a staggering \$3 billion. The numbers sound enormous, but in fact, California is 51st among 51 states (plus D.C.) in per capita spending for Medi-Cal recipients.

State proposes to withdraw

For nearly 10 years, we have worked with the state and federal government to keep the

Medi-Cal program intact. There have been changes at various points in the formulas used for reimbursement. But this year is the first time that the program is being proposed for an entire restructuring. It's a huge program and restructuring it is a huge undertaking. It's a process that should be done carefully and thoughtfully to protect the people whose very lives depend on the system working effectively.

Unfortunately, with virtually no conversation with counties and public hospitals, the Governor is on the verge of proposing to remove the state support for Medi-Cal, leaving the counties and individual patients holding the bag.

What the state wants to do, put simply, is to withdraw its reimbursements to hospitals for Medi-Cal expenditures and have the counties use local county funds as a match for federal funds. That sounds OK on the surface, but as costs increase and more uninsured people need services, counties would have to contribute more local money to get more federal money. We know that in the present environment, there are no extra county dollars and health programs have to compete with public safety needs, social services demands and other local issues for



— Dr. Walker

Continued next page

DID YOU KNOW

Last year, Contra Costa Regional Medical Center's Social Services Unit issued **7,940** bus tickets to its patients.

Humanitarian of the Year Award

The Board of Supervisors will announce the "Humanitarian of the Year" award at 11 a.m. Tuesday, January 18 at the Board chambers at 651 Pine Street in Martinez. A reception follows from noon-1 p.m. The award will be presented at the 27th annual "I Have a Dream" birthday commemoration for Dr. Martin Luther King, Jr. The purpose of the award is to honor Contra Costa residents whose work embodies the humanitarian spirit of Dr. King's life and work. Public Health's Deborah Card and Mental Health's Lisa Booker are serving as our representatives to the event planning committee.

Public Hospital Pioneer: José Martin

The California Health Care Safety Net Institute has spotlighted our Reducing Health Disparities Initiative Leader José Martin as a Public Health Pioneer in a publication produced to celebrate its five-year anniversary. According to Wendy Jameson, Director of the Institute, the four people selected as pioneers are leading the way, breaking new ground and establishing centers of excellence across the Institute's four priorities. Those key areas — besides the cultural competence for which José earned his kudos — are linguistic access (which certainly is one of José's priorities), ambulatory care redesign and chronic care management. "These individuals represent the hope and promise of publicly provided health care. They embody the ultimate purpose of the Institute: to support people to do their finest work, allowing them to better meet the health needs of their communities." José serves as a member of the Institutes' Language Access Advisory Committee.

Director's Message Continued...

scarce funds.

There are two kinds of hospital reimbursements that would be affected by the State's proposals. Hospitals are paid for specific services they provide to Medi-Cal patients. In addition, some public hospitals, like ours, are reimbursed at a higher rate to acknowledge that they serve more uninsured patients. This extra funding keeps the safety net hospitals like ours open. The state's share of that supplemental funding would be eliminated as well. Right now, this is the only mechanism by which the federal government has been participating in caring for millions of uninsured in California and the nation, absent a national insurance program.

Not just the hospital funding

The hospital portion is just one element in the state's broader attempt to reform Medi-Cal. They also want to increase co-payments and establish a tiered system of benefits, where you'd get more services only if you paid more. This can set up a potentially dangerous domino effect. According to a recent editorial in the *San Jose Mercury News*, when Oregon increased its premiums (co-payments) for low-income beneficiaries by as little as \$6 to \$20 a month, a study showed that in less than a year, enrollment among the group subject to premiums fell by one half. That results in even more people who are uninsured and whose medical care has to be completely paid for by the county.

Our message: slow down

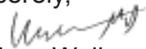
Recently, I went to Sacramento along with officials from other public hospitals, members of counties' Boards of Supervisors, county administrators and representatives of the California State Association of Counties to meet with the State Department of Health Services Director. Our message was simple. We don't think there's been enough time to adequately look at the State's proposal. The state proposal is not good for California, for counties, for Medi-Cal recipients or for the uninsured.

The federal government seems to agree with us and has already expressed concerns about a number of aspects of the plan. We suggested that the state wait at least six months and allow the counties to come up with a proposal that works. We want a plan that will stabilize the safety net and allow for growth in the system to accommodate those seeking care from public health care systems.

We expect that the California Congressional delegation will have to weigh in on the issue and other large states could ally themselves with California. County administrators are getting on board because the proposal will have significant impact on their funding picture. In a few years, thanks to the voter initiative that protects property taxes for counties, we should have more financial security. But that time is still a few years away.

You'll be hearing a lot more about this complex issue from me and the media in the coming months, as the Governor and the Legislature try to find ways to balance the state budget and health officials try to protect the safety net system from gaping holes that will leave residents with no source of health care.

Sincerely,


William Walker, M.D.

The Director's Report is published monthly. Deadline for the February edition is January 18. Publicize your upcoming events and successes by sending information to Julie Freestone at 597 Center Avenue, Suite 255, Martinez 94553, fax 925-313-6219, email: jfreestone@hsd.co.contra-costa.ca.us. The Director's Report is available online at cchealth.org and on the Intranet at cchs.

GOING THE EXTRA MILE FOR SERVICE EXCELLENCE

Honor Roll

Blanca Brossa

*Bi-lingual Marketing Outreach Educator
Contra Costa Health Plan*

For taking the time and being genuinely interested in answering all of my questions when I called your 800 number. She did everything she could to make me feel that I was important and so were my questions.

—Nominated by a member of the public

Wendel Brunner

Public Health Director

For actively supporting Richmond residents' pollution concerns at the Zeneca-Simeon Campus Bay development project and for successfully advocating for involvement of the California Department of Toxic Substances Central. These actions reassured thousands in the South Richmond area.

—Nominated by Juan Reardon, Public Health employee and Richmond resident

Kristina Kutter, MPH

*Senior Health Education Specialist
Fetal Infant Mortality Review Program*

For coordinating a stellar folic acid community campaign. As our newly hired FIMR Project Coordinator, she assumed the task of overseeing this grant-funded project. Due primarily to her successful efforts, we received additional funding to continue the project for a second year. I want to acknowledge her leadership, efficiency and creativity.

—Nominated by Dawn Dailey

Joe Dozier

*Environmental Health Specialist II
Environmental Health*

For participating in a special enforcement team to inspect San Pablo alcohol establishments. The dedication and focus of the group resulted in effective and lasting abatement of long-standing chronic nuisances, unsafe and unsanitary conditions, drug dealing, prostitution, littering and graffiti.

—Nominated by Douglas D. Krathwohl, San Pablo Police Chief

Diana Post-Burnside, RN, MSN

Nursery, CCRMC

For her devotion to duty, talent, caring, charm and contagious enthusiasm that gave comfort to a new mom and her "Thanksgiving" baby. "Your love of babies draws from a deep well of caring and compassion. You make this hospital a fabulous place to have a baby."

—Nominated by a new mom and her Thanksgiving baby

Employee Milestones

Congratulations to these employees who have given us long years of service: Jennifer Huynh, Luisa Petite, Donald Russo, Diana Pleasant, Carolyn Luck, Robin Cobette, Rey Enriquez, Robert Francisco, Jan Millar, Anita DeVera, Elizabeth Garcia, Cheryl Puccio, Denise Peschel (10 years); Sally Alvarez, Consuelo Yu, Brenda Hardeman, Sandra Borman, Lawrence Lewis, Marie-Terese Gibbons, William Swenson, Marcella Hooks, Phillip Clarke, Rebecca Vical, Tonya Brown, Martha Delgado, Margaret Robbins (15); Susan Farley, Laura Johnson, Timothy Tam, Robert Depietro, Benet Moody, Barbara Center, Kelly Garcia, Roberta Bowers (20); Beverly McKinley Cox, Jessie Keyt and Luwanda Hill (25). *(We know there are lots of other dedicated employees with long years of service. Because of space limitations, we are only reporting those with 10, 15, 20 and 25 years.)*

REDUCING HEALTH DISPARITIES

This page brings you news of how the implementation of the CCHS Plan for Reducing Health Disparities is progressing. We spotlight programs addressing health disparity issues and provide information related to enhancing cultural competence.



Ambulance Response and Cultural Issues

For the last year, our Divisions have been working on three key areas identified by Senior Staff that would contribute to reducing health disparities. The three areas are improving linguistic access, implementing educational activities on diversity and cultural and linguistic competence and developing an organizational climate that values patient, client, customer and employee diversity and addresses health disparities. This month we highlight efforts in Emergency Medical Services. Emergency Medical Services (EMS) has little direct patient contact, but oversees all the 911



Left to right: Art Lathrop, Leslie Mueller, Director of Operations, and José Martin

ambulance response in the county. EMS Director Art Lathrop said initially he wasn't sure how the Reducing Health Disparities Initiative (RHDI) related to his program. When he checked the Institute of Medicine report on health disparities, he found it didn't include any discussion of pre-hospital issues like ambulance response. Art said he wondered whether cultural issues might discourage some people from calling 911 when they needed help and whether responding paramedics were encountering cultural issues that might interfere with quality care. Using interns Virginia Nguyen and Jennifer Lind from the School of Public Health at the University of California, Berkeley, and working with RHDI Leader José Martin, staff conducted a literature review, which turned up almost nothing written about the impact of cultural issues on pre-hospital services. The interns also conducted focus groups with the community and interviews with responders. They discovered that most cultures in Contra Costa are familiar and comfortable with 911 but that there are communications issues. Patients don't always know when it's appropriate to ask questions, whom to ask and when to complain. The next step is to develop a training curriculum to help paramedics deal with some of the cultural barriers. The County Fire Department is also interested in the project for their first responders. "I think this may be a first in the nation," says Art. Thanks to American Medical Response for providing gift certificates for community focus group participants and for providing access for paramedics to participate in the survey.



For more information, call Art Lathrop at 925-646-4690.

African American Health Summit Scheduled

Kaiser Permanente is presenting the Second Bay Area African American Health Summit this month in Oakland. The event is titled "Embracing Wellness — Body, Mind and Spirit," with Dr. David Satcher, former U.S. Surgeon General, as the keynote speaker. The conference is scheduled for Friday, January 28 at the Oakland Marriott City Center. The agenda includes: Inequities vs. Disparities; the Bay Area African American Health Initiative; Critical Mass Health Conductors; African American Youth; African American Men; African American Women; Diverse African American Communities (LGBT); Elderly and Emerging Seniors; the Role of Meditation and Deep Relaxation in the Treatment of Major Diseases; the Practice of Meditation for Healing and Freedom of Black Folks; Ending Rage; Blood Sisters — Breaking the Silence about HIV/AIDS; Hip Hop as a Vehicle to Engage Black Youth; and Actions to Support African American Mental Health and Wellness. CEUs will be provided for RNs, MFTs and LCSWs. Registration is \$60.



For more information, visit www.babuf.org or call 510-763-7270.

Unique Program for Pregnant Women at RHC

There's a unique service at the Richmond Health Center that provides pregnant women with support during their pregnancy and even after their babies are born. The Centering Pregnancy program, which is based on a program piloted in the early '90s, to promote self-care and empowerment, brings together pregnant women who have due dates within two months of each other. At regularly scheduled times during their pregnancies, the women come together for 90 minutes to take their own weight and blood pressure, get and chart their urine samples and figure their due dates. Unless there's a problem, they spend no more than five minutes with one of our health care providers, who does a fetal heart rate check and asks a few questions about how things are going. The real draw of the program is the group discussion that offers the women a chance to talk to their peers about common concerns. Six groups, most for Spanish-speaking women, have been conducted by Drs. Krista Farey, Priscilla Hinman and Ann Harvey. Healthy Start staff Ruth Arreguin and Adrienne Gonzalez, RN, and RNs Linda Griffith, Arturo Hernandez and Percy Macaraeg provide a blend of health education, nutrition and clinical services. Remarkable results from a clinical trial were reported last year in the *OB/GYN Journal*, showing an increase in birth weight for newborns whose mothers participated in this kind of program. The approach has been so popular locally that a pediatric group was launched for moms where well-child checks, measuring and graphing growth and group discussions focusing on parenting and child development issues take place.



For more information, call Dr. Krista Farey at 510-231-1325.

Building on Proven Strategies to Address Chronic Disease in Children

Thanks to some new grants, including two from the Environmental Protection Agency (EPA), effective strategies developed by our Public Health Division to address asthma in children will be continued and will be used to address obesity, another important children's health issue. One EPA grant will continue the *Open Airways for Schools* project that was part of the California Asthma Among the School Aged project (CAASA) developed during our three-year grant from The California Endowment. The program, which teaches children how to manage their asthma, will be offered in five elementary schools in West County, one in Martinez, two in the Monument Corridor, one in Pleasant Hill, one in East County and 13 after-school sites in the Mt. Diablo Unified School District. The other EPA grant will fund home visits to children with asthma and their families to teach them self-management skills and provide asthma trigger assessments, trigger abatement and educational materials. Our Community Health Workers will conduct the home visits with support from Public Health Nurses and other clinical care providers and staff. A separate grant from the California Health Care Foundation will help Dr. Diane Dooley, Chief of Pediatrics at CCRMC, work with the Obesity Task Force to implement "Have Fun and Be Healthy," an innovative pediatric obesity intervention program. It builds on lessons learned from the CAASA project's work with medical providers in treating chronic diseases in children.



For more information, call Sally McFalone at 925-313-6242. A preliminary report about the CAASA project and its outcomes is available on the Intranet (type cchs as the address) on the Public Health site.

Get the Word Out: Tax Refunds for Low-Income Residents

Seventy-seven county employees are among 164 people who have volunteered as part of the Earn It! Keep It! Save It! campaign to help low-income Contra Costa families and individuals get tax refunds that are due them. The volunteers are from a range of county agencies, including CCHS. Nearly half of them speak a second language and some speak several languages. They're being trained as tax preparers, greeters and interpreters to work at 12 Volunteer Income Tax Assistance (VITA) sites across the county. Last year, 150 volunteers prepared 1,296 returns, helping families receive \$1,347,552 in federal refunds. The Internal Revenue Service reports there could be as much as \$15 million waiting to be claimed by Contra Costa residents in Earned Income Tax and Child Care credits. You can help get the word out about this exciting program by ordering posters and fliers to distribute to Contra Costa residents.



To order fliers, call Fowzia Younos at 925-313-6823 or email her at fyounos@hsd.co.contra-costa.ca.us. Download the fliers online at cchealth.org.

Special 'Birth' at CCRMC

Contra Costa Regional Medical Center is used to new arrivals in its Labor and Delivery Unit, but there was an exciting arrival *outside* the hospital November 18 that gives CCRMC a capacity it never had before. That day, a modular building arrived by truck from Modesto and was installed on the CCRMC campus along with the giant magnet to be used by the Center's new \$1 million Magnetic Resonance Imaging (MRI) machine. "We had been referring patients out for MRIs," said Darrell Williams, the proud "papa" as manager of the Diagnostic Imaging Department. Darrell, who started with the department in 1973, said CCRMC and the health centers have had to refer well over 1,000 patients a year to other providers to get an MRI. By the end of this month, Darrell and staff will be doing MRIs on site in the 14-by-60-foot new building just west of the Diagnostic Imaging Department.



Photo by Darrell Williams

Board of Supervisors Approve Two Health Policies

The Board of Supervisors approved two new health policies last month. One requires all county vending machines to include provide healthy choices for at least 50 percent of all the food and beverage selections they offer. The policy applies to vending machines located in all county facilities, including courthouses, health centers, CCRMC and community centers. Supervisor John Gioia sponsored the policy. Melody Steeples, from our Community Wellness & Prevention Program, helped draft the standards for healthy foods that are included in the policy. They also identified items that meet the standards and vendors who provide those foods. The second policy allows pharmacies to sell hypodermic needles to people without a prescription. This measure is intended to help prevent the spread of Hepatitis C and HIV. The policy applies to pharmacies in the cities and unincorporated areas of the county. Christine Leivermann, director of our AIDS program, introduced the measure to the Board and provided compelling testimony about the relationship between dirty needles and the spread of HIV.



For more information contact Melody Steeples at 925-313-6839 or Christine Leivermann at 925-313-6786.

Historic Donation to CCRMC

The Contra Costa Regional Health Foundation presented a \$30,000 check last month to Dr. William Walker at a Board of Supervisors meeting. Bette Felton, RN, DrPh, chairwoman of the Foundation's Board of Directors, said it was "the first ever donation by the Foundation, but will not be the last." Also present was Foundation Board Member Doug Anderson. The donation was for equipment needs identified by CCRMC/Health Center staff. Executive Committee members Bette Felton and Steve Roberti and Foundation staff Frank Puglisi are meeting with Drs. Jeff Smith, Steve Tremain and Sonja Sutherland to get input for the Foundation's current strategic planning process.



To donate contact Frank Puglisi at 925-370-5020.

End-of-Life Care Training for Nurses

Nurses spend more time with patients who are facing end-of-life than other health care providers, yet many nurses feel they need more training to provide the comprehensive care needed by those who are at end-of-life. Our CCRMC Education and Training Department and the Hospice and Palliative Care of Contra Costa provided that training to nurses and health workers on January 6 and 7 to improve end-of-life care. The training program was developed by the End of Life Nursing Education Consortium (ELNEC) and consists of nine content modules addressing critical aspects of end-of-life. The training will be offered again on May 19-20 and November 16-17, 2005.



For information about the ELNEC Training Program in May or November, call Marilyn Aiello, 925-370-5200 ext. 4684.



"Because
NO ONE
Should Go Hungry"

Help
Feed Your
Community

Thank you, CCHS employees, for donating 441 pounds of food and enough cash to buy \$12,264 worth of food as part of the County's annual campaign for the Contra Costa Food Bank. Paul Krintz coordinated our effort. To contribute call **1-800-870-FOOD**