



## **Profile Highlights**



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- Enrollment & Ethnicity
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County Health Profile Report: Summarizes relevant social and clinical data for Shasta County from Partnership and other state and national sources. The Report helps to identify important trends and compare metrics for Shasta County with other counties in the Partnership region. The Report highlights the unique strengths and challenges of each Partnership County.

#### **Shasta County Highlights**

- 96% of members indicate English as their preferred language.
- Five clinical measures below the State minimum performance level
- Primary care visit rates and ED rates both favorable to Plan average
- Approximately 34% of specialty visits via telehealth
- Primary care provider vacancy ~ 15%





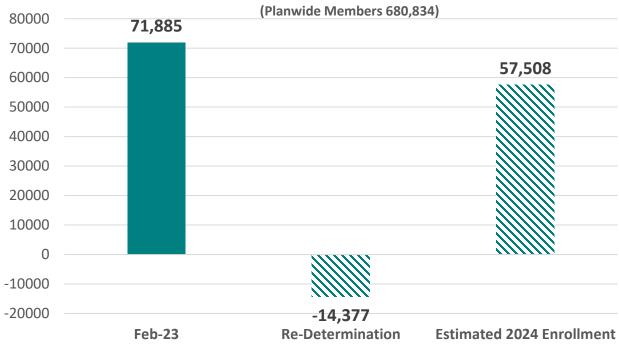
# **Shasta County Enrollment Factors Impacting Enrollment**

#### **Redetermination:**

County Social Services
Departments will begin
sending re-enrollment packets
to Medi-Cal members, based
on the month of their effective
date of coverage. Remind
members to:

- Update their address with county social services. DHCS website:
  - https://www.dhcs.ca.gov/Pages/Keep-Your-Medi-Cal.aspx
- Watch for the packet in mail, complete and send back
- Contact your county social services office or local clinic for assistance.

#### **Shasta County Enrolled Members**



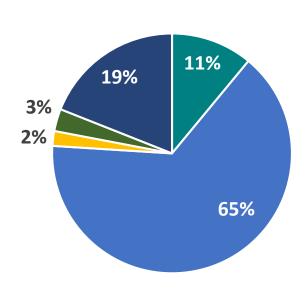
Medi-Cal Redetermination process is *estimated* to reduce enrollment in Shasta County by ~20% over the next 18 months. Please note: this estimate is subject to change by multiple factors





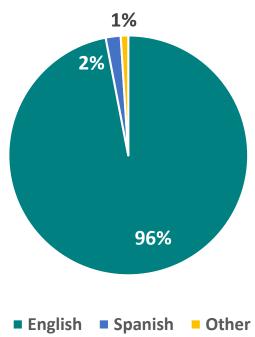
### **Shasta County Member Ethnicity & Preferred Language**





■ Hispanic ■ White ■ Black ■ Native American ■ Other

### Preferred Language

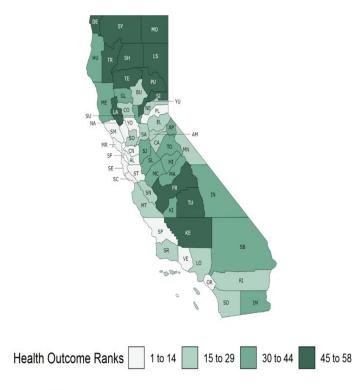


65% of Shasta County members are of White ethnicity, 11% Hispanic, 3% Native American and 2% Black. 96% indicate English is their preferred language and 2% Spanish. Please note large ethnic group categorized as "other" impacts these statistics.



### **County Health Ranking & Metrics**





Health Measure	Lassen	Modoc	Shasta	Siskiyou	Trinity	State
County Rank	49	55	48	57	58	NA
Life Expectancy (yrs)	78.3	76.9	75.8	75.9	74.6	81.0
Drug Overdose Deaths/100,000	28	-	22	16	-	17
Adult Smoking	17%	17%	15%	16%	18%	9%
Child Mortality Rate (<18 yrs)/100,000	70	-	50	70	130	40
High School Completion	80%	85%	91%	90%	94%	84%
Teen Births/1,000 Births	24	25	20	21	25	16

County Health Rankings & Roadmaps Building a Culture of Health, County by Count

Social and economic factors dramatically impact overall health in our communities. Just within the Northeastern Region there are big differences in life expectancy, death rates and other risk behaviors





## Life Expectancy in Shasta County Disaggregation by Race

#### Average Life Expectancy in Shasta County is 75.8 years (State, 81.0 yrs., US 78.5 yrs.)



#### Life Expectancy by Race

Disaggregation		
Disaggregated by Race	Value	Error Margin
Life Expectancy	75.8	75.4-76.2
American Indian & Alaska Native	69.5	66.9-72.0
Asian	82.3	79.6-85.0
Black	74.5	70.3-78.6
Hispanic	81.5	79.4-83.6
White	75.5	75.0-76.0

Years of data used to calculate rates: 2018 – 2020



## Regional View of Quality 2022 QIP Results

Regional Scores: Partnership reports quality data to the State by region rather than by individual county. Individual county scores roll into the average for the region. The overall goal is for each county to score above the minimum performance level, typically the 50<sup>th</sup> percentile for all Medicaid managed care plans nationally.

#### Clinical Measures Below the State Minimum Performance Level By County\*

Siskiyou County	<b>Modoc County</b>	Lassen County	Shasta County	<b>Trinity County</b>
<ul> <li>Breast Cancer Screening</li> <li>Cervical Cancer Screening</li> <li>Childhood Immz CIS10</li> <li>Adolescent Immunizations</li> <li>Well Child – 1<sup>st</sup> 15 Months</li> </ul>	<ul> <li>Asthma Medical Ratio</li> <li>Breast Cancer Screening</li> <li>Cervical Cancer Screening</li> <li>Blood Pressure Control</li> <li>Childhood Immz CIS10</li> <li>Adolescent Immunizations</li> <li>Well Child – 1st 15 Months</li> </ul>	<ul> <li>Breast Cancer Screening</li> <li>Cervical Cancer Screening</li> <li>Colorectal Cancer Screening</li> <li>Child/Adolescent Well Visits</li> <li>Childhood Immz CIS10</li> <li>Adolescent Immunizations</li> <li>Well Child – 1st 15 Months</li> </ul>	<ul> <li>Breast Cancer Screening</li> <li>Cervical Cancer Screening</li> <li>Childhood Immz CIS10</li> <li>Adolescent Immunizations</li> <li>Well Child – 1<sup>st</sup> 15 Months</li> </ul>	<ul> <li>Asthma Medical Ratio</li> <li>Breast Cancer Screening</li> <li>Cervical Cancer Screening</li> <li>Colorectal Cancer Screening</li> <li>Child/Adolescent Visits</li> <li>Childhood Immz CIS10</li> <li>Adolescent Immunizations</li> <li>Well Child – 1st 15 Months</li> </ul>

	Northeast Region	Percent from
	Metrics Below the State Minimum Performance Level	Benchmark
•	Breast Cancer Screening	-7.18%
•	Cervical Cancer Screening	-8.47%
•	Childhood Immunizations – CIS 10	-22.25%
•	Adolescent Immunizations	-19.04%
•	Well Child – 1 <sup>st</sup> 15 Months	-4.26%

#### In the Northeast Region, there are five QIP clinical measures below the benchmark

<sup>\*</sup> Minimum performance level at ~ 50<sup>th</sup> percentile nationwide for Medicaid health plans



## Is Your County an Outlier within the Partnership HealthPlan Northern Region?

County	QIP Measures Below Benchmark (2022)	QIP Ave. Percent of Points Earned (2022)	Percent of Children with High Blood Lead (2020)	ED Visits/ 1000 Mbr. (2022)	Primary Care Visits/ Mbr./Yr (2022)	Percent Primary Care Telehealth (2022)	Percent Specialty Telehealth (2022)	Hospital Days/ 1000 Mbrs. (2022)	Percent Mbrs. Accessing Behavioral Health (2022)	Percent Primary Care Workforce Vacancy (Sep 2022)
Del Norte	6/12	45.4%	NA	797	2.3	10%	28%	361	6.3%	35%
Humboldt	4/12	49.3%	4.3	486	2.0	13%	33%	365	10%	37%
Lassen	7/12	42.1%	NA	671	1.9	5%	66%	647	7.1%	23%
Modoc	7/12	33.3%	NA	1,084	1.9	3%	37%	732	3.7%	33%
Shasta	5/12	41.9%	NA	527	2.1	5%	34%	441	13.3%	15%
Siskiyou	5/12	42.6%	NA	573	1.9	6%	30%	299	8.6%	30%
Trinity	8/12	41.3%	NA	570	2.5	2%	23%	562	7.8%	22%
Compared To:	Region NW: 4/12 NE: 4/12	Region/Plan NW: 48.5% NE: 41.5%	State 1.2%	Plan 573	Plan 2.0	Region: 8%	Plan 31%	Plan 334	Plan 7.7%	Plan 24%



## **Quality Improvement Program Scores Shasta County 2022**

Measure	Partial Point Target	Full Point Target	Planwide Ave Dec 2022	Shasta	NE Region	Shasta NTT to Partial	Shasta NTT to Full	Ave. Treated/Mo
Asthma Medication Ratio	64.78%	70.67%	70.58%	65.56%	64.91%	-5	34	36
Breast Cancer Screening	53.93%	58.70%	52.74%	47.71%	46.75%	168	297	108
Cervical Cancer Screening	59.12%	63.66%	57.74%	49.68%	50.65%	1087	1610	477
Colorectal Cancer Screening	32.80%	40.23%	39.93%	40.52%	37.86%	-490	-18	214
Blood Pressure Control	55.35%	62.53%	65.78%	64.76%	62.64%	-211	-50	121
HbA1c Control	56.81%	61.63%	65.98%	66.68%	65.35%	-183	-94	103

Measure	Partial Point Target	Full Point Target	Planwide Ave Dec 2022	Shasta	NE Region	Shasta NTT to Partial	Shasta NTT to Full	Ave. Treated/Mo
Child/Adolescent Visits	45.31%	53.83%	51.30%	47.30%	46.59%	-320	1050	634
Childhood Immunization CIS10	38.20%	45.50%	30.31%	17.24%	15.95%	214	289	15
Adolescent Immunizations	36.74%	43.55%	37.05%	20.76%	17.70%	163	233	18
Well Child - 1st 15 Months	54.92%	61.25%	61.50%	53.52%	50.66%	7	41	23

Color Code	Definitions
Dark green	Score in top 25 <sup>th</sup> percentile for all Medicaid health plans
Light green	Score in top 50 <sup>th</sup> percentile for all Medicaid health plans
Blue	Less than 50th percentile, but above Partnership Plan average
Yellow	Less than 50 <sup>th</sup> percentile, and less than Partnership Plan average

NTT: Number of members to treat to reach benchmark

(- number) means exceeded benchmark (+ number) short of benchmark

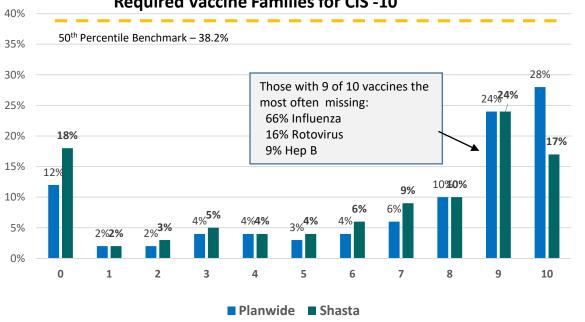
<sup>\*</sup> Measures sunsetting in 2023



## Early Childhood Immunizations (CIS 10) Shasta County

An analysis of Partnership HealthPlan 2022 HEDIS results for childhood immunization shows the percent of children completing the ten required categories of vaccines or vaccine families. To successfully complete the CIS 10 measure, all ten vaccine families must be administered, equaling 23 – 24 individual vaccines.





Vaccine Family	Number in Series
Нер В	3
Rotovirus	2-3
DTaP	4
Hib	3
PCV	4
IPV	3
Influenza	2
MMR	1
Varicella	1
Нер А	1
<b>Total Required</b>	23 -24

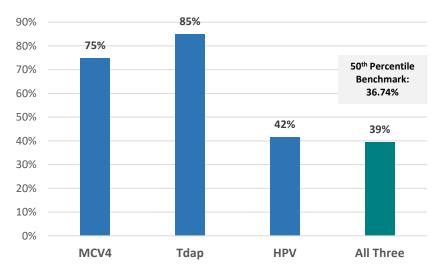
In Shasta County, 17% of eligible children completed all ten required vaccine families. Another 24% completed nine of the ten required (most often missing influenza). 18% of children completed no immunizations (unwilling or out of area).



# Immunizations for Adolescents Planwide Trends

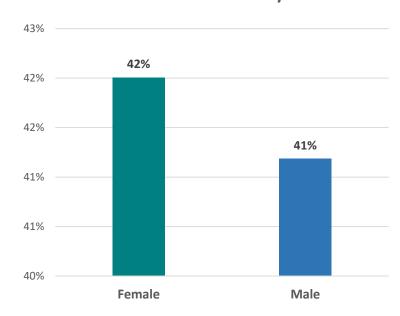
An analysis of 2022 HEDIS results for adolescent immunizations shows the percent of youth completing all four immunizations. To successfully complete the Adolescent Immunization series, youth must have 1. Tdap, 1 Meningococcal, and 2 HPV immunizations by their 13<sup>th</sup> birthday. Total Partnership members eligible for this measure is 64,910.

## Percent of Eligible Youth Completing Vaccine Type and Total Compliant



85% of eligible children have had Tdap (required for entry into 7<sup>th</sup> grade), 75% have received meningococcal, 42% HPV and 39% have received all three.

#### **HPV** vaccination rate by sex

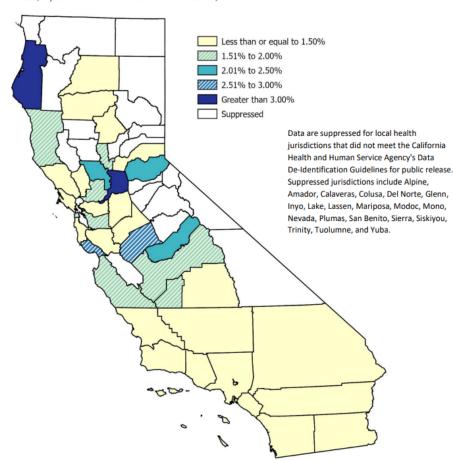


Of the 42% of youth receiving the HPV vaccine, the number was equally divided between females and males.



## Blood Lead Screening State Data 2020

Figure 1. Percent of Children Under 6 Years Old with a Blood Lead Level of 4.5  $\mu$ g/dL or Greater, by California Local Health Jurisdiction, 2020



Data from RASSCLE surveillance database archive of 7/30/2021

## California Counties: Percent Children <6 yrs with Blood Lead Level of 4.5 µg/dl or higher, 2020

County	# Tested	Percent > 4.5 µg/dl
Humboldt	1,703	4.35%
Marin	1,445	0.76%
Mendocino	1,002	1.70%
Napa	786	0.64%
Shasta	420	0.95%
Solano	3,588	1.84%
Sonoma	1,596	0.87%
Yolo	1,674	2.09%
Statewide*	336,386	1.21%

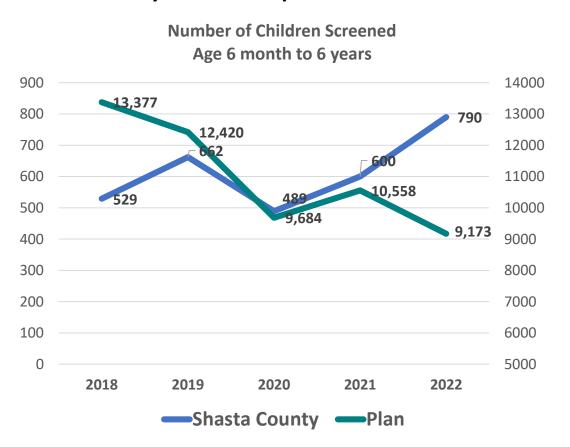
<sup>\*0.25%</sup> of children <6 yrs have Blood Lead Level ≥ than 9.5 µg/dl

All counties have a small percentage of children with high blood lead levels, a few counties are well above the Statewide average.



# Blood Lead Screening Partnership HealthPlan Members

#### **Shasta County: Partnership HealthPlan Members**



#### **Point of Service Testing**





#### **Clinicians**

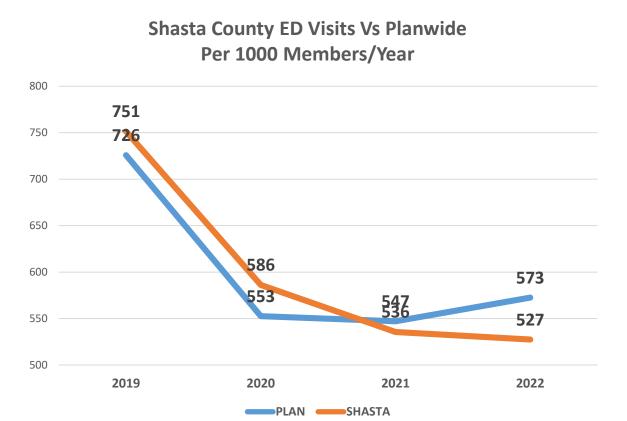
Point-of-care lead testing means everybody wins. 3 minutes. 2 drops of blood. 1 visit. Zero loose ends.

LeadCare<sup>®</sup> II is the only CLIA-waived, point-of-care lead testing system that makes it possible to test, educate and intervene onthe-spot, in one visit. No need to send patients to an outside lab. No need to re-test due to sample problems at the lab. No risk of losing track of a child who needs treatment.

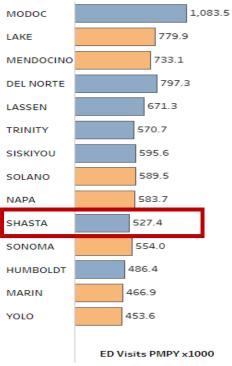
The annual number of children screened Planwide is still below pre-pandemic levels. Shasta is one of four counties in the Region showing a steady increase in screenings and above pre-pandemic levels.



## Shasta County ED Use – Four Year Trend



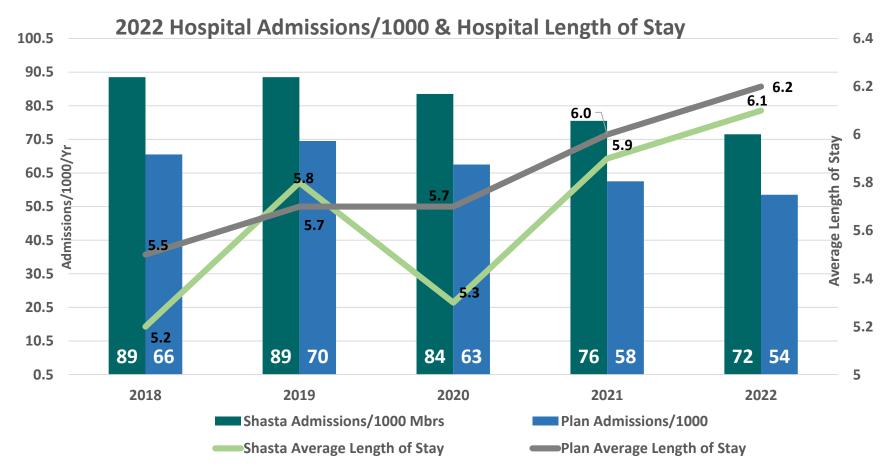
ED Visits/1000 Mbrs/Year in 2022 - Plan Average: 573



Shasta County ED visit rates continue to decline year over year. Rates remain well-below pre-pandemic levels.



# Hospital Use Rates Shasta County



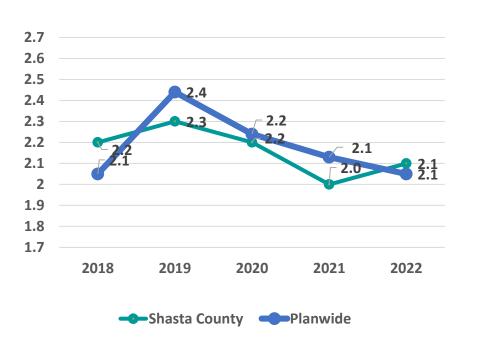
Shasta County hospital length of stay is similar to Plan average and is rising. At the same time, the rate of inpatient admissions is decreasing.



# **Shasta County Primary Care Visit Rate**

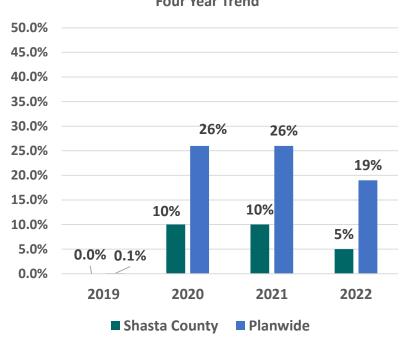
#### **Primary Care Visits/Member/Year**

**Five Year Trend** 



#### **Percent Telehealth**



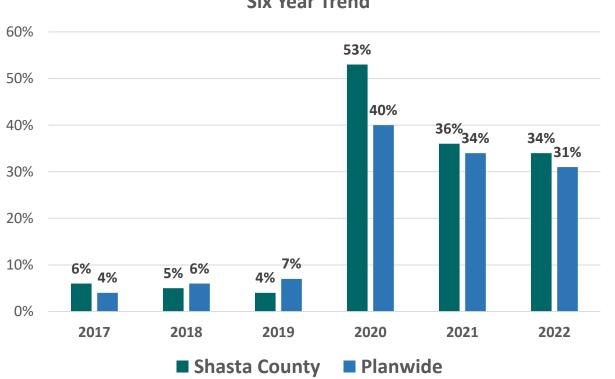


Primary care visits per member per year in Shasta County are consistent with the Planwide average. In 2022, 5% of total primary care visits were provided through telehealth (video or phone) compared to 19% Planwide.



# **Shasta County Specialty Visit Rates**





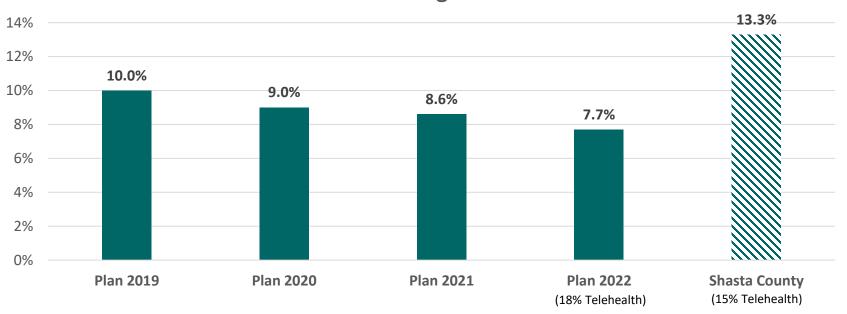
Specialty	Percent Visits by Telehealth
Planwide (	CY 2022
Psychiatry	55%
Endocrine	44%
Rheumatology	30%
Neurology	26%
Infectious Disease	18%
Pulmonary Medicine	15%
Urology	9%
Dermatology	4%

The provision of specialty care via telehealth remains a major tool to improve access. Approximately a third of specialty visits in Shasta County are provided by telehealth.



# Behavioral Health Use (All Ages) Shasta County

#### **Percent of Total Members Using Behavioral Health Services**



Shasta County Utilization Data for 2022					
Provider Type	Visits 2022	Ave. Visits per Member			
Therapy Services	94,626	13.0			
Medical Management	16,367	5.0			
Other	22,323	6.9			

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### **Provider Satisfaction**

## Partnership HealthPlan of California

#### At-A-Glance 2022 Physician/Specialist Satisfaction Results

SPH Analytics conducted the physician/specialist satisfaction study via a multi-mode survey approach, allowing respondents to complete the survey via mail or web.

Courtesy telephone calls were made to encourage participation via mail or web.

A total of 401 physician/specialist surveys were completed from April 1 - June 17, 2022.

OF CALIFORNIA		Total		Primary Gare Physicians (PCPs)			Specialists (SPCs)			
		Total (A)	Southern (B)	Northern (C)	Total (D)	Southern (E)	Northern (F)	Total (G)	Southern (H)	Northern (I)
	Total respondents:	(n=401)	(n=289)	(n=112)	(n=214)	(n=148)	(n=66)	(n=187)	(n=141)	(n=46)
Overall Measure (% Strongly Agree / Agree)										
I am satisfied with the Plan		98%	98%	100%B	99%	99%	100%	97%	96%	100% н

Areas of Highest Satisfaction (Agree or Strongly Agree)			
I am satisfied with the Plan	98%		
I am satisfied with my interactions with my locally assigned Provider Relations Rep	99%		
Quality Improvement (Process Improvement, HEDIS)	99%		
I am satisfied with my interactions with Utilization Management Staff	98%		
The Plan processes my claims that do not contain billing errors within 30 days	96%		

Areas for Improvement (Agree or Strongly Agree)				
I routinely receive reports after my PHC patients have access Mental Health Care Services	50%			
I know how to submit a potential CCS child to the local County agency for eligibility	62%			
My patients are able to get timely appointments for specialty services within 15 days	69%			

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### **Member Satisfaction**

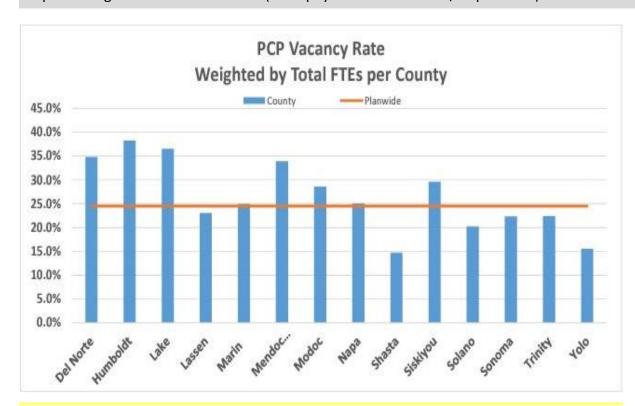
#### **Partnership HealthPlan of California Member Survey 2022**

		Adults	Children
Overall satisfaction with Partnership (% score of 9 or 10)	55% (9 <sup>th</sup> Percentile)	67% (12 <sup>th</sup> Percentile)	
Areas of Highest Satisfaction for	Adults	Areas of Highest Satisfacti	on for Children
Satisfaction with PHC Member Services	86%	Satisfaction with PHC Member Serv	rices 89%
Overall satisfaction with your personal doctor	62%	Overall satisfaction with your perso doctor	nal <b>7</b> 5%
Areas of Improvement for Ad	ults	Areas of Improvement	for Children
Getting care quickly	73%	Getting needed care	80%
How well doctors communicate	86%	Overall satisfaction with health care	66%



#### **Workforce Point in Time Survey (January 2023)**

Partnership HealthPlan staff conducted a survey of primary care organizations across the 14 county region. The results shown below indicate the current primary care provider vacancies weighted by available positions per county. The plan wide vacancy rate is 24.5%, representing 296 clinician vacancies (~200 physicians and 100 NP/PA positions)



All primary care practices are challenged by workforce shortages impacting access to care, quality, workforce burnout, retention and more. Primary care shortages range from a low of 15% to high of 38%. The Partnership plan wide average is 24%.

#### **Workforce Promising Practices**

- 1. Partnership Workforce Recruitment & Retention program
- 2. Retention strategies to maintain current staff
- 3. Flexible hours to promote work/life balance
- 4. NP/PA Fellowship programs
- 5. Close working relationship with residency training programs
- 6. Use of primary care telehealth (remote providers)
- 7. Expanding statewide health training capacity (State strategy)
- 8. Assistance with housing



## Potential 10 County Geographic Expansion Jan 2024

#### **Serving the North State**

Partnership's planned geographic expansion will add 10 new counties to the network, for a combined network of 24 counties.

Partnership as their preferred partner: All ten counties passed ordinances electing Partnership HealthPlan as their preferred partner for managed Medi-Cal. Many of the reasons cited include local presence, responsiveness and aligned values.

**New Members:** The ten counties will add approximately 274,000

**New Structure:** Partnership plans to reallocate Commissioners to accommodate the new counties. Plans also include one or two new regional offices.



#### **New expansion counties:**

- Butte Plumas
- Colusa Sierra
- Glenn Sutter
- Nevada Tehama
- Placer Sierra



### **Shasta County Health Profile**

The County Health Profiles provide information from both State and Partnership HealthPlan data sources.

Please direct your questions about the information provided to your regional liaison:

Region	Regional Medical Director	Regional Administrative			
Northwest (Del Norte & Humboldt Counties)	Dr. Jeff Ribordy, Northern Region Medical Director <a href="mailto:jribordy@partnershiphp.org">jribordy@partnershiphp.org</a>	Vicky Klakken, Regional Manager vklakken@partnershiphp.org			
<b>Northeast</b> (Modoc, Lassen, Siskiyou, Shasta & Trinity Counties)	Dr. Jeff Ribordy jribordy@partnershiphp.org	Vacant			
<b>Southwest</b> (Lake, Marin, Mendocino & Sonoma Counties)	Dr. Marshall Kubota Mkubota@partnershiphp.org	Lynn Scuri, Regional Director <a href="mailto:lscuri@partnershiphp.org">lscuri@partnershiphp.org</a>			
<b>Southeast</b> (Napa, Solano & Yolo Counties)	Dr. Colleen Townsend <a href="mailto:ctownsend@partnershiphp.org">ctownsend@partnershiphp.org</a>	Kathryn Power, Community Relations Manager kpowers@partnershiphp.org			
East (Potential expansion 10 county region)	TBD	Scott McFarland, Regional Director smcfarland@partnershiphp.org			

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