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SNAPSHOT: Utilization Trends and Access in Medi-Cal Managed Care

Common misconceptions about California’s Medicaid Program – “Medi-Cal” – question whether the program provides meaningful access to necessary health care services. Our utilization data shows that it does.

California’s 16 local health plans cover 70% of the state’s 10.6 million Medi-Cal managed care enrollees, including 2.1 million of the 3.7 million Californians who gained coverage through the ACA’s Medicaid expansion in 2014. Local plans examined their utilization data and observed key trends that underscore the value of Medi-Cal coverage.

EMERGENCY ROOM USE DOWN

The 2014 Medicaid expansion significantly reduced the rate of ER visits as those who gained coverage began using physician visits and clinics as their primary source of care instead of the ER.

KEY FACTS:

22% Average decline in rate of ER use among local health plans’ expansion members since 2014. Some plans saw rate of ER use decline by over 35%. (Source: LHPC survey of local health plans, July 2017; based on annual ER utilization per 1,000 members.)

80% Medi-Cal beneficiaries use a doctor or clinic – not the ER – as their primary source of care. (Source: CA Health Interview Survey, 2015; California Health Care Foundation, “Medi-Cal Matters”, July 2017.)

In 2016, local health plans provided Medi-Cal beneficiaries:

11.5 million
Primary care visits

2.1 million
Immunizations

3.6 million
Blood pressure prescriptions

2.6 million
Diabetes prescriptions

1.9 million
Asthma prescriptions

9.7 million
Specialist visits



The cost of an ER visit for a non-emergency condition can be five times or more than the cost to see a primary care doctor.
Inland Empire Health Plan

Our employees staff our largest hospital to redirect our members to primary care physicians for appropriate follow-up care.
Kern Health Systems

The decline in ER use is nearly double for members who continuously maintained their Medi-Cal coverage.

Central California Alliance for Health

