

# Health Care Funding

## Manatee County Government



December 4, 2012



# History

## Manatee County Health Care Fund

- The County Owned Hospital (Manatee Memorial) was sold in 1984
- The proceeds from this sale (the “Corpus” – 45 million dollars) generated interest which was used to provide indigent health care in Manatee County:
  - 75% of the interest was allocated to Manatee Memorial Hospital and physicians for emergency care of the uninsured patient.
  - 25% of the interest was allocated to the Health Care Trust Fund (or 25% Fund) used for various community health-related purposes. A Committee of citizens made spending recommendations to the Board of County Commissioners for this portion.
- In April 2008, the Board of County Commissioners repealed Manatee County Ordinances 84-16, 90-63, 00-54, 01-18, and 04-79, effective June 1, 2008, which collectively provided for the distribution of the Health Care funds.



# History

## Manatee County Health Care Fund (Cont'd)

- In May 2008, the Board adopted Resolution R-08-134 which created the Manatee County Health Care Fund. The Health Care Fund includes all proceeds from the sale of Manatee Memorial Hospital and all interest generated by these proceeds. Other separate Trust Funds for the Corpus and the Interest were dissolved effective June 1, 2008 and October 1, 2008.
- Resolution R-08-134 also created the Manatee County Hospital and Hospital-based Physician Indigent Health Care Program, and Service Agreements with Manatee Memorial Hospital, with Lakewood Ranch Medical Center and with L.W. Blake Memorial Hospital, were approved. These agreements have been in place since June 1, 2008.



# Health Care Access Task Force Recommendations (#1)

(Presented to Board in 2008 and 2011)

- Develop and implement a comprehensive cost effective funding strategy for payment of indigent health care services in Manatee County.
- **RECOMMENDED ACTION:** *Establish an annualized spending plan of the Health Care Fund to provide for uncompensated health care services.*
- **Status:** *New service agreements negotiated and approved in 2008 and in 2011 with Manatee Memorial Hospital / Lakewood Ranch Medical Center and HCA Blake Medical Center for uncompensated health care services.*
- *Healthcare Alliance Funding Committee is researching strategies for future funding needs related to healthcare.*



# Health Care Access Task Force Recommendations (#2)

- Establish a public education campaign targeted to the general public regarding the half (.5) cent surtax to improve access to health care for residents of Manatee County.
- ***Status: The Manatee Healthcare Alliance Funding Committee is researching funding options.***





## Health Care Access Task Force Recommendations (#3)

- To decrease costs, indigent families should have access to care in the hospital or a health care provider's office. Funds for payment for services should follow the patient to the health care provider or hospital. Expansion of eligible services should be clearly defined within the new Manatee County Indigent Health Care Program and would be offered only to persons meeting the approved eligibility requirements.
- **RECOMMENDED ACTION:** *Payment to uncompensated health care providers wherever services are rendered with no lapse in payment; expansion of eligible chronic care services.*
- **Status:** *New service agreements with Manatee Memorial Hospital / Lakewood Ranch Medical Center and HCA Blake Medical Center provide for continuous service.*



# Health Care Access Task Force Recommendations (#4)

- The current income eligibility of indigents should be increased from 125% Federal Poverty Level (FPL) to 200% FPL and include an increase of payment options for eligible services.
- ***Status: 2008 service agreements with Manatee Memorial Hospital / Lakewood Ranch Medical Center and HCA Blake Medical Center included an increase from 125% to 135% FPL for eligible patients; 2011 service agreements increased to 200% FPL.***

# Health Care Access Task Force Recommendations (#5)

- Develop a designated point of service and coordinated case management model for indigent health care for both services and prescriptions to promote access to care and avoid impediments to prompt treatment.
- **RECOMMENDED ACTION:** *Establish an advisory group for implementation and monitoring of a coordinated case management program.*
- **Status:** *Objective of Manatee Healthcare Alliance Access, Coordination and Integration Committee.*





# Health Care Access Task Force Recommendations (#6)

- Undertake a County-wide Health Care Study to include and build upon work conducted by the Health Care Access Task Force, inclusive of medical, behavioral and public health needs.
- *Status: Study completed November 2008.*



# Health Care Access Task Force Recommendations (#7)

- Recommend legislative changes to impact the delivery and payment of health care services to the uninsured in Manatee County and across the state of Florida.
- **RECOMMENDED ACTION:** *Proposals to the Manatee County Board of County Commissioners and Legislative Delegation .*
- **Status:** *Proposals provided March 2008 and March 2009. Objective of Manatee Healthcare Alliance.*



# Health Care Access Task Force Recommendations (#8)

- Improve access to prevention, health care, specialty and ancillary care to Medicaid and low income uninsured patients not eligible for Manatee County indigent health care services.
- **RECOMMENDED ACTION:** *Encourage providers to open access by developing a system for preventative case management; specialty care with an authorized and improved payment plan.*
- **Status:** *Objective of Manatee Healthcare Alliance Education, Wellness and Prevention Committee and the Manatee Healthcare Alliance Access, Coordination and Integration Committee.*



# Health Care Access Task Force Recommendations (#9)

- Develop on-going self-evaluation and assessment for Manatee County indigent health care services.
- **RECOMMENDED ACTION:** *Establish an advisory group to conduct performance monitoring to reduce the duplication of services and to provide suggestions to streamline services.*
- **Status:** *Objective of Manatee Healthcare Alliance Access, Coordination and Integration Committee.*



# Health Care Access Task Force Recommendations (#10)

- Request name change for the Indigent Health Care Task Force.
- **RECOMMENDED ACTION: *Seek Board approval to change the name of the task force to the Health Care Access Task Force.***
- ***Status: Approved. Task Force sunset December 2009.***
- ***Manatee Healthcare Alliance formed in 2010 and operational.***



# Health Care Access Task Force Recommendations (#11)

- Recommend full implementation of alcohol and drug abuse program related to a Marchman facility at Manatee Glens.
- **RECOMMENDED ACTION:** *Release County funds for implementation.*
- **Status:** *Approved November 2007.  
Addictions Emergency Response Services (Marchman)  
available through Manatee Glens.*

# Health Care Access Task Force Recommendations (#12)

- Form a community-wide Health Care Alliance to address health care issues regardless of consumer income or ability to pay.
- **RECOMMENDED ACTION:** *Community-wide health care summit to establish strategy to improve access to health care.*
- **Status:** *Community summit held in November 2010.*
- *Manatee Healthcare Alliance established and operational.*





# Health Care Access Task Force Recommendations (#13)

- Encourage participation in establishing health care residency programs in Manatee County to improve shortage of health care providers and access to care for consumers.
- ***Status: Implemented by Manatee Memorial Hospital.***
- ***20 Participants Currently in the Residency Program***
  - ***7 Family Practice***
    - *4 Second Year*
    - *3 First Year*
  - ***7 Internal Medicine***
    - *3 Second Year*
    - *4 First Year*
  - ***6 Traditional rotating interns who will move on to specialties after this year***
- ***Plan is to fill all 44 slots by next summer***
- ***LECOM has Osteopathic residents and dental students providing services.***

## HEALTH CARE SPENDING ANALYSIS

### MANATEE COUNTY GOVERNMENT

	Actual 2010	Actual 2011	Projected 2012	Adopted 2013	Projected 2014	Projected 2015
<b>HEALTH CARE FUND</b>						
Beginning Balance	\$48,891,858	\$40,891,711	\$35,886,079	\$26,496,025	\$17,124,711	\$7,757,412
Revenues	\$668,213	\$297,597	\$175,750	\$128,250	\$95,000	\$47,500
<b>Increased Cost per CSD (3% yearly)</b>						\$266,989
Manatee Memorial (MMH)	\$4,207,588	\$4,523,127	\$5,625,000	\$5,625,000	\$5,625,000	\$5,625,000
Physicians	\$55,789	\$458,432	\$870,639	\$1,000,000	\$1,000,000	\$1,000,000
Rural Health Services	\$255,030	\$406,175	\$363,670	\$363,670	\$363,670	\$363,670
Mental Health Center (Marchman)	\$450,000	\$450,000	\$450,000	\$450,000	\$450,000	\$450,000
*Mental Health Center (M. Glens)	\$224,809	\$224,809	\$224,809	\$574,809	\$574,809	\$574,809
*Mental Health Center Baker (M Glens)	\$0	\$0	\$0	\$195,000	\$195,000	\$195,000
Health Information Exchange	\$50,000	\$0	\$0	\$0	\$0	\$0
General Fund Cost Allocation	\$100,000	\$100,000	\$100,000	\$100,000	\$100,000	\$100,000
Health Care Study	\$0	\$0	\$0	\$0	\$0	\$0
<b>Indigent Medical Billing Solutions</b>	\$0	\$0	\$8,482	\$100,000	\$45,000	\$45,000
Blake Medical Center	\$229,148	\$504,054	\$1,036,150	\$1,091,085	\$1,108,820	\$1,108,820
LakeWood Ranch Hospital	\$0	(\$272,098)	\$0	\$0	\$0	\$0
Transfer to Children Services	\$0	\$22,652	\$0	\$0	\$0	\$0
<b>TOTAL HEALTH CARE FUND</b>	<b>\$5,572,364</b>	<b>\$6,417,151</b>	<b>\$8,678,750</b>	<b>\$9,499,564</b>	<b>\$9,462,299</b>	<b>\$9,729,288</b>
<b>BALANCE OF FUND</b>	<b>\$40,892,167</b>	<b>\$34,474,560</b>	<b>\$27,383,079</b>	<b>\$17,124,711</b>	<b>\$7,757,412</b>	<b>(\$1,924,376)</b>
<b>GENERAL FUND</b>						
Manatee Memorial (MMH)	\$1,392,413	\$1,300,000	\$1,300,000	\$1,300,000	\$1,300,000	\$1,300,000
Physician Payments Non-OB	\$0	\$0	\$0	\$0	\$0	\$0
Hospital Audits	\$14,068	\$1,927	\$20,000	\$20,000	\$20,000	\$20,000
Prescriptions (Rural Health)	\$161,446	\$150,810	\$200,000	\$200,000	\$200,000	\$200,000
HCRA	\$472,465	\$275,639	\$150,000	\$150,000	\$150,000	\$150,000
Public Health Care Unit	\$1,139,680	\$1,141,054	\$1,106,312	\$1,106,312	\$1,106,312	\$1,106,312
Medicaid Match	\$2,130,716	\$4,571,206	\$6,070,613	\$3,593,648	\$3,593,648	\$3,593,648
*Mental Health Center ( M Glens)	\$708,308	\$706,582	\$675,951	\$666,283	\$666,283	\$666,283
*Substance Abuse (M Glens)	\$248,728	\$248,728	\$236,291	\$236,291	\$236,291	\$236,291
<b>Substance Abuse (YSA Funds)</b>	<b>\$533,780</b>	<b>\$514,157</b>	<b>\$489,733</b>	<b>\$0</b>	<b>\$489,733</b>	<b>\$489,733</b>
Prison Health Services	\$5,757,983	\$5,777,580	\$5,700,000	\$5,700,000	\$5,700,000	\$5,700,000
Rural Health Services	\$540,087	\$583,386	\$430,500	\$430,500	\$430,500	\$430,500
We Care	\$76,029	\$78,922	\$74,975	\$74,975	\$74,975	\$74,975
<b>TOTAL GENERAL FUND</b>	<b>\$13,175,703</b>	<b>\$15,349,991</b>	<b>\$16,454,375</b>	<b>\$13,478,009</b>	<b>\$13,967,742</b>	<b>\$13,967,742</b>
<b>CHILDREN SERVICES TAX</b>						
Manatee County Health Dept	\$8,730	\$7,630	\$7,172	\$7,172	\$7,172	\$7,172
*Manatee Children's Services	\$79,447	\$69,411	\$69,411	\$105,291	\$105,291	\$105,291
Mental Health Center (M Glens)	\$178,246	\$153,810	\$153,030	\$162,698	\$153,030	\$153,030
Substance Abuse (M Glens)	\$127,639	\$76,093	\$82,810	\$572,543	\$82,810	\$82,810
Rural Health Services	\$196,579	\$118,726	\$111,280	\$0	\$0	\$0
Boys & Girls Club (Child Dental)	\$15,000	\$13,800	\$13,110	\$13,110	\$13,110	\$13,110
<b>TOTAL CHILDREN'S FUND</b>	<b>\$605,641</b>	<b>\$439,470</b>	<b>\$436,813</b>	<b>\$860,814</b>	<b>\$361,413</b>	<b>\$361,413</b>
<b>TOTAL HC EXPENDITURES</b>	<b>\$19,353,708</b>	<b>\$22,206,612</b>	<b>\$25,569,938</b>	<b>\$23,838,387</b>	<b>\$23,791,454</b>	<b>\$24,058,443</b>

Last Updated 10/08/2012



# Health Care Expenditures Projected Through 2015

	Actual 2010	Actual 2011	Projected 2012	Adopted 2013	Projected 2014	Projected 2015
<b>GENERAL FUND</b>						
Manatee Memorial (MMH)	\$1,392,413	\$1,300,000	\$1,300,000	\$1,300,000	\$1,300,000	\$1,300,000
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*Mental Health Center ( M Glens)	\$708,308	\$706,582	\$675,951	<b>\$666,283</b>	<b>\$666,283</b>	<b>\$666,283</b>
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Rural Health Services	\$196,579	\$118,726	\$111,280	\$0	\$0	\$0
Boys & Girls Club (Child Dental)	\$15,000	\$13,800	\$13,110	\$13,110	\$13,110	\$13,110
<b>TOTAL CHILDREN'S FUND</b>	<b>\$605,641</b>	<b>\$439,470</b>	<b>\$436,813</b>	<b>\$860,814</b>	<b>\$361,413</b>	<b>\$361,413</b>



# Health Care Expenditures Projected Through 2015

## HEALTH CARE FUND ANALYSIS

### MANATEE COUNTY GOVERNMENT

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<b>GENERAL FUND</b>						
<b>TOTAL GENERAL FUND</b>	<b>\$13,175,703</b>	<b>\$15,349,991</b>	<b>\$16,454,375</b>	<b>\$13,478,009</b>	<b>\$13,967,742</b>	<b>\$13,967,742</b>
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<b>TOTAL CHILDREN'S FUND</b>	<b>\$605,641</b>	<b>\$439,470</b>	<b>\$436,813</b>	<b>\$860,814</b>	<b>\$361,413</b>	<b>\$361,413</b>
<b>TOTAL HC EXPENDITURES</b>	<b>\$19,353,708</b>	<b>\$22,206,612</b>	<b>\$25,569,938</b>	<b>\$23,838,387</b>	<b>\$23,791,454</b>	<b>\$24,058,443</b>

Last Updated 10/08/2012



# County Expense By Service/Entity

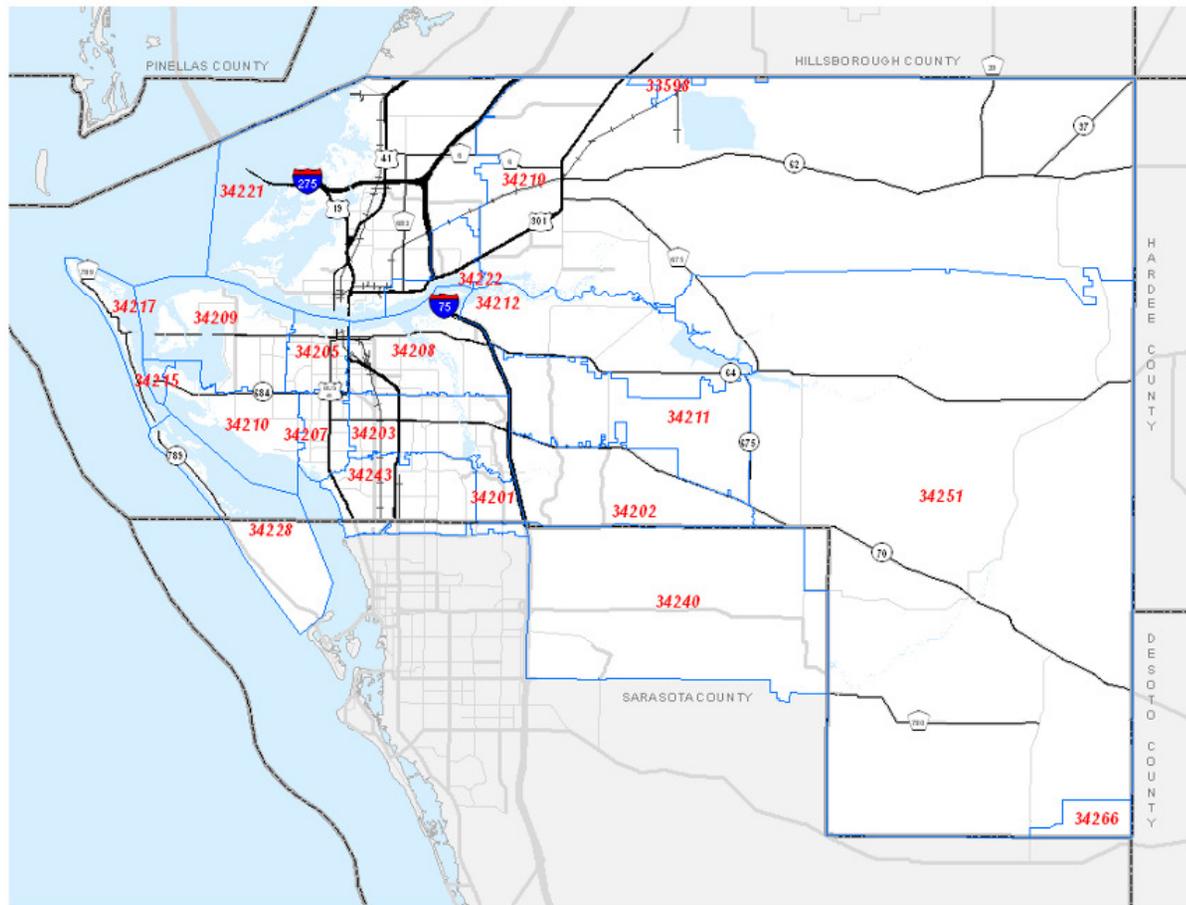
HEALTH CARE FUNDING PROVIDED BY MANATEE COUNTY GOVERNMENT 2012					
FY 2012 - CONTRIBUTION					
BY FUNDING SOURCE					
SERVICE AREA/ENTITY	General Revenue	Children's Services	Health Care Fund	Service Totals	Percentages
HOSPITAL/HOSPITAL BASED PHYSICIANS	\$1,300,000	\$0	\$7,531,789	\$8,831,789	34.54%
WALK IN CLINICS	\$339,746	\$0	\$363,670	\$703,416	2.75%
HIV/AIDS	\$90,754	\$7,172	\$0	\$97,926	0.38%
MENTAL HEALTH	\$675,951	\$153,030	\$0	\$828,981	3.24%
SUBSTANCE ABUSE	\$726,024	\$82,810	\$674,809	\$1,483,643	5.80%
COMMUNITY HEALTH PREVENTION	\$1,106,312	\$0	\$0	\$1,106,312	4.33%
INMATE HEALTH SERVICES	\$5,700,000	\$0	\$0	\$5,700,000	22.29%
SPECIALTY PHYSICIAN CARE/PRESCRIPTION SERVICES	\$274,975	\$0	\$0	\$274,975	1.08%
HEALTH CARE RESPONSIBILITY ACT	\$150,000	\$0	\$0	\$150,000	0.59%
MEDICAID MATCH	\$6,070,613		\$0	\$6,070,613	23.74%
SPECIFIC TO CHILDREN	\$0	\$193,801	\$0	\$193,801	0.76%
ADMINISTRATION	\$20,000	\$0	\$108,482	\$128,482	0.50%
<b>FUND TOTALS</b>	<b>\$16,454,375</b>	<b>\$436,813</b>	<b>\$8,678,750</b>	<b>\$25,569,938</b>	<b>100.00%</b>





# Patient Population Centers FY 2012

Zip	Number
33511	1
34201	15
34202	60
34203	739
34204	11
34205	1553
34206	61
34207	919
34208	864
34209	240
34210	230
34211	43
34212	63
34215	34
34216	19
34217	70
34219	129
34220	5
34221	790
34222	208
34228	8
34232	1
34234	6
34243	155
34250	4
34251	69
34264	32
34270	14
34280	12
34281	2
34282	6
34286	2



12/4/2012

# Florida Counties With A Healthcare Sales Tax

County	Population	Largest City	% Sales Tax	Tax Approval Authority
Gadsden	46,151	Quincy	.5	Voters
Hillsborough	1,267,775	Tampa	.5	Commission
Madison	19,115	Madison	.5	Voters
Miami-Dade	2,554,766	Miami	.5	Commission
Polk	609,492	Lakeland	.5	Voters



# Neighboring Counties

County	Population	Largest City	Funding Mechanism
DeSoto	34,894	Arcadia	Ad Valorem/General Funds
Hardee	27,887	Wauchula	Indigent Care Special District (.3601 Millage - 2013)
Hillsborough	1,267,775	Tampa	½ cent Indigent/Trauma Sales Surtax approved by County Commissioners
Pinellas	917,398	St. Petersburg	Ad Valorem/General Funds
Polk	609,492	Lakeland	Voter Approved ½ cent Indigent Care Sales Surtax
Sarasota	382,213	North Port	Hospital District (1.0863 Millage)



# Tri-County Eligibility Comparison Matrix

Eligibility Criteria	Manatee	Pinellas	Hillsborough
Resident of County	1 Verification Needed	1 Verification Needed	2 Verifications Needed
Social Security Card Required	No	Yes, or proof of application for one	Yes, for everyone in the household
U.S. Citizenship or Permanent Residence Required	No (agreements do not address this issue)	Yes. (If permanent resident, cannot be sponsored.)	Yes
Income Standard	200% of FPL* using lower of last 4 weeks or 12 month average	100% of FPL* using last 30 days of income	100% of FPL* using last month of income
Assets a factor using a program specified definition and maximum	Yes	No	Yes
Term of Eligibility	180 Days However, each hospital determines eligibility independent from the others. Eligibility does not transfer with the patient.	N/A**	180 Days**

\*FPL=Federal Poverty Level and is updated annually

\*\*Both Hillsborough and Pinellas programs have criteria that may cause an individual's Participation to be terminated prior to the end of their term.



# Summary of Manatee County Program

- Patients apply at each individual hospital
- Patient must provide 1 document verifying they are a resident of Manatee County, (for all relatives in the house) proof of either last 4 weeks of income or last 12 months of income, proof of all assets
- Eligibility is good for “Medically Necessary” treatment at one of the 3 contracted hospitals and up to 3 follow-up visits with physicians after leaving the hospital.
- Pharmacy is not covered.
- Mental Health is not covered under this program. Mental health is covered under various other non-profit agreements.
- Primary Care is not covered under this program.



# Summary of Pinellas County Program

- Patients may sign up at any one of the 5 Medical Home sites or 3 Health Department Sites.
- Patients submit their required documents
- The program Pinellas County Department of Health and Human Services program in partnership with the Pinellas County Health Department and Community Health Centers of Pinellas.
- Patients in the Medicaid Medically Needy with a share of costs program can only get basic services (no specialty services).
- Specialty Services, including lab work (location and service) are done by referral by medical home physician.
- Emergency Room and Ambulance are not covered.
- Patients will be terminated if they become over income, obtain other insurance, or violate the conditions of the Client Handbook (available online).





# Pinellas County Covered Services

- Doctor visits at your medical home
- Wellness and prevention services, such as:
  - Annual physicals
  - Nutrition education and counseling
  - Mammograms
- Laboratory and medical services, such as:
  - Pap smears
  - PSA blood levels
  - Urine analysis including pregnancy test
  - General X-rays
  - Ultrasounds
  - MRIs
  - CT scans
- Pharmacy services
- Mental health and substance abuse services
- Cancer screening
- Physical therapy
- Referral for dental pain relief

# Summary of Hillsborough County Program

- To enroll in the plan, patients can go to any of 5 neighborhood service centers or may apply online on the county's web site.
- Patients submit their required documents
- April 1, 2010, a self-sufficiency plan was implemented. This plan requires members to participate in job training programs, educational programs or to work 20 hours per week while in the program. It also limits them to 4 terms of 180 days in the program. Failure to participate in the self-sufficiency program will result in program termination. There are exceptions for disabled.
- Anyone convicted of 3 felonies committed on different days after April 6, 2005 is not eligible for the program (three strikes)
- Patients are assigned a network based on their location in the county. Each network has multiple clinics/providers and at least one hospital.
- County receives ½ cent indigent care sales tax



# Services Provided in Hillsborough Health Care Plan

- Hospital Care
- Specialty Physician Care with a referral from Primary Physician
- Outpatient Clinic Visits (doctor ordered)
  - Preventative Care
  - X-Rays
  - Medical Equipment/Supplies
  - Referrals
  - Therapies
  - Lab work
- Dental Services (Emergency Pulling of Tooth)
- Medication
- Orthotics/Prosthetics
- Home Health Care
- Skilled Nursing and Rehab
- Emergency Medical Care





***Thank You!***