

042 - HEALTH CARE AGENCY

Operational Summary

Mission:

The Health Care Agency is dedicated to protecting and promoting the optimal health of individuals, families, and our diverse communities through partnerships, community leadership, assessment of community needs, planning and policy development, prevention and education, and quality services.

Strategic Goals:

- Prevent disease and disability, and promote healthy lifestyles.
- Assure access to quality health care services.
- Promote and ensure a healthful environment.
- Recommend and implement health policy and services based upon assessment of community health needs.

Key Outcome Indicators:

Performance Measure	2002 Business Plan Results	2003 Business Plan Target	How are we doing?
HEALTH CARE ACCESS FOR CHILDREN What: A measure of access to health care for children. Why: Insured children are more likely to receive health care and preventive services when needed.	The percentage of all children with health insurance increased to 91.4% in survey published in 2002.	Continued increase in the number of children with health insurance coverage.	Progress has been made with a 23% reduction in the number of uninsured children, from an uninsured rate of 12.7% in 1998 to 8.6% in 2001. Since 1999 the total number of children enrolled in public programs has more than doubled to over 227,000 as of December 2002.
CHRONIC DISEASES What: Measures of the leading causes of death for Orange County residents. Why: The 3 leading causes accounted for 63% of deaths & over \$1.45 billion in hospital charges in 2000.	OC has significantly reduced the mortality rates for the three leading causes of death; cancer, heart disease, and cerebrovascular disease (stroke) and are now below the state-wide rates.	A continued reduction in mortality rates toward HP2010 objectives for all diseases, especially for cancer, heart disease, and cerebrovascular disease.	OC has met or is approaching ten of the twenty top mortality/morbidity indicators for HP2010. However, OC death rates for the top 3 leading causes of death (cancer, heart disease, and stroke) remain well above national HP2010 target objectives.

At a Glance:	
Total FY 2002-2003 Actual Expenditure + Encumbrance:	436,760,491
Total Final FY 2003-2004 Budget:	471,435,890
Percent of County General Fund:	19.23%
Total Employees:	2,707.00



Key Outcome Indicators: (Continued)

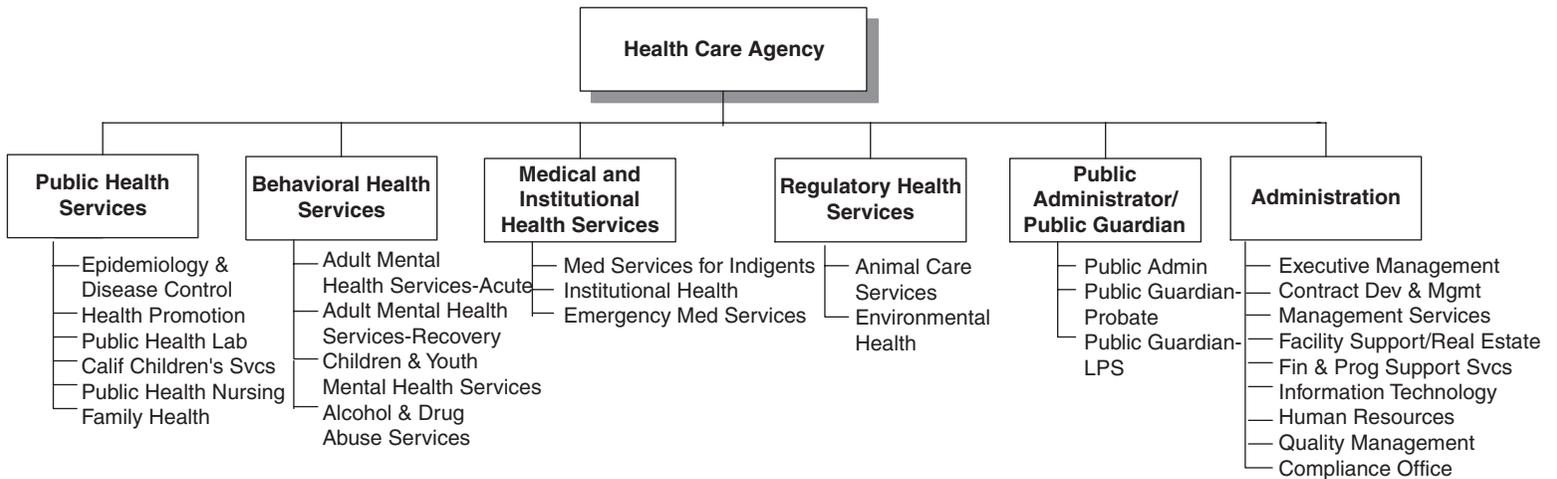
Performance Measure	2002 Business Plan Results	2003 Business Plan Target	How are we doing?
COMMUNICABLE DISEASES - AIDS AND TUBERCULOSIS What: Measures of annual morbidity and mortality rates for AIDS and TB. Why: Both AIDS and TB represent serious threats to public health locally, nationally, and worldwide.	<p>The rate of new AIDS cases continues to decline as do the number of deaths. However, the number of persons living with AIDS continues to increase. While a downward trend continues since a peak in 1993, tuberculosis infections increased 13% in 2002 from 2000-01 levels.</p>	<p>Continued decrease in the number of new AIDS cases and improved disease management of existing cases. Identify and provide preventive therapy to an estimated 275,000 individuals with latent TB infections.</p>	<p>In 2001, 249 AIDS cases were reported, a 22% decline from the 318 cases reported in 2000. The number of persons living with AIDS increased 4.2% in 2001 to 2,851 persons. The number of TB infections dropped 36% since 1993. The 2001 TB rate (9.5 per 100,000) remains well above the HP2010.</p>
OCEAN AND RECREATIONAL WATER QUALITY What: A measure of closures due to bacterial contamination to protect the public from infections. Why: Contaminated ocean water is a threat to the personal and economic health of the community.	<p>Beach-mile-day closures reduced 80% from 111 in 1999 to 25 in 2002.</p>	<p>Further reduction in beach-mile-day closures through continued testing & identification of sources of bacteria.</p>	<p>The total number of water closures decreased by 34% between 2001 and 2002. Moreover, the magnitude of beach-mile-day closures was reduced by 80%, significantly lowering the overall impact of the closures.</p>
VIOLENCE AND UNINTENTIONAL INJURY What: A measure of mortality due to such things as falls, drowning, fire, guns, or violence (homicide). Why: Unintentional injuries leading cause of death for ages 1-34; homicide ties leading cause for 15-19.	<p>The rate of preventable loss of life due to unintentional and intentional injuries has declined over the past decade and OC is near or below (e.g., motor vehicle crashes, homicide) the HP2010 objectives for several indicators.</p>	<p>Maintain and/or work toward achieving HP2010 target objectives for deaths due to violence or unintentional injuries.</p>	<p>The rate of such preventable losses due to unintentional and intentional injuries has declined over the past decade and OC is near (e.g., suicide, unintentional injuries) or below (e.g., motor vehicle crashes, homicide) the HP2010 objectives.</p>

Fiscal Year FY 2002-2003 Key Project Accomplishments:

- Implementation of significant changes to the Medical Services for Indigents program, including the identification of receiving hospitals, and strengthening of case management practices via hospital-based physicians and County nursing staff in response to issues of access, care management, and cost.
- Collaborative planning for bioterrorism response with cities, hospitals and other stakeholders, resulting in Orange County being the first in the state to have a fully approved Bioterrorism Response Plan.
- Partnering with the community in the Tobacco Settlement Revenue advisory group process, resulting in: augmentation of the public health nurse component of the Preventive Health Care for the Aging Program (PHCA) and Senior Health Outreach Prevention Program (SHOPP); initiation of a senior home visitation program by Latino Health Access for Latino communities; provision of funding for non-emergency medical transportation for seniors to the Office on Aging; and provision of additional funding to the Coalition of Community Clinics for the treatment of chronic diseases in the low income, uninsured, older adult population.
- Design of a rapid communication notification system for Orange County physicians for outbreaks and other medical alerts.
- Initiation of operations at the temporary satellite water quality laboratory on Shellmaker Island, in cooperation with the City of Newport Beach and the State Department of Fish and Game.
- Initiation of services to the 3,500 clients assessed by the Probation Department for eligibility for Proposition 36 services.
- Expansion of the Domestic Violence Substance Abuse Program to additional courts.
- Development of a campaign to reduce stigma associated with mental illness.
- Implementation of a Countywide health education media campaign promoting healthy lifestyles, targeting older adults.

- Publication of a community-wide strategic plan to increase the number of children with health insurance and a medical home (i.e. primary health care provider).
- Securing of funding for the Medical Director position for the Child Abuse Services Team (CAST).
- Provision of additional transitional housing capacity for the homeless mentally ill.
- Implementation of a monitoring process for Tobacco Settlement Revenue (TSR) projects.
- Collaboration with the Community Services Agency and Social Services Agency in producing the first Condition of Older Adults Report.
- Support of the HCA Labor/Management Committee's project for the identification of cost savings and efficiency measures.
- Significant progress toward the implementation of IRIS (the Integrated Records Information System).
- Completion of all year-two recommended Americans with Disabilities Act modifications, and initiation of remaining year-three recommended modifications.
- Provision of Health Insurance Portability and Accountability Act (HIPAA) training and education to all new and existing staff to ensure compliance.
- Identification of all HIPAA impacted systems; evaluation of new security, privacy and transaction standards; and development of a schedule for bringing systems into compliance.

Organizational Summary



PUBLIC HEALTH SERVICES - Monitors the incidence of disease and injury in the community and develops preventive strategies to maintain and improve the health of the public.

BEHAVIORAL HEALTH SERVICES - Provides a culturally competent and client-centered system of behavioral health services for all eligible County residents in need of mental health care and/or treatment for alcohol and other drug abuse.

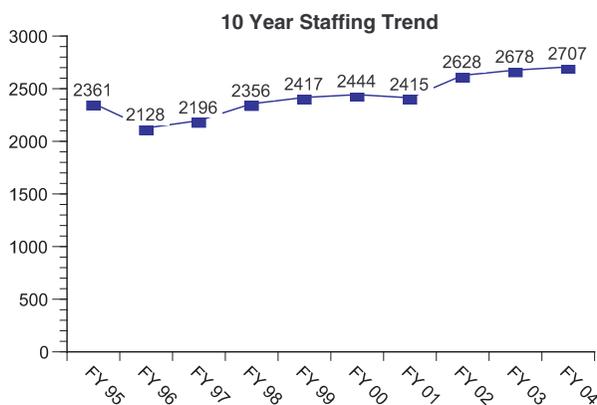
MEDICAL & INSTITUTIONAL HEALTH SERVICES - Coordinates emergency medical care, provides medical and behavioral health care to adults and children in institutional settings, and contracts for essential medical services for patients for whom the County is responsible.

REGULATORY HEALTH SERVICES - Ensures food safety and water quality and protects the public's health and safety from harmful conditions in the environment, from animal-related injury, and from disease and nuisance hazards through the enforcement of health and safety standards.

PUBLIC ADMINISTRATOR/PUBLIC GUARDIAN - The Public Administrator protects the assets and manages the affairs of deceased residents of Orange County who at the time of death left no known heirs, no will, no named executor or an executor who is ineligible. The Public Guardian is a conservator for individuals unable to care for themselves, and assumes responsibility for the overall welfare of the individual including placement, treatment and management of their assets.

ADMINISTRATION - Promotes and provides for the fiscal and operational integrity of the Agency through sound management principles and practices, and provides support services to Agency programs. Support services include Financial and Administrative Services, Information Technology, Human Resources, Quality Management, and Office of Compliance.

Ten Year Staffing Trend:



Ten Year Staffing Trend Highlights:

- Since FY 1994-95 the number of HCA positions has grown by 328, which averages approximately 1.5% per year. In FY 1995-96, the number of employees dipped by 233 positions following the County's declaration of bankruptcy. In FY 2000-01 the number of employees decreased by 29 positions due to restructuring. From FY 2000-01 to FY 2001-02, 213 positions were added. This included 51 positions for the Theo Lacy expansion, 23 for Tobacco Settlement Health Care Priorities, and 20 positions for implementation of State staffing standards for California Children's Services. From FY 2001-02 to FY 2002-03, HCA added 29 positions. These included two positions for Proposition 10 Federal Financial Participation, two positions for HIV/AIDS prevention, ten positions for Public Health Field Nursing services, three positions for Alcohol and Drug Abuse services, eight for

Substance Abuse Mental Health Services Administration (SAMHSA), and four for Nutrition Services. Twenty-one positions were added for FY 2002-03 BARs, including 19 positions related to Anti-terrorism and 2 positions for the Methadone Clinic. In the FY 2003-04 Requested Budget, 55 positions were deleted to stay within Net County Cost limits. This included 32 positions from Correctional Health due to centralizing medical and mental health services. Also deleted were 16 positions from the TB program, four positions from the Public Health Laboratory, and three positions from Alcohol and Drug Abuse Services. Also in the FY 2003-04 Requested Budget, 66 positions were added due to transferring Public Administrator/Public Guardian from the Community Services Agency to the Health Care Agency. Nineteen positions were added for FY 2003-04 BARs including 2 positions for Lab Testing, 6 positions for California Children's Services, 7 positions for Tuberculosis Treatment, and 4 positions for Public Administrator/Public Guardian.

Budget Summary

Plan for Support of the County's Strategic Priorities:

Costs to prepare for and respond to potential terrorist threats are included in the Requested Budget. Also included in the base budget are: site design costs for the relocation of the Animal Shelter; construction costs for the Watershed and Ocean Monitoring lab; health priorities funded from Tobacco Settlement Revenue; and in-custody Alcohol and Drug rehabilitation services funded by Tobacco Settlement Revenue.

Changes Included in the Base Budget:

Agency base budget appropriations total \$471,481,940, for a decrease of \$0.7 million from the current modified budget for FY 2002-03. Despite major cost increases for salaries, employee health insurance, and retirement, the budget decreases by a small amount due to streamlining of programs and services Agency-wide to meet the Net County Cost limits. Major changes in Behavioral Health include reducing inpatient services for chronically mentally ill and reducing outpatient mental health and substance abuse treatment services. Major changes in Correctional Health



include centralizing medical and mental health services, reducing evening and weekend staff coverage, and reducing dental services. Major changes in Public Health include reducing Tuberculosis (TB) skin testing and treatment of inactive TB, reducing laboratory testing for infectious diseases, and reducing disease surveillance and prevention.

Another major change was the addition of Public Administrator/Public Guardian to the HCA budget. However, the Requested Budget for Public Administrator/Public Guardian includes a reduction in staff serving as conservator for individuals, and managing the assets of clients and the deceased.

Approved Budget Augmentations and Related Performance Results:

Unit/Amount	Description	Performance Plan	Ref. Num.
RESTORATION OF SPECIAL DISEASES LABORATORY TESTING Amount: \$ 250,828	Restores 5,615 test kits and the associated staff time of two positions	Perform 5,615 tests per year on persons at risk for infection	042-001
INSTITUTE FOR MENTAL DISEASE (IMD) - RESTORE FUNDING FOR IMD BEDS Amount: \$ 606,117	Restores Institute for Mental Disease beds for seriously and persistently mentally ill adults (IMD)	Increase number of patients who will develop skills/ability in the appropriate clinical setting	042-002
CALIFORNIA CHILDREN'S SERVICES (CCS) MEDICAL THERAPY PROGRAM - RESTORE 6 POSITIONS Amount: \$ 453,614	Provides 6 positions for physical/occupational therapy to children with severe physical disabilities	Therapists would provide services to 260 disabled children	042-003
TUBERCULOSIS ELIMINATION - RESTORATION OF TREATMENT FOR LATENT TB INFECTION (LTBI) Amount: \$ 487,742	Restore capacity to treat high-risk persons with latent tuberculosis infection in Orange County	Identify and treat 2,400 persons with Latent TB Infection	042-004
RESTORE 1 DEPUTY PUBLIC ADMINISTRATOR/GUARDIAN II POSITION Amount: \$ 57,472	Restore one Deputy Public Administrator/Guardian II position	Maintain the caseload level and service level currently provided by the Public Guardian LPS section	042-005
RESTORE 1 ACCOUNTING ASSISTANT II POSITION Amount: \$ 44,884	Restore one Accounting Assistant II position	Maintain the service level currently provided by the PA/PG accounting section	042-006
RESTORE 2 WAREHOUSE WORKER II POSITIONS Amount: \$ 84,982	Restore two Warehouse Worker II positions	Keep the average length of time that protected property is in the field at approximately 9 days	042-007
IMPACT OF MAY REVISE Amount: \$ (2,031,689)	Reflects the impact of the State's May budget revise on HCA.	N/A	042-008

Final Budget and History:

Sources and Uses	FY 2001-2002 Actual Exp/Rev	FY 2002-2003 Budget As of 6/30/03	FY 2002-2003 Actual Exp/Rev ⁽¹⁾ At 6/30/03	FY 2003-2004 Final Budget	Change from FY 2002-2003 Actual	
					Amount	Percent
Total Positions	-	2,672	2,672	2,707	35	1.31
Total Revenues	366,799,924	401,762,854	361,591,439	395,944,274	34,352,835	9.50
Total Requirements	417,475,191	472,151,649	431,410,157	471,435,890	40,025,733	9.28
Net County Cost	50,675,267	70,388,795	69,818,718	75,491,616	5,672,898	8.13

(1) Amounts include prior year expenditures and exclude current year encumbrances. Therefore, the totals listed above may not match Total FY 2002-03 Actual Expenditure + Encumbrance included in the "At a Glance" section.

Detailed budget by expense category and by activity is presented for agency: Health Care Agency in the Appendix on page 469.



Highlights of Key Trends:

- The Health Care Agency will face a number of significant challenges in FY 2003-04. At this time the most significant challenge is the uncertainty of the economy, and its impact on funding and services. The Agency's largest revenue source is Realignment, which is funded from sales tax collections and Vehicle License Fee collections. A prolonged economic downturn could affect the funding levels received next fiscal year at a time

when demand for health care services will very likely be increasing. In addition, the downturn in the economy will affect revenue collected by the State. Funding decisions made by the Governor and Legislature to balance the State budget could have dramatic impacts on services at the local level. The Agency will continue to work with its County and community partners in carrying out services during this uncertain economic period.

Budget Units Under Agency Control

No.	Agency Name	Public Health Services	Behavioral Health Services	Medical & Institutional Health Services	Regulatory Health Services	Public Administrator/ Public Guardian	Administration	Total
042	Health Care Agency	104,849,051	203,874,777	113,644,966	30,109,806	4,475,283	14,482,007	471,435,890
138	Medi-Cal Administrative Activities/Targeted Case	0	0	0	0	0	16,320,000	16,320,000
	Total	104,849,051	203,874,777	113,644,966	30,109,806	4,475,283	30,802,007	487,755,890