

**HEALTHY
CONNECTIONS
NETWORK**

**ACCESS
TO
CARE**

Health Status of the
Uninsured in Summit County

2003

Preface:

Undeniably the United States has the most technologically advanced medical care system in the world. The system has great capacity to diagnose and treat disease. Life span is increasing at a rapid pace. Unfortunately, many citizens do not benefit from those advances and resources. There are 44 million people, one in five, who are uninsured and do not have access to a regular source of health care. Those without consistent access to primary health care often delay seeking care until they are seriously ill. Many suffer from chronic conditions that cause recurring need for emergency care. Uninsured persons are more likely to come to emergency departments as the first point of contact for health care, since they lack a regular primary care physician. For many, seeking health care results in bankruptcy. Providing late-stage illness care in emergency departments also costs the community. Employers have increased absenteeism and lost productivity. Employers who pay health insurance premiums, insured persons, and health care providers must help bear the cost of uncompensated care. Today, health cost costs and increasing needs are straining the resources of health and social safety net providers who operate with tax funds or charitable donations.

Healthy Connections Network (HCN), formed in 1995, is a 501 (c) (3) non-profit collaborative group. Member organizations represent public and private health and social service providers along the spectrum of primary, secondary and tertiary care. HCN receives funding, executive support and material resources from its founders, Summa Health System, Akron General Health System, Children's Hospital Medical Center of Akron, Summit County Health Department, Akron Health Department, Info Line, Inc., OPEN M, Tuscora Park Health & Wellness Foundation, and The University of Akron College of Nursing. Donations from member organizations of the Board of Trustees and a grant from the Tuscora Park Health & Wellness Foundation also sustain HCN.

In 2000, HCN joined 600 other communities as part of the "Campaign for 100% Access to Health Care/0 Disparities in Health Status," a national initiative of the Bureau of Primary Health Care (BPHC)/Health Resources and Services Administration (HRSA). Members of HCN believe that a coordinated access system for the uninsured can achieve better health outcomes while maximizing the economy of dollars spent for health care. HCN is committed to engaging the public and private sector to create a model that improves access to health care, beginning with primary care access, for those who are uninsured in Summit County. HCN is focused on developing a program to respond to the urgent issue of health care access in Summit County.

*"To have a healthy community with
accessible health care for all in Summit County."*

The Uninsured Aren't as Healthy

Summit County has a population of 542,899. The City of Akron, the urban center of the county, has a population of 217,074. Although the exact reported number of uninsured varies, there are between 68,000 and 70,000 (12.8% of the total population) uninsured persons in Summit County (appendix A). About 22,000 uninsured people are living on incomes at or below 200% of FPG, but above income levels that qualify them for Medicaid. There are 17,882 children under the age of 19 who are uninsured. Most of these children are eligible for the State of Ohio Child Health Insurance

“
I have one life and one chance to make it count for something... I'm free to choose what that something is, and the something I've chosen is my faith. Now, my faith goes beyond theology and religion and requires considerable work and effort. My faith demands-this is not optional- my faith demands that I do whatever I can, wherever I can, whenever I can, for as long as I can with whatever I have to try to make a difference.

-Jimmy Carter

”
Program (S-CHIP), but are not enrolled. Almost three-quarters (74%) of the uninsured are in families

where at least one person is working full time. Ten percent are in families where at least one person works part-time. Lower income jobs often do not provide health insurance coverage or workers cannot pay high employee contributions, co-pays and deductibles associated with employer-sponsored health insurance. Only 16% of the uninsured are in families with no workforce attachment, but those who are unemployed also constitute part of the uninsured population. The unemployment rate in Summit County was 5.9% in February, 2002, an increase of 1.6% since February, 2001. The unemployment rate for the City of Akron, where the greatest numbers of lower income

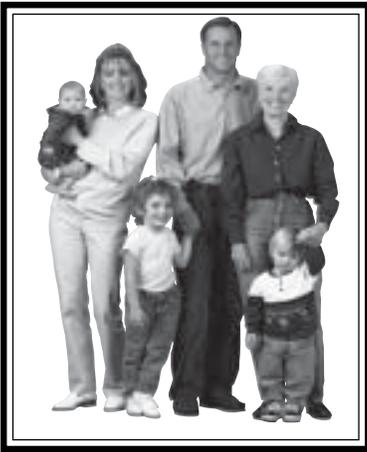
“Mary”

Mary reports that she is unemployed and disabled with chronic asthma, hypertension and, after suffering a heart attack, heart disease.

Her medications cost close to \$500.00 a month and she does not have any health benefits.

She is attempting to secure disability benefits, her bills are mounting and she has been referred to a collection agency.

She uses some of the medical assistance programs but fears they will end one day and she will not be able to secure her life-sustaining drugs.



families are located, was 8.1% in February, 2002, an increase of 2.1% since February, 2001. Like other communities across the nation, the unemployment rate has increased, further increasing the numbers of persons without health insurance. This phenomenon has

affected lower income families at almost twice the rate of higher income families.

Lowest income persons in Summit County, regardless of other factors, die an average of 10.3 years sooner than higher income persons. Local data indicates that significant health disparities exist in Akron's Enterprise Community. The Enterprise Community is a concentrated high poverty area, which includes the downtown, and near north, west and south sides of the city. Akron is one of 65 urban areas in the country, one of three in Ohio, with an Enterprise Community. The death rate is 2.5 times higher than any other citizen group. Death occurs 8.4 years younger for African Americans due to all causes, than in the White population.

Persons who speak a foreign language make up 3.5% (about 19,000) of the county's population. For many of these persons, language and cultural issues, along with lack of health insurance, may affect their ability to connect to and use appropriately the health care resources that exist. For these individuals, support in translation and understanding recommendations of health care providers can improve health outcomes. Even for those whose first language is English, our complex health care system can be confusing. Referral support on how to use the system appropriately and in finding resources to follow physician and health care provider recommendations will improve health outcomes for many.

Compared with insured people, individuals in Summit County without health care coverage are less likely to have a regular source of health care and more likely to receive care in hospital emergency departments. They use primary care services less than persons with health insurance and often postpone

seeking needed health care services. They have more avoidable hospitalizations and worse health outcomes.

The Thin Line of Safety!

Whether or not by design, many organizations in Summit County participate in a loosely connected network to provide critical health and social services for community residents. There is a wide array of support services from which the uninsured seek resources and health care. (appendix B). Info Line, Inc. manages an information referral service to assist callers in identifying appropriate community resources for their needs.

Five hospital emergency departments (Summa Health System at City and St. Thomas Campuses, Akron General Health System, Barberton Hospital, and Cuyahoga Falls General Hospital) most often meet acute health care needs for the uninsured. The hospitals also provide clinic-based care. Two free health care clinics serve about 4,400 people annually (OPEN M and The University of Akron College of Nursing Center for Nursing). Barberton Free Clinic serves an additional 2500-3000 patients per year. A federally qualified health center, Akron Community Health Resources (ACHR), serves about 6000 annually and is partially supported by Akron hospitals and Akron Health Department. Three public health departments (Akron Health Department, Summit County Health Department, and Barberton Health Department) provide targeted clinics for health promotion and treatment of some specific diseases.

Management of chronic health problems, in particular, for the uninsured tends to be fragmented or non-existent. Continuity of care is difficult to accomplish due to lack of coordinated services, lack of available primary and specialty care, and a short supply of ancillary services such as laboratory, X-ray, diagnostic and therapeutics. Availability of medicines, a major contributor to successful management of health care conditions, is a

problem for the uninsured, who often do without needed medications which would keep them well or extend the life span. All of these problems result in recurrence of emergent care needs.

The current system for delivery of health care to the uninsured is not coordinated. It is inadequate to meet the ever-increasing needs. Use of the emergency department as the first point of contact for health care decreases capacity for emergency care and increases the cost of care. In 1999, our hospitals treated 32,000 uninsured patients. Ten percent (3,200) were treated as inpatients. Thirty-six percent (28,800) were treated as

outpatients. Thirty-six percent (11,500) went to emergency departments for primary care. Between 1998 and 2000, the total uninsured hospital caseload has increased from 3.6% to 18% per year. Cost estimates for this uncompensated care at our hospitals are about \$56 million annually and rising.

Safety net providers currently operate with federal and state tax support, philanthropic contributions, donations, and extensive volunteer health provider time. Hospitals fund services such as free or low cost health screenings and ancillary services donated through community safety net providers. Safety net providers have worked

to maximize programs to get free medicines donated by drug companies. This is a time-intensive and complicated process. Many private physicians see uninsured patients free of charge in their offices. But physicians are frustrated by the difficult and time consuming process of trying to get Many persons using the safety net system lack reliable transportation, child care and—most importantly— an understanding of when and how to use the system appropriately. Many lack the personal resources or the understanding of their own health condition that would allow them to follow the health care advice.

A Letter From Our Chairman,

Dear Friends of Healthy Connections Network:

On December 11, 2001, Healthy Connections Network (HCN) held a Town Hall Meeting to raise public awareness about the need to improve access to health care for the uninsured persons living in Summit County. Both providers and consumers of health care met that evening and agreed that there was a pressing need to work toward better health care access for the approximately 70,000 uninsured persons in our county. HCN has developed an access plan targeting working persons living on incomes at or below 200% of Federal Poverty Guidelines. ***Access to Care*** will match patients to volunteer primary and specialty care physicians, link patients to ancillary health and social services, and measure return on community investment. The work that remains is to find local funding sources to initiate and sustain ***Access to Care***, the linking program. We thank all the members of the Summit County community who have already worked hard and provided resources to help bring ***Access to Care*** closer to reality. With your continued support, we will move closer to timely and appropriate access to health care for all residents of Summit County. Achieving the goal of better health for more people for less money will strengthen our community and improve quality of life for all who live here.

Sincerely,
Tracy Carter
Chair, 2003

Addressing The Problem of Access to Health Care

HCN has identified key components, needed resources, and a feasible time frame to implement an uninsured health care access program in Akron/Summit County for those most in need of access to health care. Agreement has been reached by members of the Board of Trustees of HCN on the essential characteristics of the program through an intense collaborative process across agencies and institutions in Summit County. The goal of the proposed project, **Access to Care**, is “to mobilize community resources to connect

uninsured community members to a regular sources of care.” HCN member organizations, such as Asia, Inc., Northeast Ohio African American Health Network, St. Bernard’s Church Health Ministry (Hispanic), Akron Summit Community Action Council, and neighborhood block clubs already exist in geographical areas of high need. They have connection and credibility with local residents and will assist in outreach enrollment.

Evaluation of **Access to Care** will be conducted by HCN in conjunction with InfoLine, Inc. and Summit County Health

Department. Healthy Summit 2010 will management of evaluation data for **Access to Care**.

The HCN Board of Trustees will use data for continuing program evaluation and policy adjustment as the program grows. Results of the initial program will provide a solid basis for future expansion of service to larger segments of the uninsured and underinsured population of Summit County, Ohio.

Elements Of A Solution: Access to Care

Element 1

A referral system will link volunteer primary and specialty care physicians with enrollees for a regular source of health care. Those eligible for the program will include working uninsured adults, and children in those families, with incomes at or below 200% or below of Federal Poverty Guidelines, without access to health insurance.

Element 2

A central registry information system will organize and track provider services. A phantom billing system will track outcomes of service connection and the value of donated care. Patient identification cards, similar to an insurance card, will track the value of volunteer care.

Element 3

Client Services Coordinators will determine eligibility, link participants

with volunteer providers, encourage appropriate use of the health care system through education, link participants to social service supports, and encourage continuity of care access.

Element 4

Provider Service Coordinators will enlist volunteer physicians and providers. They will mentor providers and medical practice managers about patient needs and cultural concerns to encourage productive relationships with patients.

Element 5

Provider Service Coordinators will also maintain and build links to ancillary services such as diagnostics and therapeutics, dental care and pharmacy. Hospitals will provide inpatient services.

Element 6

The central registry will be managed by Info Line, Inc., an agency now managing an excellent social service information referral service and a pharmaceutical access program (MedAssist) funded by United Way of Summit County.

Element 7

Program policies will promote participation by both patients and providers and decrease inappropriate use of the health care system. The program will foster patient education, involvement and accountability.

Element 8

Neighborhood outreach will enlist participants from targeted geographical areas where concentrated numbers of uninsured low-income families live

Conclusion

Summit County has excellent health care resources, but many uninsured residents do not have reasonable, timely access to them. Inappropriate use of the health care system is costly, detracting from the ability of the system to target resources more effectively to improve community health. Members of HCN believe that integrated solutions to health care access for the uninsured can impact positively on community life, preserve health, prevent disease and improve the quality of individual and community life. **Access to Care** is a crucial component of an integrated solution. It will provide a mechanism for leveraging increased local volunteerism, re-targeting existing health care funding, and coordinating to leverage other public local, state and federal health care funding. **Access to Care** can begin when funding sources for its initiation allow. We must combine our efforts, our resources, our knowledge and our vision to create and implement health care access solutions for all people in Summit County.

**Better Health for More People
for Less Money!**

Healthy Connections Network Members

Healthy Connections Executive Committee



Top: Suzanne Hobson -AGMC, Dr. Susan S. Gerberich -HCN, Sue Pierson- Info Line, Fran Rice-Tuscora Park Health & Wellness Foundation

Bottom: Dr. C. William Keck, Bob Howard -CHMCA, Tracy Carter-Summa Health System, Gene Nixon-SCCGHD

Not pictured: Dr. Elizabeth Kinion -The U of Akron, College of Nursing, Center for Nursing, Jon Trainor- AGDF, Darla Hopkins-OPEN-M

**“American is not anything if it consists of each of us.
It is something only if it consists of all of us.”**

-Woodrow Wilson

African American Counseling Team, Mt. Calvary Baptist Church	CHMCA Womens' Board Community Health Center	Summit County Alcohol, Drug Addiction & Mental Health Services Board
Akron Community Health Resources	East Akron Community House (LifeLink)	Summit County Department of Job and Family Services
Akron Dental Society	Family and Children First Council	Summit County Pharmaceutical Society
Akron Department of Planning & Urban Development	Family Services of Summit County	Summit County Children's Services Board
Akron General Health System	Info Line, Inc.	Summit County Combined Health District
Akron Health Department	Kaiser Permanente	Summit County Medical Alliance
Akron Metropolitan Housing Authority	Northeast Ohio African American Health Network	Summit County Medical Society
Akron Public Schools	NEOUCOM	The Medical Society of Greater Akron
Akron Regional Hospital Association	Ohio Department of Health Bureau of Oral Health	The University of Akron College of Nursing
Akron Summit Community Action Council	OPENM	Tuscora Park Health & Wellness Foundation
American Medical Response of Ohio	Planned Parenthood	United Way of Summit County
Asia, Inc.	Siebert Keck Insurance Company	Visiting Nurse Service & Affiliates
Barberton United Way	Semper Care Hospital	
Barberton Health Department	St. Bernard's Church Health Ministry	
Bober, Markey & Fedorovich	Summa Health System	
Buckingham, Doolittle & Burroughs	Summit County	
Caring Communities of Summit County		
Children's Hospital Medical Center of Akron		

ACCESS TO CARE REPORT REFERENCES

1. Census Data for 2000
2. Civilian Labor Force Estimates, Ohio Job and Family Services, Office of Research, Assessment and Accountability, Bureau of Labor Market Information
3. Healthy Summit 2010 Community Assessment Project:
Akron Health Department, Summit County Health Department,
and Barberton Health Department, 2002.
4. InfoLine, Akron, Ohio, 2002.
5. "Kaiser Commission: Uninsured Facts," Kaiser Family Foundation, May 2000.
6. Ohio Family Health Survey, Ohio Department of health,
Center for Public Health, Data and Statistics, 1998: "Best estimate"
midrange: weighed average of direct survey-based data
and synthetic model-based estimates.
7. U.S. Census Bureau, 1997
8. U.S. Census Bureau, 1997Urban Institute and Kaiser Commission on Medicaid and
the Uninsured, analysis of March 2000 Current Population Survey, 2000.

CONTRIBUTORS

Akron Health Department

Tom Quade

Summit County Health Department

Donna Skoda
Marlene Martin
John Woodard

Healthy Connections Network

Dr. Susan S. Gerberich
Tracy Carter
Suzanne Hobson
Fran Rice
Sue Pierson

To receive additional copies of this report, contact:

Donna Skoda M.S., R.D., L.D.
Summit County Health Department
1100 Graham Road Circle
Stow, Ohio 44224-2992
330-926-5654
e-mail: dskoda@schd.org

JOIN US!!!!



If you are interested in participating in the work
of HCN, contact:

Susan Gerberich, Ph.D., R.N., CNS
Healthy Connections Network
P.O. Box 2734
Akron, Ohio 44309-2734
330-972-7894
e-mail: ssg@uakron.edu

The Health Care Coverage Situation in Summit County

	Estimated Number of Residents without Health Care Coverage	Estimated Percent of Residents without Health Care Coverage
Southeast Akron Cluster	6,446	12.14
Southwest Akron Cluster	6,335	17.82
Central Akron Cluster	4,800	25.26
West Akron Cluster	4,664	13.71
South Akron Cluster	4,347	16.90
Barberton Cluster	3,734	13.15
Cuyahoga Falls Cluster	3,703	7.40
North Akron Cluster	2,401	13.41
Coventry / Green Cluster	2,255	6.67
Springfield Cluster	2,214	11.14
Northwest Akron Cluster	2,096	6.93
Stow / Silver Lake Cluster	1,458	4.15
Munroe Falls / Tallmadge Cluster	1,309	6.09
Twinsburg Cluster	1,308	6.15
Copley / Bath / Fairlawn Cluster	1,172	3.70
Sagamore / Macedonia Cluster	980	3.56
Franklin Cluster	955	6.00
Norton Cluster	740	6.45
Richfield / Boston / Peninsula Cluster	396	4.78
Hudson Cluster	263	1.17
Summit County Total	51,575	9.50

	Highest Number	Highest Percent
1. Sagamore/ Macedonia		
2. Twinsburg		
3. Richfield/Boston/Peninsula		
4. Hudson		
5. Copley/Bath/Fairlawn		
6. Cuyahoga Falls		
7. Stow/Silver Lake		
8. Northwest Akron		
9. Munroe Falls/Tallmadge		
10. North Akron		
11. West Akron		
12. Central Akron		
13. Southwest Akron		
14. South Akron		
15. Southeast Akron		
16. Norton		
17. Barberton		
18. Springfield		
19. Franklin		
20. Coventry/Green		

Appendix B

Service Providers in Summit County

Map ID # and Cluster Name	Number of Provider Agencies	Total Population (2000)	% of Population Living Below 200% Poverty	# of People Living Below 200% Poverty
1 Sagamore / Macedonia Cluster	0	27,184	8.9	2,419
2 Twinsburg Cluster	1	21,112	10.4	2,196
3 Richfield / Boston	0	8,062	10.7	863
4 Hudson Cluster	0	22,098	4.6	1,017
5 Copley / Bath / Fairlawn Cluster	0	30,613	10.7	3,276
6 Cuyahoga Falls Cluster	2	49,596	18.8	9,324
7 Stow / Silver Lake Cluster	1	34,579	11.4	3,942
8 Northwest Akron Cluster	2	30,066	23.0	6,915
9 Munroe Falls / Tallmadge Cluster	0	21,074	13.4	2,824
10 North Akron Cluster	2	17,567	33.1	5,815
11 West Akron Cluster	1	33,324	37.2	12,397
12 Central Akron Cluster	14	14,724	60.9	8,967
13 Southwest Akron Cluster	1	34,623	47.3	16,377
14 South Akron Cluster	5	25,393	39.4	10,005
15 Southeast Akron Cluster	4	54,615	35.5	19,388
16 Barberton / Norton Cluster	3	39,390	51.8	20,404
18 Springfield Cluster	0	19,763	22.3	4,407
19 Franklin Cluster	0	15,844	15.7	2,488
20 Coventry / Green Cluster	2	33,610	17.8	5,983
East of Summit County	2	Portage County Providers		
West of Summit County	1	Medina County Provider		
North of Summit County	1	Cuyahoga County Provider		

Service Provider Safety Net Locations by Number of People (top 6) Living Under 200% Poverty

