Fact Sheet: Community Regional Medical Center Medi-Cal Population

**Background**
Community Regional Medical Center is the Central San Joaquin Valley’s largest healthcare provider and safety net, and home to the only comprehensive burn and Level 1 trauma centers between Los Angeles and Sacramento. Community Regional is among California’s leading provider of Medi-Cal services especially for inpatient hospitalizations, births and clinic visits.

Community Regional has one of the highest number of inpatient Medi-Cal discharges in California, far above the Los Angeles County/USC Medical Center, the safety net for that region.

The expansion of insurance coverage through the Affordable Care Act (ACA) – particularly Medi-Cal – has dramatically affected the nonprofit Community system in patient volume, care accessibility and finances.

**Our Medi-Cal Population**
CRMC is one of the only providers for many medical specialties, taking referrals from federally qualified health centers (FQHCs) and outlying hospitals.

One-third of Californians are covered by Medi-Cal

49% of Central Valley residents are covered by Medi-Cal

85% of Community Regional’s patients were covered by government insurance in 2016-- more than 53% Medi-Cal

**Emergency Department Visits (FY17)**
CRMC’s 56,000-square-foot emergency department is one of the largest in California.

More than 110,000 ER patients; Medi-Cal = 72% of total ER patients in 2017

Pre-ACA, 43% were Medi-Cal

**Ambulatory Clinic Visits (FY17)**
133,000 clinic visits

Medi-Cal = 69% of total clinic visits

Pre-ACA, 51% were Medi-Cal

**Births & Pediatric Specialty Services (FY17)**
Medi-Cal births among the top 10 hospitals in California

Medi-Cal patients 89% of all births at CRMC

Same pre-ACA because mothers qualified for Medi-Cal

**Other High-Acuity Services**
Medi-Cal cases account for:

50% of general surgery vs. 34% pre-ACA

40% of Neurology vs. 28% pre-ACA

38% of Cardiology vs. 26% pre-ACA

**Finances**
*Medi-Cal pays about 70% of costs for services*

Loss of $238 per Medi-Cal case for ER services

Loss of $2,166 per Medi-Cal case for birthing services

Spent $225 million in uncompensated services last year – 15% of operating expenses

Nearly $1.7 billion in past decade – includes $785 million in Medi-Cal shortfall, even after government-assistance programs such as Disproportionate Share Hospital (DSH) & provider fee funding

**Sustaining & Creating Access to Care**

**Addressing the Physician Shortage**
48 primary care physicians per 100,000 people in Central Valley vs. 85 physicians per 100,000 in the Bay area

Only 52% of the region’s primary care physicians will accept new Medi-Cal patients

Community’s 40-year partnership with UCSF Fresno educates 300+ physicians a year

Partnership has educated more than 3,000 physicians – 50% of whom opened practices in the Valley since 2000

Community invested $510 million in last decade for unreimbursed medical education expenses for residency slots exceeding our federal payment cap
Expanding Hospital Beds
The Valley is chronically short of inpatient hospital beds, and Community has been expanding as quickly as financially possible.

In June 2010 we had 959 beds; as of June 2018 CMC has 1,117 beds, most of them at Community Regional.

In 2016, Community Regional had the second most patient census days of any hospital in California. Only Cedars Sinai Medical Center, with 200 more beds, had a higher census in 2016.

Innovations and Partnerships
CRMC opened a prompt care center, providing an alternative to the ER for those with non-emergent needs.

Expanded Community Connections program, reaching out to most frequent users of ER services to manage their chronic healthcare needs and connect them to social services and housing.

Partnered with the Fresno County Department of Social Services to enroll uninsured patients in Medi-Cal coverage under the Hospital Presumptive Eligibility program. Since January 2014, Community Regional’s admitting staff have enrolled 15,671 patients.

Working with Fresno County, to provide specialty care services to undocumented patients, assisted by $5.5 million in one-time supplemental funds provided by the California Legislature through the leadership of Assembly member Henry T. Perea.

Since 2011, Community has contributed $350,000 in support funding to the Medical Respite Center. The Respite Center, a collaborative effort by area hospitals, provides continuing healthcare to discharged, low-income, vulnerable and homeless patients in a safe setting. Community’s home health clinical staff and case management coordinate care at the Respite Center and link patients to social service resources.

Community’s Chronic Lung Disease Program works with UCSF Fresno to provide in-home interventions for vulnerable patients with high ER visits. Data published in academic journals shows a 65% reduction in hospitalizations and 79% reduction in ER visits and increased adherence to inhaler use among patient participants.

*Data from Community Medical Centers FY 2017.*