Population Needs Assessment

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What is the Population Needs Assessment?

- DHCS required yearly report
- The Population Needs Assessment (PNA) Goal:
  - Identify and understand the needs of our Medi-Cal members
  - Ensure that we meet ALL member needs
  - Improve our members' health

What are the required components?

- Key Findings
  - Member profile
  - Health status
  - Health disparities
  - Gaps in health education, quality improvement, and cultural & linguistic services
- Action plan
- Stakeholder engagement

Key member subgroups

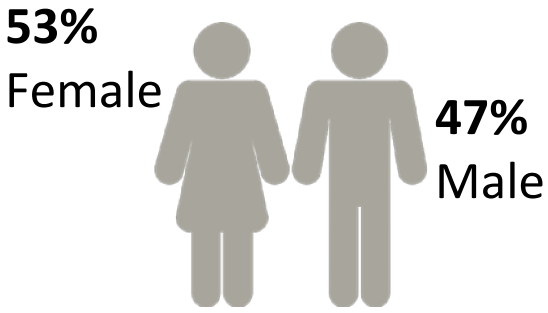
- Children with special health care needs (CSHCN)
- Seniors and persons with disabilities (SPD)
- Members with limited English proficiency (LEP)
- Members with diverse cultural and ethnic backgrounds

Data

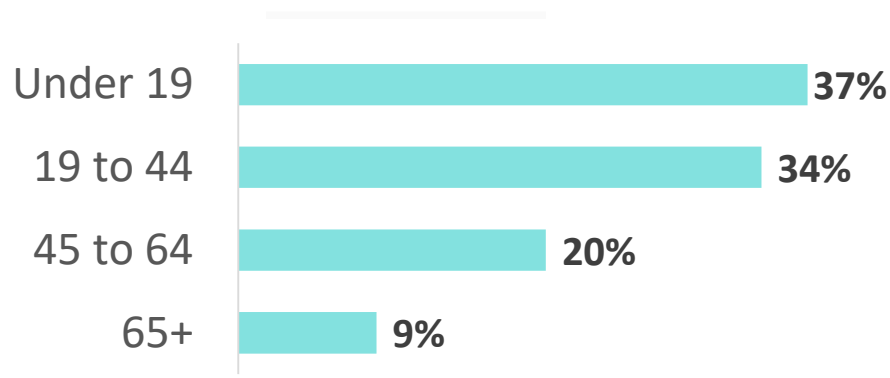
- **2019 unless otherwise noted**
- **Required Data**
  - Member Satisfaction Survey (CAHPS)
  - Health disparities data based on HEDIS RY2019
  - Stakeholder input (Member Advisory Committee)
- **Additional Data Used**
  - County data on social determinants of health (ex. housing, CalFresh)
  - Member demographic data (age, sex, race/ethnicity, location)
  - Member health status (Care Analyzer)
  - Grievances
  - Language services
  - CG-CAHPS: post-visit member survey

Member Demographics

Gender*

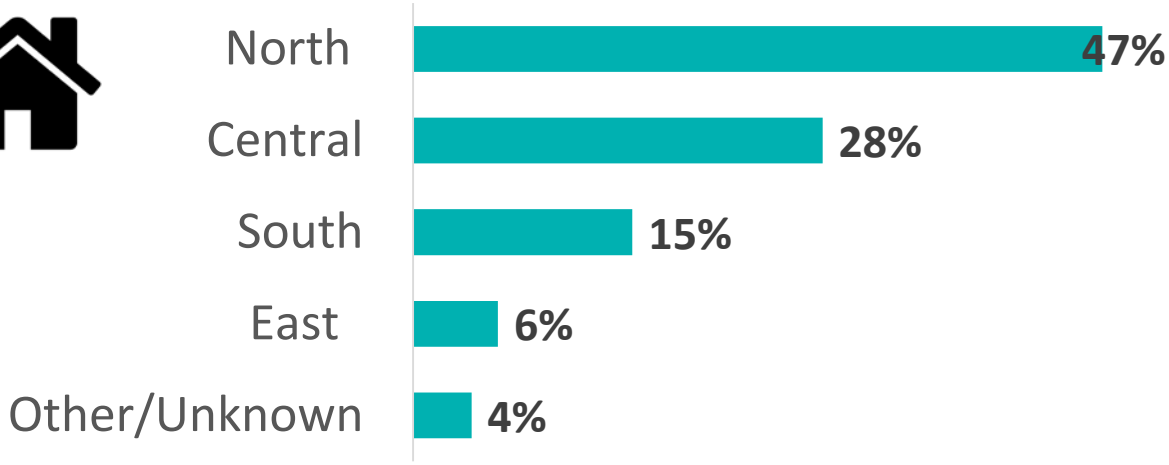


Age



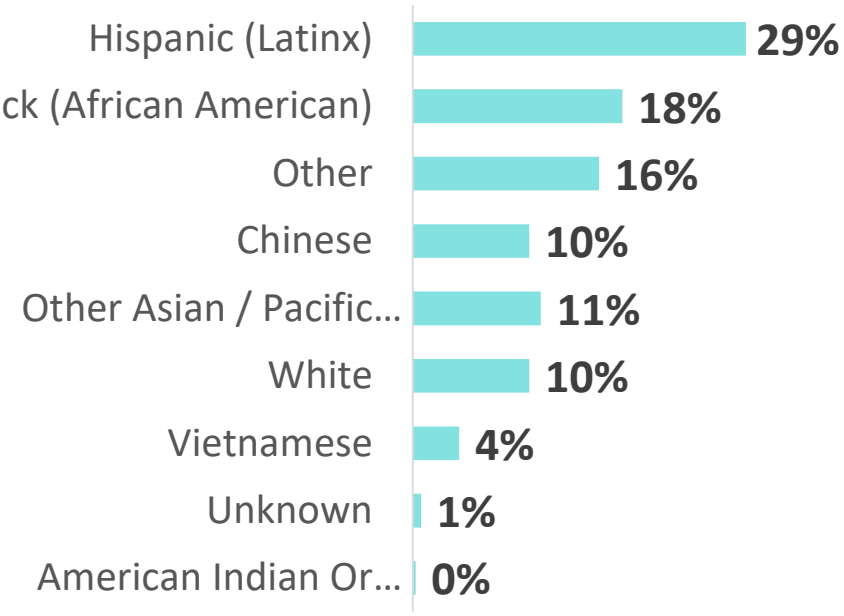
* Medi-Cal does not yet track non-binary gender identification.

City



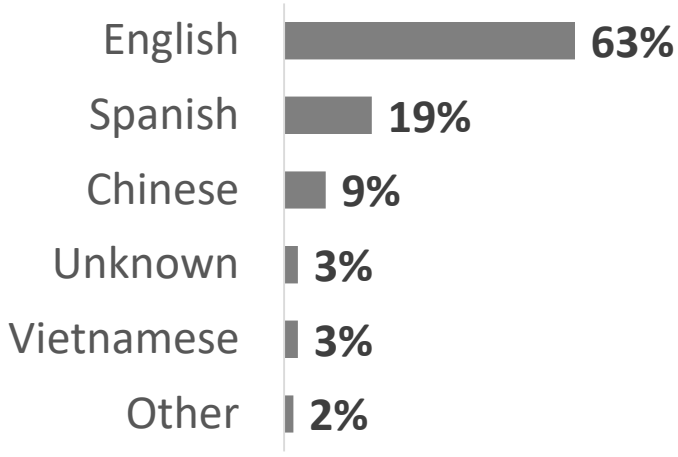
County Region	Cities included
North County	Alameda, Albany, Berkeley, Emeryville, Oakland, Piedmont
Central County	Castro Valley, Hayward, San Leandro, San Lorenzo (Note: Ashland, Cherryland, and Fairview are unincorporated areas and not in member addresses.)
East County	Dublin, Livermore, Pleasanton
South County	Fremont, Newark, Union City

Ethnicity



- For Under 19 and 19 – 44 year olds the largest ethnic group was Latinx
- For 45 – 64 year olds, the largest ethnic group was African American
- For 65+ year olds, the largest ethnic group was Chinese/Other Asian Pacific Islanders

Language



Among non-English speakers:

- For 45-64 and 65+ year olds, the largest language group was Cantonese/Mandarin
- For Under 19 and 19 – 44 year olds, the largest language group was Spanish

Top 8 Health Issues

(% of subgroup with diagnosis)

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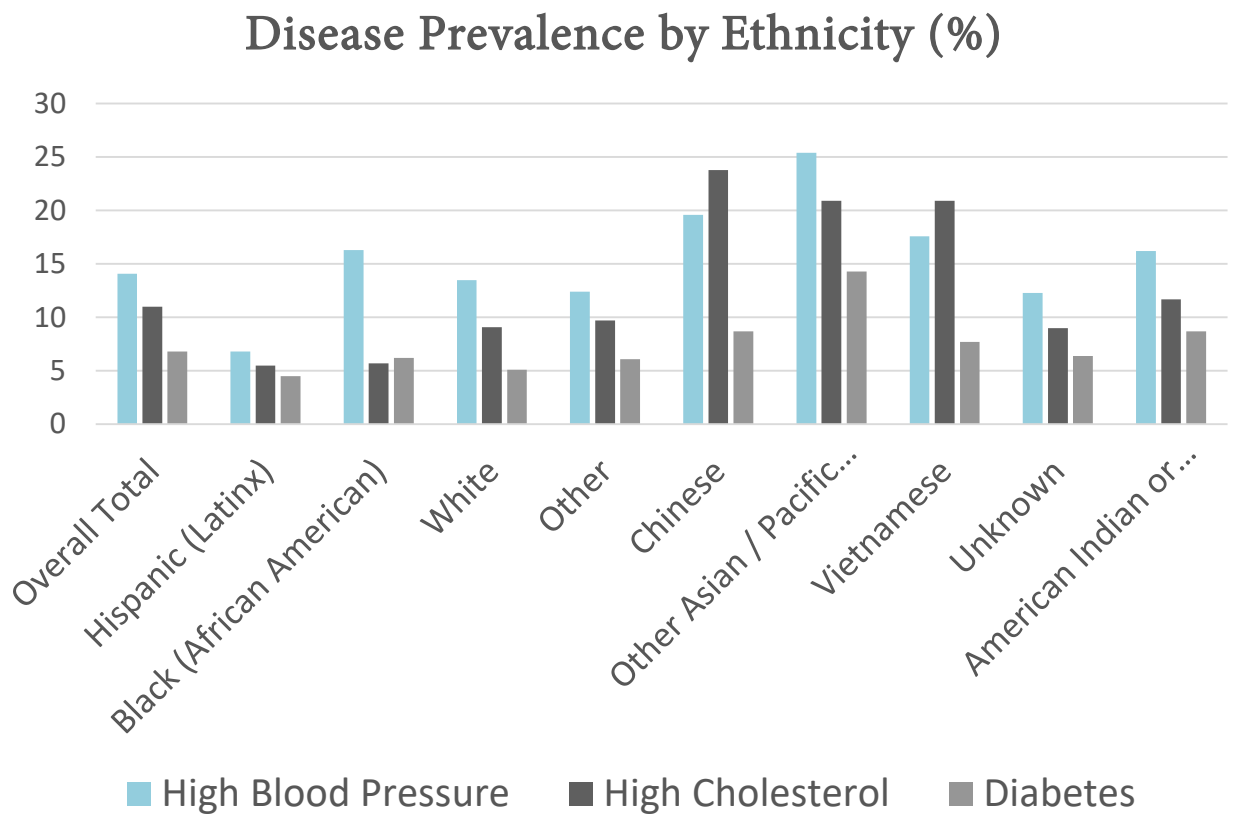
Rank	Child	CSHCN	Adult	SPD
1st	Common cold (URI) 19%	Common cold (URI) 22%	High blood pressure 17%	High blood pressure 43%
2nd	Obesity 12%	Refractive errors 15%	High cholesterol 14%	High cholesterol 29%
3rd	Eye problems 12%	Obesity 15%	Abdominal pain 10%	Neurologic problems 20%
4th	Dental concerns 11%	Developmental disorder 13%	Muscle, bone or joint 10%	Muscle, bone or joint 16%
5th	Virus 11%	Virus 13%	Neurologic problems 9%	Low back pain 15%
6th	Refractive errors 10%	Asthma 13%	Obesity 9%	Cardiovascular 14%
7th	Eczema & skin problems 9%	Eye Problems 12%	Eye Problems 8%	Type 2 Diabetes 13%
8th	Asthma 8%	Dental Concerns 12%	Low Back Pain 8%	Obesity 13%

- Data from CareAnalyzer, excludes Kaiser members
- SPD – Seniors and Persons with Disabilities
- CSHCN - Children with Special Health Care Needs based on CCS participation

Action Plan Overview

- 7 goals total in 3 categories
  - Culturally appropriate health education (4)
  - Routine care visits (2)
  - Information on member benefits (1)

High Blood Pressure, High Cholesterol, and Diabetes in Asian and Pacific Islander Adults



Strategies:

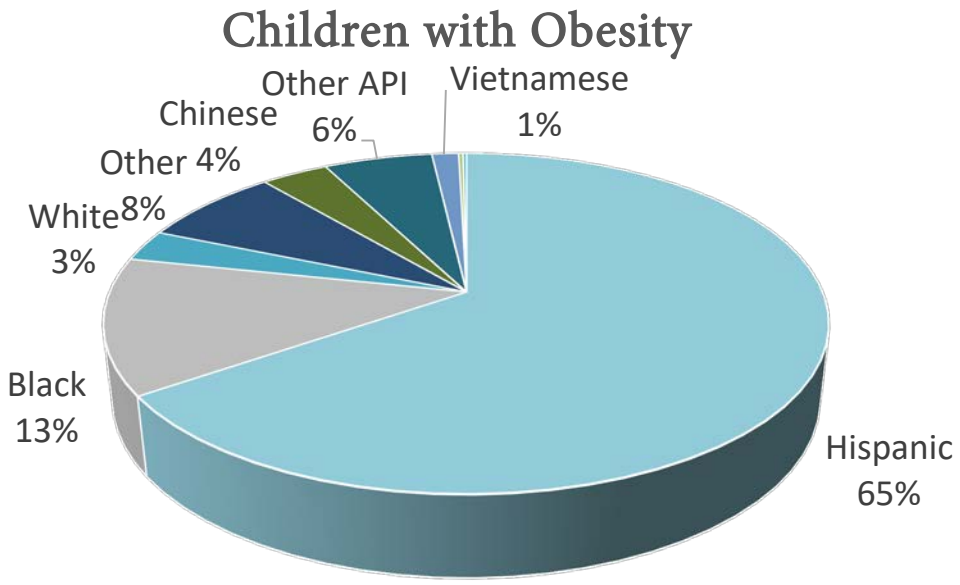
- Promote classes and supports through partners and Alliance staff
- Publish materials in more Asian languages

Objective: *Reach 100 Asian and Pacific Islander members with hypertension, hyperlipidemia, and/or diabetes through materials, classes, and/or other supports by June 30, 2022.*

Obesity in Hispanic (Latinx) Children

#2 diagnosis in children excluding CSHCN (12%)

#3 diagnosis in CSHCN children (15%)



Strategies:

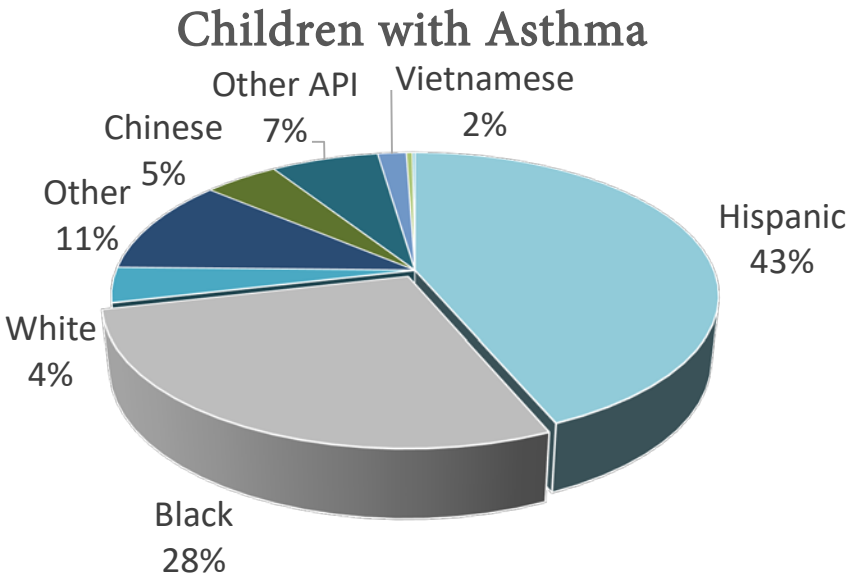
- Present research to partners
- Put together food and exercise resource lists for clinics
- Complete Live Healthy care books
- Fund nutrition & healthy weight programs

Objective: *Connect 100 Hispanic (Latinx) families with healthy weight resources by June 30, 2022.*

Asthma in the Hispanic (Latinx) and Black (African American) Children

#8 diagnosis in children excluding CSHCN (8%)

#6 diagnosis in CSHCN children (13%)



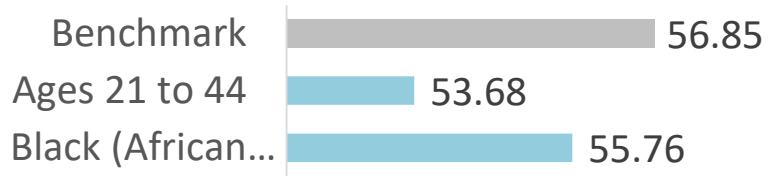
Strategies:

- Work with Asthma Start to increase member outreach
- Refer more members from hospital ERs
- Educate providers about Asthma Start

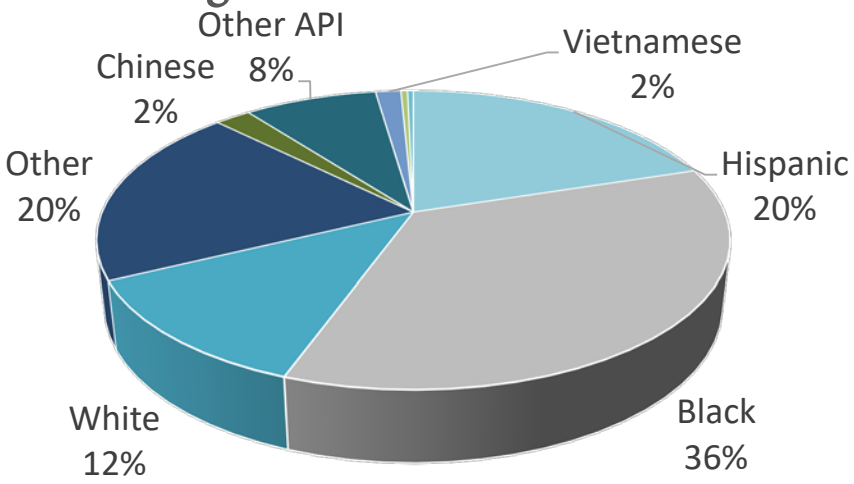
Objective: *Increase annual participation of Hispanic (Latinx) and Black (African American) children in Asthma Start in-home case management program by 25% from 209 (2019) to 261 members by December 31, 2021.*

Asthma in Black (African American) Adults

Asthma Medication Ratio (AMR), HEDIS



Adults ages 19 to 44 with Asthma

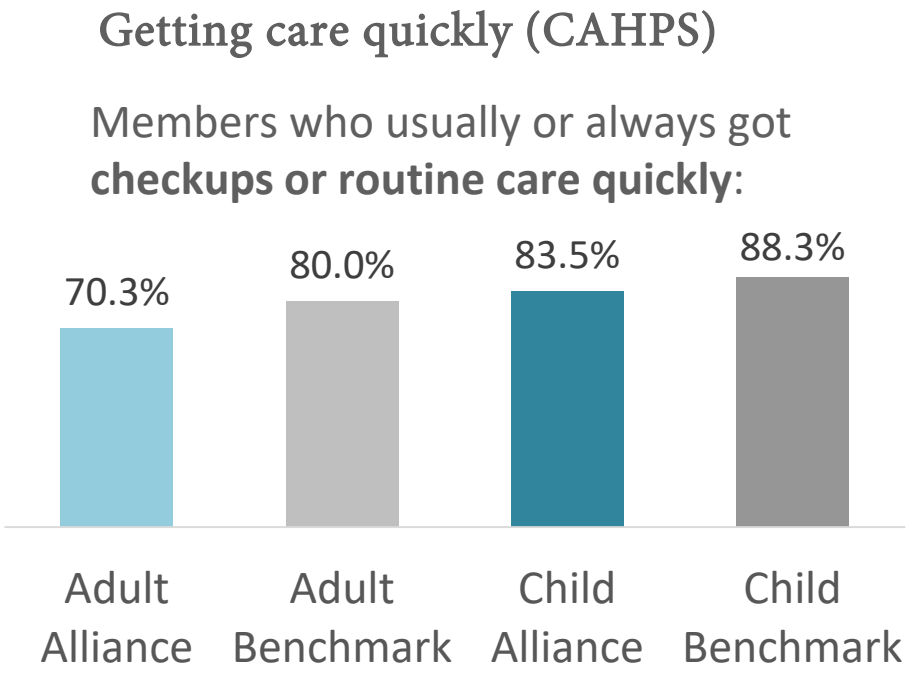


Strategies:

- Partner with providers to hold asthma workshops
- Provide member phone consults with Pharmacy department
- Use culturally sensitive practices

Objective: *Achieve HEDIS Asthma Medication Ratio (AMR) measure of at least Measurement Year 2019 MPL of 63.60% for Black (African American) adults ages 21 to 44 by December 31, 2021.*

Getting routine care appointments quickly



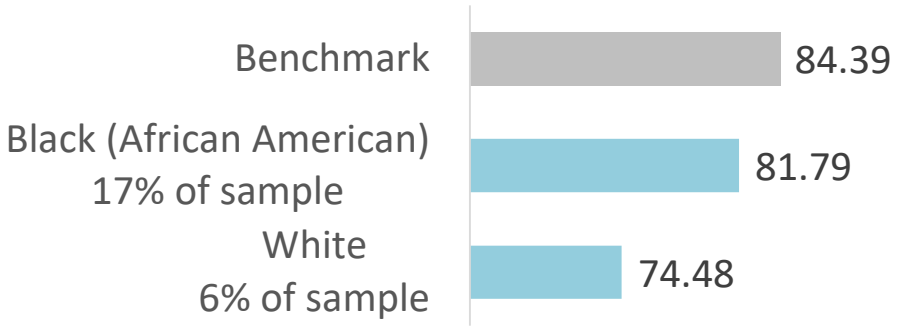
Strategies:

- Outreach to providers with the most complaints
- Educate members and providers about timely access standards

Objective: *Improve CAHPS rate for getting checkup or routine care appointment as soon as needed from 70.3% to 72% for adults and from 83.5% to 85.6% for children by December 31, 2021.*

Well-child visits

Well-child visits 25 months to 6 years old (CAP-256), HEDIS



Strategies:

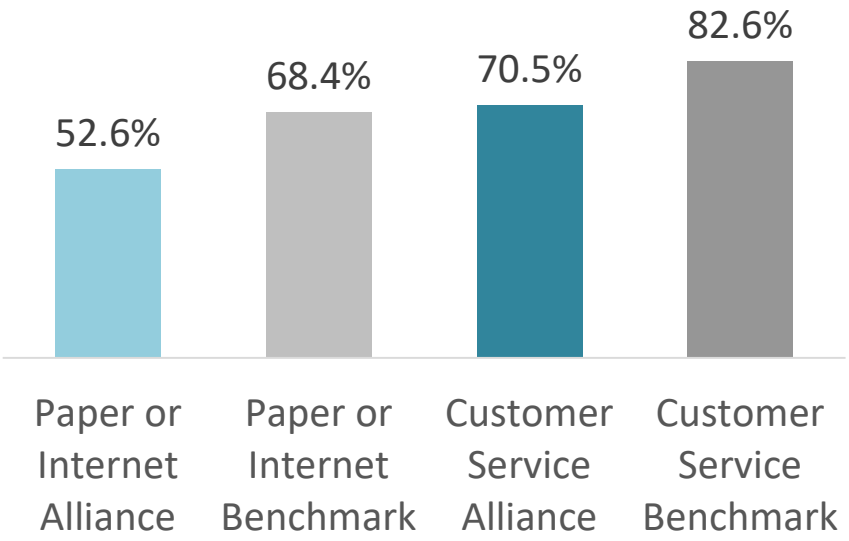
- Member-friendly gaps in care letters
- Provider education for gaps in care reports
- Target demographics for Quality Improvement Projects

Objective: *Improve HEDIS Well-child Visits in the Third, Fourth, Fifth, and Sixth Years of Life (W34) measures from 68.63% for Black (African American) and 68.42% for White members to the Measurement Year 2019 MPL of 72.87% by December 31, 2021. NOTE: CAP measures discontinued in 2020*

Information and coordination of member benefits

Getting information (CAHPS)

Adults who usually or always got **information or help needed from**:



NOTE: Paper or internet question is specifically information about how the health plan works

Strategies:

- Engage Alliance staff
- Provide members and providers with easy-to-read information on benefits
- Discuss access to benefits with community groups serving children with special health care needs

Objective (TBD): *Improve CAHPS rate for providing needed information (through written materials and the Internet) from 52.6% to 62% for adults by December 31, 2021.*