

# SPECIALTY ACCESS FOR UNINSURED PROGRAM



**S**ecuring access to specialty care for low-income, uninsured individuals is a complex and intractable issue. There are many barriers to receiving specialty care in a timely and coordinated manner, even for those with an established medical home. Primary care providers serving the uninsured often refer patients to an emergency department to access needed services, or rely on personal relationships with individual specialists who will provide free care.

In 2012, the Partnership launched the Specialty Access for Uninsured Program (SAUP) to replace this fragmented and costly care delivery “system” with a managed and more cost-effective model of care. The program is implemented across the three adult health systems in Milwaukee County and the largest safety net clinics serving as medical homes for uninsured individuals.

The SAUP model establishes care management partnerships between safety net clinics and health systems. Building on a patient-centered medical home model, each participating safety net clinic is assigned to one or more health systems to coordinate access to specialty services. This model serves as an “accountable care system” to ensure timely access, coordinated transitions of care and more cost-effective care delivery.

The lessons learned from SAUP will help inform important changes in the health care delivery system, including the implementation of accountable care for other defined populations.

**“The SAUP program, is a unique collaborative effort to improve care and reduce fragmentation. We have learned a great deal about process improvement and removing barriers to care across the community.”**

**DR. TOM JACKSON** BREAD OF HEALING CLINIC

## PURPOSE

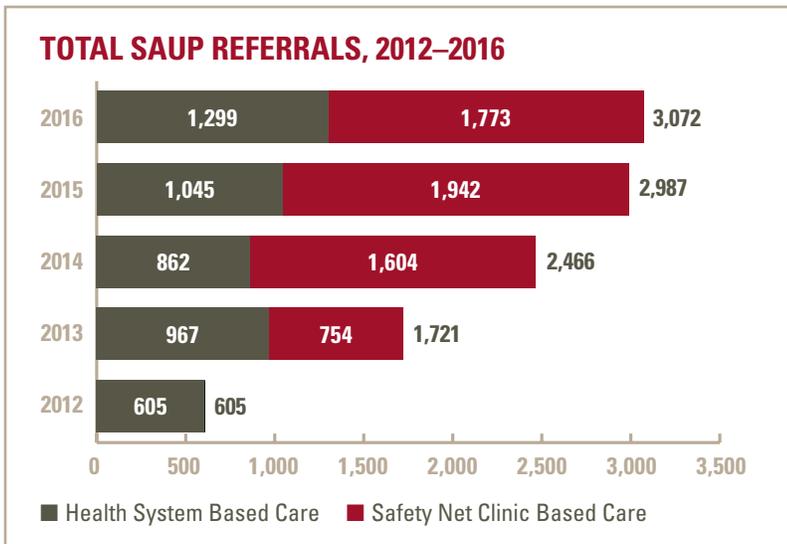
Provide specialty care for low-income, uninsured individuals that is:

- Clinically appropriate
- Timely
- Managed
- Distributed equitably among health systems

### **A Managed Access Model – Accountable Care In Action**

*In the SAUP model, the safety net clinics identify eligible patients. They provide primary care, medication access, benefit counseling, enrollment assistance, and navigation and social supports. The health systems each secure a network of specialists and provide inpatient and outpatient specialty services.*

*All usual and customary specialty consultation, testing and treatments are “covered” under SAUP, with no out-of-pocket cost to patients. Patients are referred for a single episode of care, and returned to the primary care provider for ongoing care management. Ongoing specialty access is also provided for individuals with chronic conditions.*



### Findings and Outcomes

In 2016, there were 3,072 referrals for SAUP, with a show rate of 93%. Of these 3,072 specialty referrals, 42% were for inpatient or outpatient health system-based care and 58% were for services delivered in the safety net clinic setting. In the prior year, the highest numbers of referrals were made for: orthopedics, pulmonology and gastroenterology.

### Safety-net clinic/health system partnerships report:

- Streamlined eligibility determination and application processes between the safety-net clinic and health system for patient financial assistance
- Improved patient education and referral management
- Increased understanding of the specialty care needs of the uninsured, and current patterns of accessing care
- Identification of specialty services that could be more effectively/efficiently delivered in the primary care setting, increasing patient convenience and care coordination
- Heightened awareness of the complexity of, and resource requirements for, effective transition care management among safety-net primary care providers, specialists and hospital/health systems
- Follow up specialty care for colorectal and diabetic retinopathy screenings and other tests is available and accessible
- Improved exchange of health information via WISHIN and EHR interfaces

## GOALS

- Improve specialty care delivery and care management processes
- Improve efficiency and effectiveness of care
- Improve health outcomes
- Decrease total cost of care

## TARGET POPULATION

Approximately 21,000 Milwaukee County residents who:

- are established patients with a SAUP safety net clinic
- have incomes  $\leq$  250 percent of the Federal Poverty Level
- are unable to secure public insurance

## HEALTH SYSTEM & SAFETY NET CLINIC SAUP PARTNERSHIPS

### Ascension Wisconsin

Angel of Hope Health Care Clinic  
 Ignace Indian Health Center  
 Milwaukee Health Services, Inc.  
 Sixteenth Street Community Health Centers  
 St. Ben's Clinic

### Aurora Health Care

Aurora Walker's Point Community Clinic  
 Bread of Healing Clinic  
 Muslim Community Health Center  
 Sixteenth Street Community Health Centers

### Froedtert & the Medical College of Wisconsin

AIDS Resource Center of Wisconsin  
 Outreach Community Health Centers  
 Progressive Community Health Centers  
 Sixteenth Street Community Health Centers

MILWAUKEE HEALTH CARE

**PARTNERSHIP**