



California Regional Markets: San Joaquin Valley

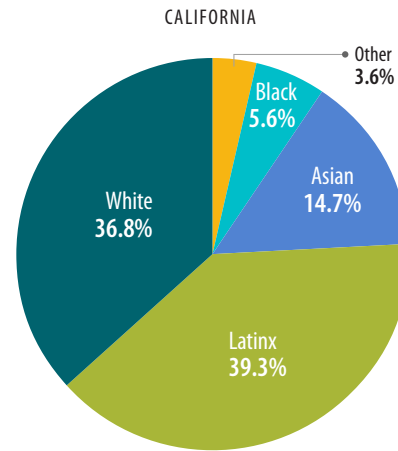
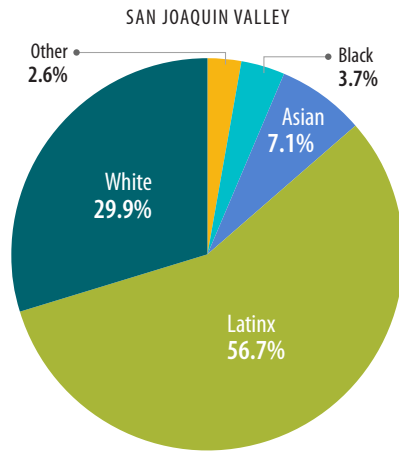
CALIFORNIA HEALTH CARE ALMANAC QUICK REFERENCE GUIDE

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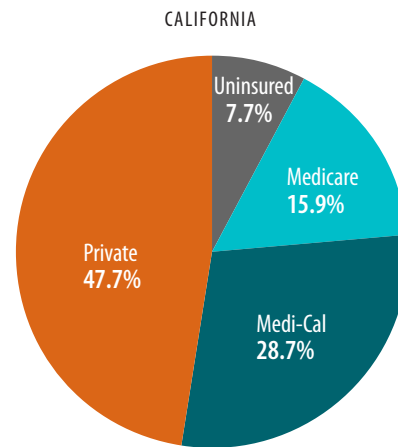
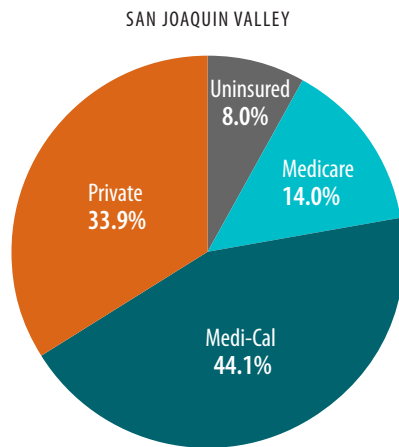
Race/Ethnicity

Region vs. State Average, 2018



Health Insurance

Region vs. State Average, 2019



Population Statistics, 2018

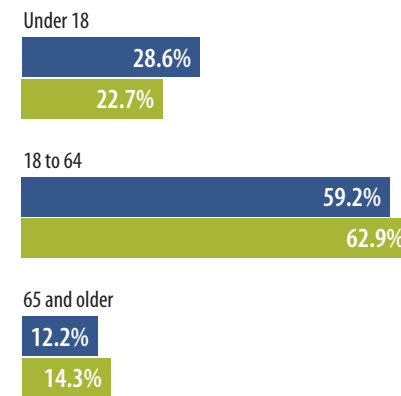
	San Joaquin Valley	California
Total population (in millions)	1.787	39.557
Five-year population growth	3.2%	3.2%

Economic Indicators, 2018

	San Joaquin Valley	California
Below 100% FPL	21.5%	12.8%
100% to 199% FPL	23.8%	17.1%
Unemployment rate	8.0%	4.2%
Able to afford median-priced home	50.0%	31.0%

Age of Population

Region vs. State Average, 2018



Notes: *Private* includes any other insurance coverage (excluding Medicare and Medi-Cal). *Medicare* includes dual-eligible enrollees. *Asian*, *Black*, *White*, and *Other* categories are non-Latinx. Charts may not total 100% due to rounding.
 Sources: "County Population by Characteristics: 2010–2019," US Census Bureau, last accessed June 1, 2020; "2018: ACS Supplemental Estimates Detailed Tables — Ratio of Income to Poverty Level in the Past 12 Months," US Census Bureau; "Employment by Industry Data: Historical Annual Average Data" (as of August 2020), Employment Development Dept., n.d.; "Housing Affordability Index - Traditional," California Association of Realtors; "Medi-Cal Certified Eligibles Tables, by County from 2010 to Most Recent Reportable Month," CHHS Open Data Portal; "Medicare Enrollment Dashboard," Centers for Medicare & Medicaid Services; "2019: ACS 1-Year Estimates Detailed Tables — Age by Disability Status by Health Insurance Coverage Status," US Census Bureau. All websites accessed June 1, 2020.

California Regional Markets: San Joaquin Valley, *continued*

California’s San Joaquin Valley is known for rich irrigated farmland and agricultural output. Across the region, which spans five counties, more than 20% of the 1.8 million residents have incomes below 100% of the federal poverty level. In 2019, 44% of San Joaquin Valley residents were covered by Medi-Cal. Despite the expansion of the safety net after implementation of the Affordable Care Act, the San Joaquin Valley continues to face problems with access to care, especially for behavioral health services, and struggles to recruit physicians and other health care professionals.

KEY FACTORS AFFECTING THE LOCAL HEALTH CARE MARKET INCLUDE:

- ▶ **While financial performance improved in larger hospitals, some independent hospitals struggled.** Several smaller hospitals have struggled financially, leading one district hospital to close permanently and another to cede management to a larger hospital system after closing temporarily. Given the large and growing share of the region’s Medi-Cal population, almost all hospitals play a significant role in the fabric of the region’s safety net.
- ▶ **FQHCs and RHCs continue to expand across the region, sparking competitive tensions in some areas.** FQHCs now provide services to more than half of the region’s Medi-Cal enrollees. Both FQHCs and RHCs are working with hospitals to improve care integration and access to specialty services for Medi-Cal patients.
- ▶ **Data sharing among San Joaquin Valley providers remains challenging despite the presence of a health information exchange (HIE) serving the region’s two largest counties, Fresno and Tulare.** While hospitals report limited participation in the HIE, many outpatient providers reported limited use. Barriers to adoption include perceived challenges of integrating practices’ electronic health record systems with the platform and a lack of staff resources.
- ▶ **Access to mental health and substance use disorder services for Medi-Cal enrollees has been improving, though significant gaps in care remain.** Inpatient psychiatric beds are in short supply. This shortage may be offset by a new 128-bed inpatient psychiatric facility slated to open in Madera County in 2023. County mental health plans in the region have adopted more holistic approaches to addressing behavioral health needs, developing partnerships with health plans and adding new services.
- ▶ **Health and income disparities, as well as other sociodemographic factors, have worsened the impact of the COVID-19 pandemic in the San Joaquin Valley.** The region’s residents suffer disproportionately from risk factors, such as obesity and asthma, that can lead to worse outcomes if affected individuals contract the virus. The regional economy’s heavy reliance on agriculture and food processing may have softened the pandemic’s initial economic impact in the region but put workers at higher risk of contracting and spreading the virus.

	San Joaquin Valley	California
Hospitals (acute care), 2018		
Beds per 100,000	157	178
Operating margin	6.2%	4.4%
Total operating expenses per adjusted patient day	\$2,696	\$4,488

	San Joaquin Valley	California
Health Professionals Per 100,000 Population, 2020		
Physicians	130.0	191.0
▶ Primary care	46.5	59.7
▶ Specialists.	83.3	130.8
▶ Psychiatrists.	6.5	11.8
% of population in HPSA.	92.0%	28.4%

Note: HPSA is health professional shortage area.
 Sources: "Hospital Annual Utilization Report & Pivot Tables," California Office of Statewide Health Planning and Development, accessed June 1, 2020; Healthforce Center at UCSF analysis of Survey of Licensees (private tabulation), Medical Board of California, January 2020; and Health Professional Shortage Area (HPSA) data from *Shortchanged: Health Workforce Gaps in California*, California Health Care Foundation, July 15, 2020.

ABOUT THE REGIONAL MARKETS SERIES

This quick reference guide is based on the full report *San Joaquin Valley: Despite Poverty and Capacity Constraints, Health Care Access Improves* by Len Finocchio and James Paci of Blue Sky Consulting Group.