Quick background

Increasingly over recent years, and especially in recent months, a number of us have been talking about and exploring the emerging health care crisis here and elsewhere. I had been a partner/principal in a health care consulting firm in the 1980s which specialized in health care crisis and the resulting labor-management negotiation strife among large public jurisdictions and among sets of them. I called a number of old colleagues this past summer and asked if the present emerging health care situation felt like the severe crisis of the 1980s. They all said yes. And then they all said: “only this one is worse, much worse”.

Sonoma County attention was riveted this spring, summer, and fall with the sudden death and dissolution (at 25c on the dollar owed, by the way) of one of the two 20-year plus stalwart health care system (HMO) institutions for Sonoma County, which between them accounted for most of Sonoma County’s health care business. Kaiser and Health Plan of the Rewoods were the two pillars. Both well respected and well rated. We all watched this summer as HPR fell and disappeared entirely at the end of this past October.

The almost 80,000 participants left dry at this demise have now largely settled in a replacement plan of some kind. (HealthNet of Woodland Hills seems to have taken the significant majority of this business.) We still don’t know how many people lost coverage and can’t find new – or find coverage much worse. A cost increase pattern is emerging that health care premium costs have just jumped up generally between 20-40 percent, along with some diminishations of health plan coverage. Some retirees find their rates have leaped up.

In late August, Professor Art Warmoth, Chair of the Psychology Department, and I attended a conference in Sacramento which reported on two years of health care research on options of design for health care for California’s future, research sponsored by the California Legislature and the UC System President’s Office. The conference focused on the study consultants and others defining the nine primary options for future California health care.
Upon our return, we talked with the Deans of two SSU Schools, Social Science and Science & Technology, plus the Provost’s Office. They each put in two-thirds of a unit of credit for my work on campus during the first semester developing a Psychology course for Spring Semester on the crisis and facilitating explorations of an informal initiative to study the present health plan cost and access crisis here in the County, SSU’s home. In addition, institutions in the community have been asked to show support by putting $3000 into the effort, contributed to the initiative on campus. This goal has been broken into $500 parts. Several institutions have offered to contribute, and the request is out to several more.

This fall, consulting time on health crisis website design and building have been contributed by the School of Science and Technology and the Office of Instructional Technology. Plans for initial webmastering and initial literature reviews are in finishing discussions with the Schools. Foundations will be asked to contribute as well.

A number of steps have been taken during the first ninety days of the initiative’s existence. The list below considers what has been done in the first 90 days.

The review below uses the September 7th outline template stating intended initiative activity. Original text from that memo starts at the left margin below; while current status comments are indented an inch in from the left margin.

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SSU Campus-Community Partnership On the Sonoma County Health Care Cost and Access Crisis And On the Potential for Innovation

DRAFT - September 7, 2002
ADDITIONS - Current notes – November 30th.

• Developing a user-friendly web site for campus and community to use and develop
Lodging existing literature (SSU authors and those of the partnering community) - a variety of pertinent hypertext links - Calendar – Plans – History – Information on other communities/counties at work on their own health care crises

  • A dedicated web site is being designed and constructed, with an estimated completion date for the basic website at three weeks from November 25th. Resources will be placed there on an ongoing basis. The School of Science & Technology contributed the services of a website-builder. IT contributed initial web design and operations consulting. Ongoing webmaster funding is being sought. University courses the subjects of which are in helpful relationship to the subjects of the crisis for Spring Semester and Summer Session will be listed beforehand on the website.

  A number of people are already considering papers, resources, and hypertext links to contribute to the website’s first period of operation. More complex potential website features will wait for future funding. The website name, URL, is going to be: www.sonoma.edu/programs/healthcrisis/

  Estimate the website start date as shortly before the end of December.

• Improving dialogue among the parties
Among SSU+ faculty and staff and with community partners and media (essentially a “think-tank” process focused on our community’s health care crisis)

  • A SSU faculty-staff-student study group formed in November which has decided to meet the second Saturday of each month for the balance of the academic year. The meetings will take place 10 am to 12 noon in 1121 Schulz. Attendance is running 10-15 so far. More faculty are expressing interest and intent to come at some point. Approximately 50 faculty and staff have now expressed interest and support. Many are teaching, consulting, and/or writing about aspects of health care which bear in on how to work with the crisis. Information and resources will be distributed to the initiative’s web site, by e-mail, and through NewsBytes, the campus weekly.
• 150 labor and management negotiators and their in-house advisors from public school districts in Sonoma County and from the Sonoma County Office of Education attended a conference held at the Cooperage on campus on Thursday, November 21st, a one-day conference on collaborative bargaining on health care issues during this volatile crisis time. Participating were the County Superintendent of Schools-Elect, a number of leaders from the Sonoma County Office of Education, a cross-section of districts and reasonable labor-management balance. Tom Moore, a senior consultant in San Francisco and Sacramento and Dr. Ellen Shaffer, a consultant in Washington, D.C. Sacramento, and San Francisco spoke and participated in the room-wide dialogue. I facilitated the day and spoke. The conference was brought about by the California Teachers Association, the California School Employees Association, and Service Employees International Union Local 707. The Department of Psychology and the Provost’s Office at SSU hosted the gathering, along with the support of the County Superintendent-Elect.

• The conference proceedings were videotaped by Dr. Ann Alter, Associate Professor of Film, at Humboldt State University. Dr. Alter and her colleague, Dr. Watson, are researching the crisis in health care in rural counties around California. Sonoma County has a dual rural/urban character. They intend to produce a film on characteristics of the health care crisis in rural California counties.

• Discussions are proceeding toward holding a weekend Spring Conference 2003 at SSU, co-sponsored with the Santa Rosa Junior College, and with other potential participating coalitions concerned with the deepening crisis.

• SPRING SEMESTER 2003 SSU ACADEMIC OFFERINGS:
Psychology 490 (and additional cross-listings with other programs and departments a possibility): Health Care Crisis in Sonoma County – A Case Study and Learning Community – will meet Wednesday evenings during February to May. Registration for on-campus undergraduate and graduate students is through normal registration at the regular time. Registration for community participants is through Extended Education, Open University 664-2394. The campus-community learning community will have syllabus and resources on the campus website to be introduced below.

• At least a half dozen existing courses on campus during Spring Semester and Summer Session 2003 will deal with issues near the heart of the current health care crisis here. As examples, Hutchins will offer a Health and Healing course for Hutchins majors and Kinesiology will offer a course on active wellness for women. Summer Session has another
example, a newly conceived Political Science/Extended Education course on the politics of health care.

- A core group of three students and I have met weekly all semester, exploring the health care crisis. The three, with a researcher, initially studied the web for pertinent resources. Now the two Americorps students are preparing to involve other students in community service/training in this endeavor.

**Developing key questions among the parties**
Among the parties and with potential researchers, which questions can be developed into researchable questions which can knit together a better picture of where we’ve been, where we are, and what we face for the future?

- The initiative is raising the question with all parties: What are the key questions to be raised and worked with?

The November 21st conference mentioned above raised main issues all day: How did we get here? Where are we? Where do we seem to be heading? What are the most useful ideas and actions for the coming months? What can we do to make collective bargaining less alienating and more a partnership in the midst of this health care cost crisis?

A list of main questions raised by participants in roundtable groups at the November 21st conference is being prepared by conference sponsors California School Employees Association and California Teachers Association and will be distributed soon by e-mail and on the website.

**Developing foundation and governmental fundraising**
Development of resources to carry on planning-study-research-web-broadened dialogue

- The initiative has so far been in touch with the California Health Care Foundation, the Kaiser Family Foundation, and the Community Foundation of Sonoma County, on possibilities for crisis initiative support, as well as consulting with SSU fund-raising personnel. Planned activities for the next period include writing a letter of intent to CHCF on services to aid labor-management collaboration in public school districts in Sonoma County, as they prepare for collective bargaining on health care – during this data-volatile crisis. As a second priority the initiative is recommending the convening of a fund-raising planning meeting among primary health care institutions in the county, under the aegis of the Community Foundation of Sonoma County.
• The initiative has made exploratory contact with a number of other community and state institutions (besides those already listed) and seeks to work with them, institutions such as the Sonoma Health Alliance, the Santa Rosa Chamber of Commerce Health Committee, Senator Chesboro’s office, consultants for legislative committees.

• Study/literature search/on-line search-research on key questions-analysis of key data

Development of the puzzle pieces which, taken together, may generate systematic study and some well-documented potential answers – Study of critical utilization patterns - Consideration of potential models

• Literature searches for best practices and ideas has begun with two Americorps students and a research student looking at the basic matters of how we got here and where we may be headed, along with a colleague doing some initial looking for new patterns of humane cost-containment mechanisms. Systematic literature search will begin with funding being requested.

• Comments on Sonoma County health care service utilization patterns were presented by Tom Moore, San Francisco health care consultant, at the November 21st conference. His paper will be put up on the website. Funding is being sought to have Tom Moore do thorough Sonoma County utilization data collection and analysis.

• Ellen Shaffer, Ph.D., MPH, provided a number of ideas about cost-saving health systems change. She has had major health plan design responsibilities and consults in Washington, D.C. and San Francisco.

• Improvement of planning for and training of professional health care workers and planners for Sonoma County employment

Obviously in close collaboration with and support for the “Grow Your Own” project to train health care professionals for service in Sonoma County

• The initiative and “Grow Your Own” are in goals and plans agreement, are in generally weekly contact now, as well as participating together in the monthly faculty-staff-student crisis study committee.

Substantial Sonoma County health care professions training takes place within the County, among the A substantial number of courses is already being taught both at SSU and at SRJC, and contacts are beginning to increase among the health care-related teachers.
• **Development of health plan and health system design**
  Weaving all the parts of the foregoing into strong policy options for the consideration of Sonoma County institutions and citizens

  • As the next few months progress, the initiative will spend more time on plan and system design questions, in collaboration with other interested parties, about “next design solutions” in Sonoma County, including the potential for multi-employer consortia.

  • Points from my afternoon presentation at the November 21st conference show a number of concepts for redesign, as do points from Ellen Shaffer, a health care consultant, D.C. and San Francisco, and Tom Moore. Notes will be placed on the website. An initial multi-party plan and system design session is among key fundraising priorities.

• **At the study’s fruition, potential development of large “buying coop(s)”**
  Consideration of the potential utility and power of banding together around agreed-upon system design for the future, in conjunction with the appropriate institutions, alliances, and public agencies

  • Initially, this is taking place in public schools discussions, where all school districts in the County are already in one of two multi-employer systems – and where all schools employees in the County choose between Kaiser and HealthNet. The next few months could bring substantial improvements in their plans – both in intermediary administrative/trust systems and in plan characteristics and innovative and potentially more cost-effective collaborations among the two primary HMOs involved.