



# HealthPAC

Health Program of Alameda County

## August 2012 News Brief

Volume 1, Issue 2

Visit us at: <http://acgov.org/health/indigent/pac.htm>  
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### HealthPAC Quality Improvement (QI) Team

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### HealthPAC 2012-2013 Clinical Goals

- ◆ *Implement and sustain panel management services*
- ◆ *Integrate behavioral health and physical health services*
- ◆ *Improve care transitions*

### HealthPAC clinics are awesome at:

Maintaining a registry

Selection criteria development

Following up on PCP instructions

Participating in learning opportunities

Developing written job descriptions

### We are working to improve:

Medication reconciliation

Staff communication

Standing orders

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**"Data Catcher" Meeting**  
**September 19, 4 pm—6 pm**  
**with Mini Swift, M.D. and**  
**Tory Starr, RN**  
**(specific sites only)**

### SAVE THE DATE!

Care Transitions Training  
September 26

### Fun Fact:

Enrollment in HealthPAC continues to grow and we now have close to 80,000 HealthPAC enrollees!

## Health Care Reform: The Supreme Court upheld the Affordable Care Act

On June 28th, the United States Supreme Court upheld the Affordable Care Act (ACA), which ensures that millions of uninsured individuals have access to timely, affordable and high quality health care services. As you all know, California is leading the way in beginning to implement reform by providing coverage to more than 400,000 uninsured individuals across the state through the Low Income Health Program (HealthPAC for Alameda County). The Low Income Health program allows counties to expand access to health care to low-income residents that in 2014 will be eligible for Medi-Cal or California Health Benefits Exchanges. Based on current HealthPAC enrollment, in 2014, we anticipate that 46% of the HealthPAC population will be eligible for Medi-Cal and 8% will be eligible for the Exchange.

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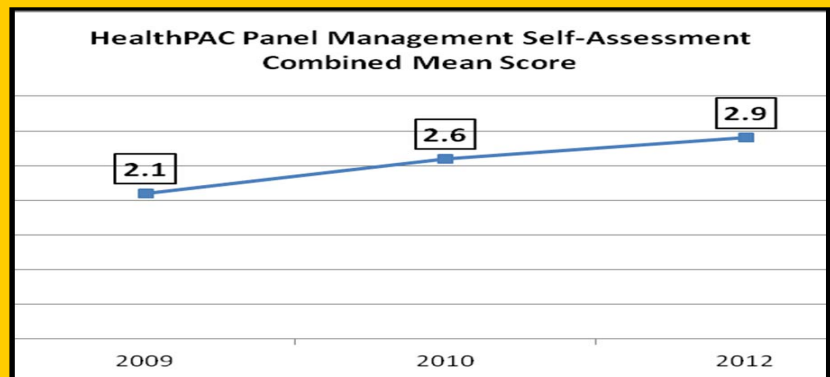
**HealthPAC has population data! Now, what should we do differently with our clients! Every month, HealthPAC collects and analyzes utilization and clinical data on a core set of measures. Several interesting findings include the following:**

- ◆ **The number one diagnosis for ER and avoidable ER use is "issue of repeat prescriptions".**
- ◆ **From October 2011 -December 2011, African Americans accounted for 15% of our enrollees, but 45% of our enrollee population with 3 or more visits to the ER.**
- ◆ **Although they represent a smaller percentage of our enrollees, men account for more ER visits and hospitalizations than women.**

### Panel Management

A strategy to improve chronic disease care that is an organized, population-based, data driven multidisciplinary team approach that uses a disease registry to identify clients' unmet care needs, and gathers summary information for care interventions to communicate with clients.

### Panel management self-assessment scores have improved!



**Our Goal is to reach a score of 3.0, which is considered quality panel management services**