

SSU Initiative on the Health Care Crisis in Sonoma County

Academic Year End Summary & Potential Ideas for Next Academic Year

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Background and introduction

This paper begins with a few sentences about how things “got here”, sums up selected highlights from the one year of Initiative operation during Academic Year 2002-2003; it finally points out a number of priority issues if the Initiative is to be considered for the upcoming Academic Year 2003-2004 of the Academic Year’s work by the Initiative.

Sonoma County is being hit by most of the bad health care cost and access problems striking across the state (and beyond). A senior UC researcher, Gil Ojeda, calls Sonoma County a “ground zero” in that regard. Seven examples:

- One of the two primary HMOs in the County, Health Plan of the Redwoods (HPR) went bankrupt last fall, leaving almost 80,000 members to quickly find other coverage.
- In the prior four years, five major physicians groups went bankrupt.
- A major hospital here has just closed important regionally important hospital units for pediatric intensive care and for the aged and frail.
- Small district hospitals are once again on the verge of closing from inadequate and unfair reimbursement rates.
- Doctors and big hospitals both report significant losses.
- The County has serious health care personnel shortages.

- And now the state budget fiasco has stopped critically important health services, such as outpatient serious mental illness services in the outer towns closed as of July 1st

At the same time, in Sonoma County one can find emerging and continuing community and academic support, some public perception that effective responses may emerge from study and meetings of a number of alliances and planning partners.

One finds here that a Sonoma County health care crisis (in fact, the interlocking of quite a number of distinct crises) is extremely real, multi-faceted, worsening, and exhibiting negative synergy. In addition, the growing U.S. economic depression and the California state financial fiasco make the predicament significantly worse.

Given these circumstances, community and campus thought, gathering together, and dialogue can plan effective responses.

The first year of the SSU Initiative, Academic Year 2002-2003

The SSU Initiative on the Health Care Crisis in Sonoma County began taking shape in late August of 2002, in dialogues between Art Warmoth, Skip Robnson and members of the SSU community, the days between the announcement in Sonoma County that HPR was going bankrupt and the holding in Sacramento of a State of California-UC Office of the President-hosted conference in Sacramento announcing the results of their two years of collaborative research, which described nine primary options for health care in California now and in the near future.

In September, the SSU Provost's Office with the Dean of the School of Social Science and the Dean of the School of Science and Technology provided funds to begin the program, plan the 2002-2003 Academic Year, and prepare a psychology course on the crisis.

Examples of Initiative work which began September 2002:

- Facilitated dialogue within the SSU faculty, staff, and students and with the surrounding community and some of its alliances and institutions.
- Maintained a monthly dialogue and planning meeting on campus, attended by faculty from several disciplines, staff from university programs, and campus Americorp students.
- November of 2002, held a conference in the Cooperage for County public schools labor and management negotiators and their advisors.
- Developed a dedicated website (www.sonoma.edu/programs/healthcrisis/).
Now operating.
- In May 2003, held a two-day conference in the Cooperage which brought a number of stakeholder groups together considering about twenty aspects of the crisis. The May 2003 Initiative conference was co-sponsored by ten university units (Provost, two Schools, six Departments, an Extended Education program, and six community bodies, including the local community foundation.

The proposed second year: Initiative goals for Academic Year 2003-2004

Forming partnerships

This request for funds from multiple sources considers the value of the Initiative's forming partnerships with a small number of foundations and community organizations for funding and collaborative planning.

If the Initiative is funded to continue and deepen its work for a second Academic Year, it could join with collaborative parties to

- plan and advocate the protection of the most vulnerable local populations and increase access to care (with a goal of completing access to care)

- develop collaborative dialogue to see how academic and community parties can study, design, and plan health plan and health care together equitably
- find reasonable humane cost-containment methods by means of which to lower the rates of premium increase and lower cost inflation projections among health plans working together in this County

Plans and actions

Practically, according to level of funding from all sources, the Initiative could seek to

- Operate a dialogue and planning network among 10 to 20 Schools/Departments/Offices at SSU plus community and professional organizations for the 2003-2004 Academic Year - meetings/conferences/research-design-planning.
- Support growth of the Initiative's recorded dialogue output to the communities - (Audiotaped dialogues from the May conference are being prepared for broadcast-at-will on the Initiative website.
- Study those factors which appear to drive the likely cost and inflation trend lines of health plans and systems in Sonoma County (such as utilization analysis with its effects on rate setting and significantly discounted possible alternatives for prescription drugs),
- Study contracting, care coordination, pharmaceutical drug processes, humane cost containment methods, meta-analysis of prevention, intervention, counseling)
- Conduct four mathematical studies about crux issues in the crisis (costing large-scale coverage "in common" in the County, costing the presently uninsured into that mix, modeling adjustments to physician, hospital, and other reimbursement methods to increase equity and integrating this into the "mix", study costs of worst health care cutbacks which started July 1, ones which can be creatively worked with and, as feasible, could be considered for bearing finances locally).

- Conduct two or more conferences (up to eight) (plus meetings and a variety of website online library resource enhancements, including conference recordings) during the coming academic year - including dealing with a good balance of primary crisis issues here and including a good variety of primary stakeholder groups – to consider multi-stakeholder system design.
- Support synergistic projects at SSU and in the community
- Generally increase dialogue, information, and idea sharing within the academic community and the surrounding community.
- Use this information to facilitate increases in multi-party study, planning and system design.