



UCLA CENTER FOR HEALTH POLICY RESEARCH

SUMMARY OF KEY FINDINGS FROM THE REPORT

Citation: GF Kominski, PL Davidson, CL Keeler, N Razack, LM Becerra, R Sen. *Profile of California's HMO Enrollees: Findings from the 2001 California Health Interview Survey. A Report for the California Office of the Patient Advocate. Los Angeles: UCLA Center for Health Policy Research, 2003.*

Who are California's HMO Enrollees?

Citizenship Status. Using data from the 2001 California Health Interview Survey (CHIS 2001), the study shows that 27% of HMO enrollees are immigrants (15% are naturalized citizens and 12% are noncitizens), whereas 73% are U.S.-born enrollees. Of those enrollees who are immigrants, the majority has been in this country for at least 15 years. However, the number of HMO enrollees who are immigrants varies across the state – ranging from a high of 40% in Santa Clara County to a low of 9% in California's Northern Rural Counties (Siskiyou, Modoc, Shasta, and Butte counties). Other regions where HMOs serve large numbers of immigrants are Los Angeles County (36% of HMO enrollees) and San Francisco-Marín-San Mateo Counties (34% of HMO enrollees).

Language Fluency. Because many Californians have immigrated from other countries, language is an important concern for health-care providers. Statewide, about one-third (34%) of HMO enrollees communicate at home in a language other than English, or solely in another language (24% are bilingual and 10% speak only another language, usually Spanish or Chinese). In California, 4% of HMO members report that they do not speak English well. In Los Angeles and in Santa Clara Counties, almost one half (46%) of HMO enrollees speak a language other than English at home. Regions where English is the main language spoken at home are the Northern Rural Counties (86%), Sonoma County (81%), and Sacramento-Yolo-Placer-El Dorado Counties (81%).

Education Background. Managed care organizations provide their enrollees with a variety of materials – handbooks, flyers, newsletters, and brochures – intended to educate them about their coverage, rights, and types and location of services. The study findings clearly suggest that HMOs face major hurdles in preparing and providing readable materials to the members, in English or in any other language. Large portions of both HMO adult and elderly enrollees have only a high school education or less (35% of adults, ages 18-64, and 45% of the elderly, ages 65 and over).

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Across the state, these rates vary greatly. For instance, in the Central Region Counties, 46% of HMO nonelderly adult enrollees have received a high school education or less, while in San Francisco-Marin-San Mateo Region Counties, the rate is only 20%. Other counties and regions where enrollees have lower levels of educational attainment are the Northern Rural Counties (41%) and Southern Rural Counties (40%), Riverside-San Bernardino Counties (43%), and Los Angeles County (39%).

California's population is very racially and ethnically diverse, as is the HMO population. It may not be enough for HMOs to communicate with their members in a variety of languages. HMO member materials also need to be culturally sensitive, according to the report.

The study profile shows that about 59% of the state's HMO enrollees are white and 41% are nonwhite. Latinos account for 19% of the total enrollment, followed by Asian American and Pacific Islanders (12%) and African Americans (7%). Some county regions are more diverse than others. In Los Angeles County, 56% of HMO enrollees are nonwhite (29% Latino, 13% Asian American and Pacific Islander, and 10% African American); in Santa Clara County, 47% are nonwhite; and in Contra Costa-Alameda Counties, this figure is 43%. On the other hand, in two regions – Solano County and the Northern Rural Counties – only about 15% are nonwhite.

Individual racial and ethnic groups constitute a larger portion of the HMO population in certain counties. Latinos constitute about 30% of HMO enrollees in Los Angeles County, but only 7% in the Sacramento region. African Americans make up 11% of HMO members in Alameda-Napa-Solano Counties, but only 2% in Orange County. Twenty-three percent of HMOs enrollees in San Francisco-Marin-Santa Clara Counties are Asian American and Pacific Islander. In Santa Clara County, this figure is 28%.

Implications for HMOs Serving Diverse Members:

The report provides a number of practical recommendations for improving services to HMOs enrollees, beginning with the role that HMOs can play.

Health plans should provide the same services to all members; HMOs must assess the language and cultural needs of their members in order to provide materials in target languages adapted to the cultural variations of member populations.

At the state level, the report suggests that the California Office of the Patient Advocate can take action to ensure that materials written by HMOs about plan policies and benefits are communicated clearly to enrollees with a high school education or less by setting appropriate standards.

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Study Provides Additional Profiles. Besides presenting the socioeconomic profile of HMO enrollees, the report provides data on HMOs enrollees and their medical conditions and health status, risk factors, and access and utilization of health care, at the state and regional levels. Comparable data are also available on non-HMO enrollees and uninsured Californians.

Data Source – California Health Interview Survey (CHIS). The data analyzed were collected as part of the 2001 California Health Interview Survey (CHIS 2001), a collaboration of the UCLA Center for Health Policy Research, the California Department of Health Services (DHS) and the Public Health Institute (PHI). Visit www.chis.ucla.edu.

About The Office of the Patient Advocate. The California Office of the Patient Advocate funded the report. The Office of the Patient Advocate (www.opa.ca.gov) is an independent office under California's Business, Transportation, and Housing Agency. Established in July 2000 as part of the nation's most comprehensive HMO reform, the office is responsible for informing and educating consumers about their rights and responsibilities as HMO enrollees. For more information, call toll free at 1-866-HMO-8900.

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