

Access to Specialty Care for Community Health Center Patients

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Presentation to the
Alameda County Board of Supervisors

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- Founded by health centers in 1996 when the State began moving Medi-Cal beneficiaries into managed care plans
- Founded by the member health centers of the Alameda Health Consortium (AHC)
- CHCN currently holds full professional risk managed care contracts with three HMOs on behalf of our health centers
- Serving approximately **68,000 Medi-Cal and Medicare members**
- CHCN also coordinates with HealthPAC



Access for Community Health Center Patients

- Health centers provide primary and behavioral health care, lab, pharmacy, dental, etc.
- But for specialty care, patients are generally referred to outside specialists
- Insurance status drives access
 - HealthPAC
 - Medi-Cal/Medicare managed care
 - Medi-Cal/Medicare fee-for-service (fewer people)

What access to specialty care looks like for community health center patients who are:

1. Enrolled in Medi-Cal/Medicare managed care
2. Uninsured (HealthPAC)

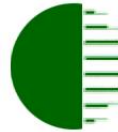
Access for Medi-Cal Managed Care Patients

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CHCN contracted network of
830 private specialists



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Access for Uninsured Patients



Alameda
County Medical
Center

HealthPAC contracted specialists

Co-Locating Specialists at the Health Centers

- Some specialty services can be offered outside of the specialty care clinic
- Currently, several health centers contract with private specialists
 - Specialist is on-site several hours a week or month
 - Co-location leverages cultural competency and language capabilities of the rest of the staff
 - Supports primary care-specialty care coordination
 - More convenient and provides quicker access for patients
- Potential to expand this model with ACMC specialists

Specialty Care “Mini-Fellowships”

- Health center PCPs go on-site at Highland Hospital specialty care clinics
- PCPs “shadow” a lead specialist 1/2 day/week for 6 weeks
- Offered by ACMC
 - Dermatology, Rheumatology, Neurology, Orthopedics
- Enhances the ability of health centers to manage basic specialty care needs before referring patients out
- Improves communication between community health center PCPs and ACMC specialists

ACMC-CHCN Specialty Care Educational Sessions



Thank You

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