
Washtenaw County Health Initiative

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Washtenaw County leaders unite to meet community's current and future health care needs

Voluntary group shares information, ideas for closing health care gaps for county's low-income, uninsured, and Medicaid populations

ANN ARBOR, Mich.—Thanks to a new initiative, low-income residents, Medicaid recipients, and the uninsured in Washtenaw County could see current gaps in accessing health care start to shrink before 2014, when health coverage expands nationwide under federal health care reform.

A voluntary effort by local leaders aims to make health care more accessible and also improve coordinated care today for low-income, uninsured, and Medicaid populations by identifying and, where possible, closing service gaps for these individuals.

Members of the collaborative group, known as the Washtenaw County Health Initiative (WHI), also are preparing for 2014, when provisions of the federal Patient Protection and Affordable Care Act that expand Medicaid eligibility and establish health insurance exchanges go into effect. WHI group members estimate as many as 50,000 Washtenaw County residents may become newly insured in 2014—an influx that the county is not equipped to handle today, according to the group's findings.

“We know that Washtenaw County's current health care delivery systems and community services—while providing excellent care—don't fully meet the needs of these individuals today, and won't be sufficient in 2014,” says Robert Guenzel, a retired Washtenaw County administrator and a co-chair of the effort. “There is a lot that can and needs to be done now to improve our citizens' health, regardless of what happens with health care reform.”

Guenzel, along with retired Saint Joseph Mercy Health System chief executive officer Robert Laverty and retired University of Michigan treasurer Norman Herbert, spearheaded the creation of the WHI. The group now includes representatives from many health providers in the county.

Beginning in January 2011, group members examined the county's current demographics, Medicaid eligibility and enrollment process, and health care delivery systems. The group found that:

- Half of the estimated 50,000 residents who will become newly insured in 2014 are expected to become eligible for Medicaid, and the other half to purchase coverage through health insurance exchanges.
- The Medicaid enrollment system is under stress, with 42 different Medicaid eligibility categories, more than 55,000 total public assistance cases in progress (as of January 2011)—and just 59 workers to process them.
- Approximately 54,000 additional primary care visits may occur annually when the newly insured begin to seek care in 2014. The current primary care work force may not be able to absorb these additional visits.
- About 27,000 county residents (10 percent of all adults) reported poor mental health for 10 or more days in one month in 2005, but only one quarter were being seen by a mental health professional. Access to mental health care is limited for the low-income, uninsured, and Medicaid populations.

- More than 2,700 county residents with substance abuse or co-occurring mental health and substance abuse disorders received treatment in hospital emergency departments in 2010—one of the costliest settings to receive medical care—but it’s estimated that more than 800 patients could have been treated in the community if medically-supported substance abuse detoxification programs had greater capacity.
- Only 15 percent of community dentists surveyed in 2007 reported accepting Medicaid insurance and just 8 percent (five practices) said they were accepting new Medicaid patients. Restrictions on who can receive care at such clinics further limits dental care options for these individuals, particularly for low-income adults.

Next, the group will shape a set of recommendations for future implementation strategies, pilot programs and planning efforts to address capacity challenges and close service gaps.

The U-M Health System and Saint Joseph Mercy Health System are joint sponsors of the effort. In addition, the WHI includes representatives from the Center for Healthcare Research & Transformation, health plans, county government, community services, physicians, and safety net providers.

“The collaborative spirit of this group is impressive. Already, our work has shown that the needs in Washtenaw County are great, and that we must work together to address them,” says Doug Strong, CEO of the University of Michigan Hospitals and Health Centers, part of the U-M Health System. “It will take an unprecedented collective effort but we have started on the journey.”

Strong’s counterpart at the county’s other major health system agrees. “St. Joe’s is honored to be a part of such an extraordinary effort to better serve our community. As we move forward, it is crucial we look for where we can re-direct and re-invest health care resources to provide access to primary, preventive, dental and mental health care to all Washtenaw County residents,” says Robert Casalou, president and CEO of St. Joseph Mercy Ann Arbor, Livingston and Saline hospitals, part of the Saint Joseph Mercy Health System.

The facilitator for the WHI is Marianne Udow-Phillips, the director of the Center for Healthcare Research & Transformation— a joint venture of the University of Michigan and Blue Cross Blue Shield of Michigan. She says, “This remarkable effort reveals the challenges facing Washtenaw County leaders in improving access to care today and in the future, but the significant gaps we found are not unique to this community or Michigan. We hope our process in Washtenaw County will spark groups in other communities, both locally and nationally, to start similar discussions, with the Washtenaw County Health Initiative serving as one example of what can be done now to meets residents’ health care needs.”

For more information on this effort, including a list of all participants and a document detailing current gaps in Washtenaw County health care, visit www.WashtenawHealthInitiative.org.

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The Washtenaw County Health Initiative is a voluntary, county-wide collaboration focused on how to improve access to coordinated care for the low-income, uninsured, and Medicaid populations. The work of this group is on both how to improve care today for these priority populations and on 2014, when federal health care reform is expected to be more fully implemented. The effort is facilitated by the Center for Healthcare Research & Transformation and includes representatives from the University of Michigan Health System, Saint Joseph Mercy Health System, health plans, county government, community services, physicians, and safety net providers. Members are focused on building partnerships and identifying collaborative action that can move the county toward its ultimate goal: improving the health of its citizens now and in the future. For more information, visit www.WashtenawHealthInitiative.org.