Impact of the ACA California Local Public Health Laboratory Perspective

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Where do patients go?

- –Where is Primary Care patients insurance?
 - -Medicaid = MediCal
 - –Private insurance
 - –Un-insured

Managed Care Models

- -County Organized Health Systems (SLO: CenCal---CHCCC)
- -Two-Plan (LA: LACare & HealthNet)
- -Geographic Managed Care (San Diego: Care1st, CHgrp, HealthNet, Kaiser permanente, MolinaHC)

Private Insurance-Covered California Ins exchange

- -Private Practices
- -IPA-Independent Physicians Assns
- –ACO-Accountable Care Organizations

UnInsurance-

- -Indigent-
- –Not so indigent
- -Jail, Juvenile detention, Prisons

Who wants what we do?

- -STD- Chlamydia-Gonorrhea, HIV antibody, Syphilis serology
- -Tuberculosis
- –Mycology, Bacteriology, Virology, Parasitology
- -Water, shellfish and food testing
- Bioterrorism agents- bacteria and toxins

So—will PHLs in CA get more testing due to ACA?

Answer: That depends

On other factors



"I'm right there in the room, and no one even acknowledges me."

Other factors--elephants

- -Private Laboratory competition
- –Testing technology-POC
- -Public Health Service cuts
- -PH Leadership thinking

- –Do they care whether a PH lab is available?
- –Do they think a private lab can do as well or better?

 Do private labs make too many mistakes—false positives

-58% agree 8% disagree 33% unsure

– Do PH staff spend too much phone time trying to get PH data from private labs?

75% agree 8% disagree 17% unsure

– Do Private lab reports lack sufficient details to allow PH staff to interpret?

67% agree 17% disagree 17% unsure

– Will Private lab use of non-culture tests create problems for PulseNet?

-64% agree 0% disagree 33% unsure

So will PHLs die?

- –Will culture-independent diagnostics become the standard?
- -Will private lab ELR be so successful PH gets info needed?
- –Will laboratory services be privatized?

Santayana

"Those who cannot remember the past are condemned to repeat it."

Public Health Disasters

- Soviet Union breakup
- -TB funding-US 1980s
- –Africa and AIDS
- -etc

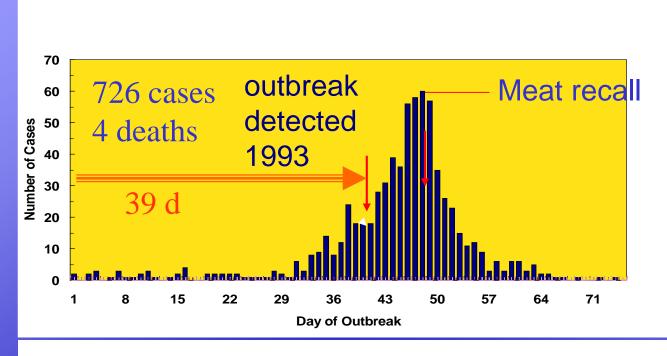
Anonymous

"The surest way to bring back a disease is to end the funding to control it."

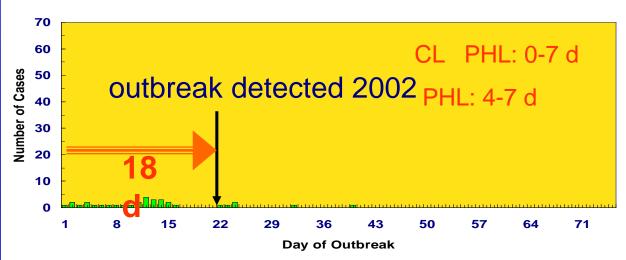
What to expect

- -VPD and Foodborne outbreaks
- Demand for PHL services –STIs,
 TB, Influenza, EIDs
- –Additional Insured (MediCaid)and private BUT









PHLs serving ACA patients

- –Where PH has a role in primary care
- –Where PHLs "keep up" with IT and test technology
- –Where Health leadership includesPH in ACOs

Questions??