

Specialty Care Analysis

Specialty Care: Introduction

This section reviews detailed operating statistics of reporting specialty care safety net institutions in St. Louis City and County (see Appendix C for a list of 2020 reporting specialty care organizations). These institutions include hospital-based clinics and university-sponsored physician groups, which provide the majority of specialty care services to safety net patients in St. Louis City and County.

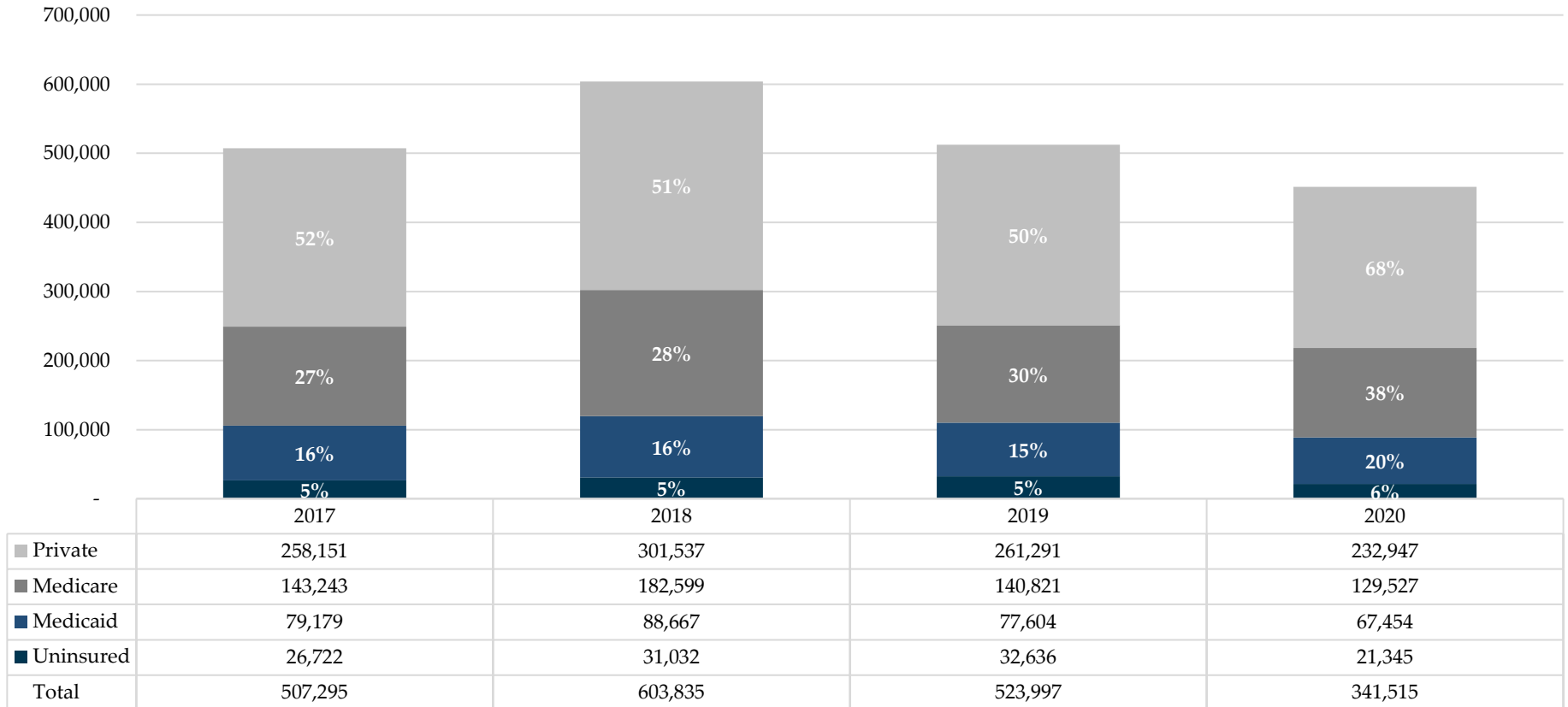
Specialty care encounters and individual user volumes occurring among Gateway to Better Health enrollees in calendar year 2020 are captured in the “uninsured” payor category of the figures presented.

Specialty Care: Key Findings

- Total specialty care users and encounters at St. Louis area specialty care organizations decreased by 33% and 13%, respectively, since 2017. This decline represents more than 182,400 fewer users and more than 178,300 fewer encounters (pages 80 and 82).
- Of the more than 462,300 specialty care users in 2020, approximately 74% were White, 20% were African American/Black and 8% were from the “Other” racial category (page 81).
- Over the past year, uninsured specialty care users decreased by 35%, while uninsured specialty care encounters decreased by 14% (pages 80 and 84).
- Medicaid specialty care encounters decreased by 15% over the past year and 17% since 2017 (page 86).
- While wait times for some specialty care appointments have either decreased or remained the same, gastroenterology, rheumatology, and pulmonology trend with the longest average wait times for both new and returning patients (pages 88 and 89).

Specialty care users at safety net organizations have decreased by 33% since 2017.

Specialty Care Users by Payor, 2017 - 2020

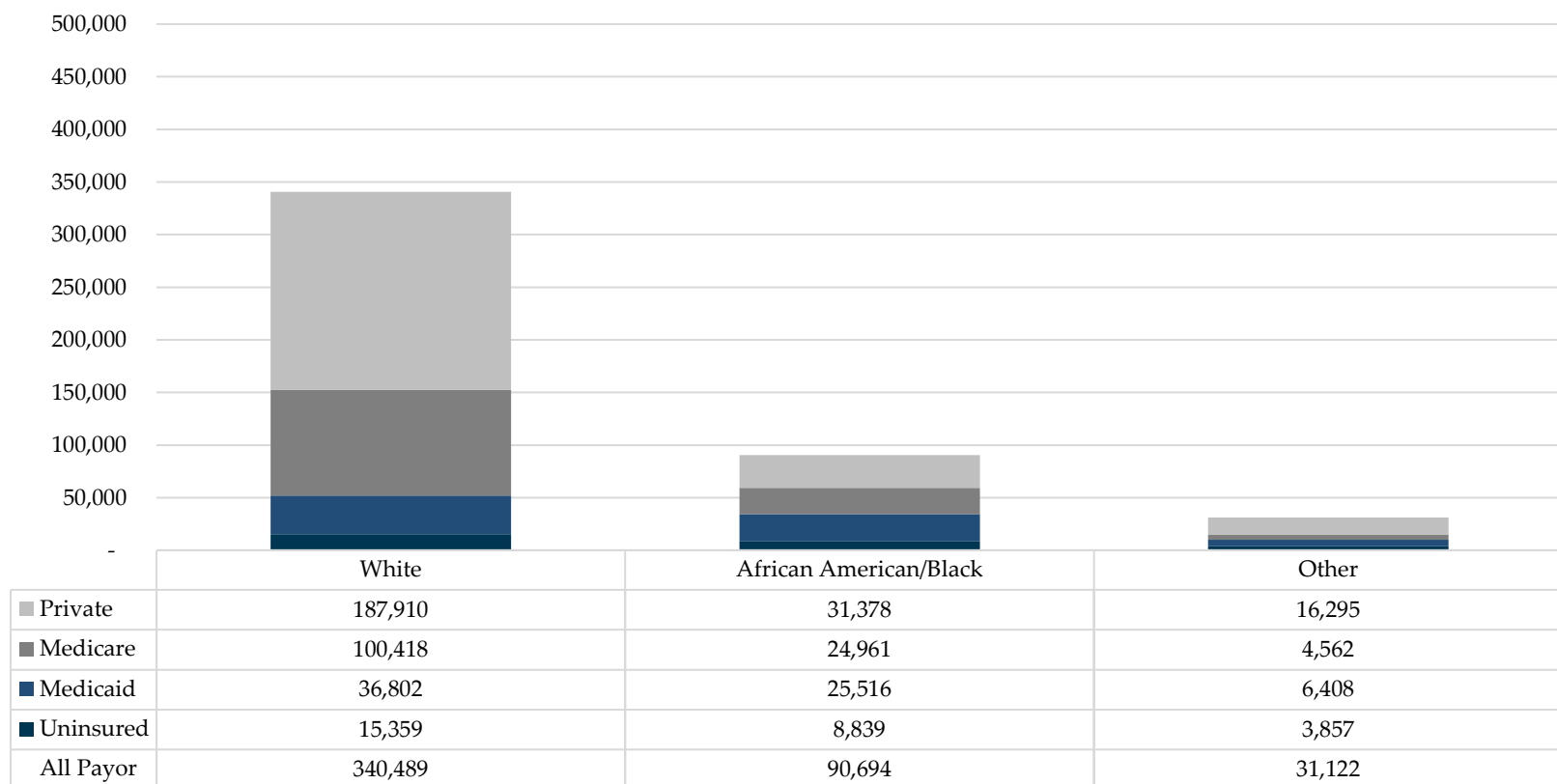


- Total specialty care users decreased by 35% in 2020, as compared to the prior year.
- Of the more than 341,500 specialty care users reported in 2020, approximately 68% were privately insured, 38% were Medicare, 20% were Medicaid and 6% were uninsured.

Note: For the purpose of this report, all Gateway to Better Health encounters and users are reported as uninsured. While users are unduplicated within each organization, there may be some duplication in total user counts across reporting organizations if a patient was seen at more than one organization in 2020.

Of the more than 462,300 specialty care users in 2020, approximately 74% were white, 20% were African American/Black and 8% were from the “Other” racial category.

Specialty Care Users by Race and Payor, 2020

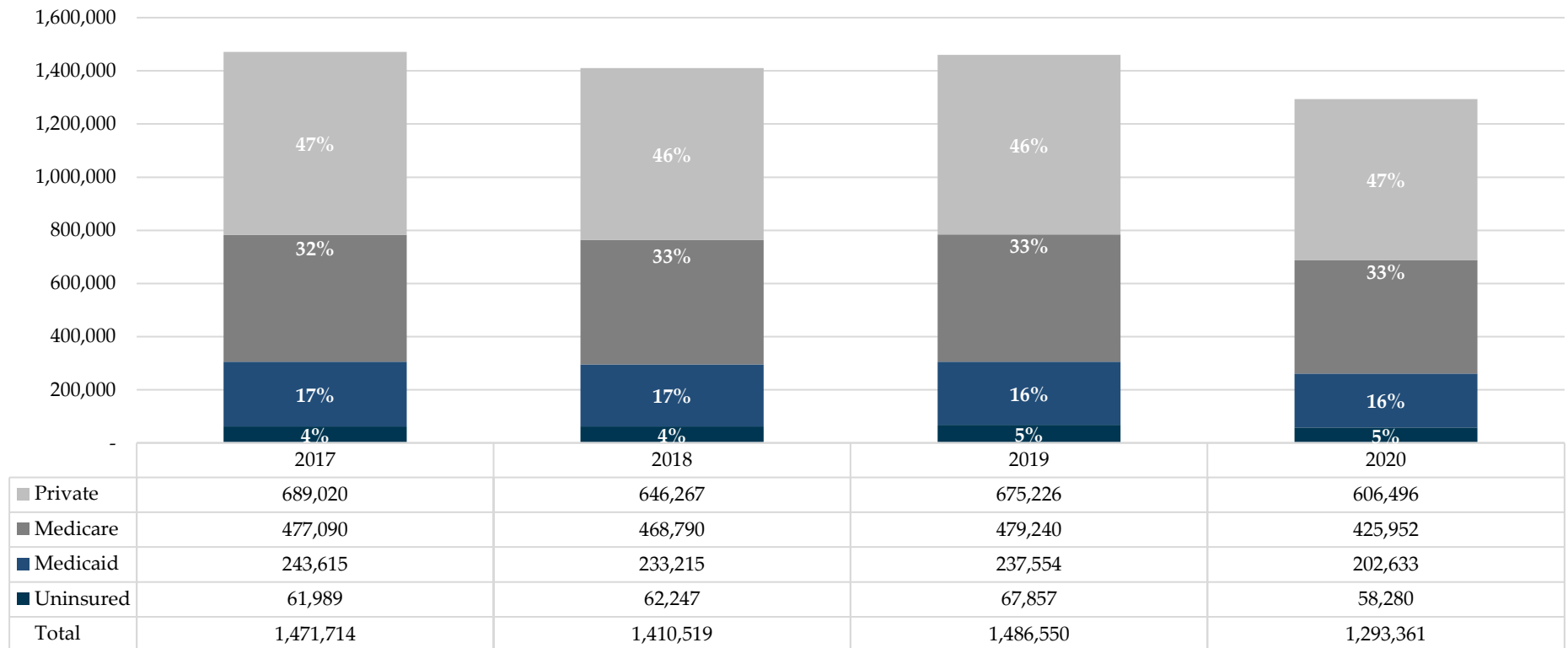


About 5% of all White specialty care users, 10% of all African American/Black specialty care users and 12% of all specialty care users included in the “Other” racial group are uninsured.

Note: There may be some duplication in the count of users across safety net organizations in the region. The “Other” racial/ethnic group includes: those of Asian, American Indian/Alaska Native and Native Hawaiian/Other Pacific Islander descent, as well as those identifying with more than one racial/ethnic group, those identifying as Hispanic/Latino and those whose race/ethnicity is unknown. However, the American Community Survey includes Hispanics/Latinos throughout all racial groups, whereas all Hispanic/Latinos safety net users, regardless of race, are captured separately in the “Other” category only.

Specialty care encounters at safety net organizations decreased by 13% over the past year and decreased by 12% (over 178,300 encounters) since 2017.

Specialty Care Encounters by Payor Category, 2017 - 2020

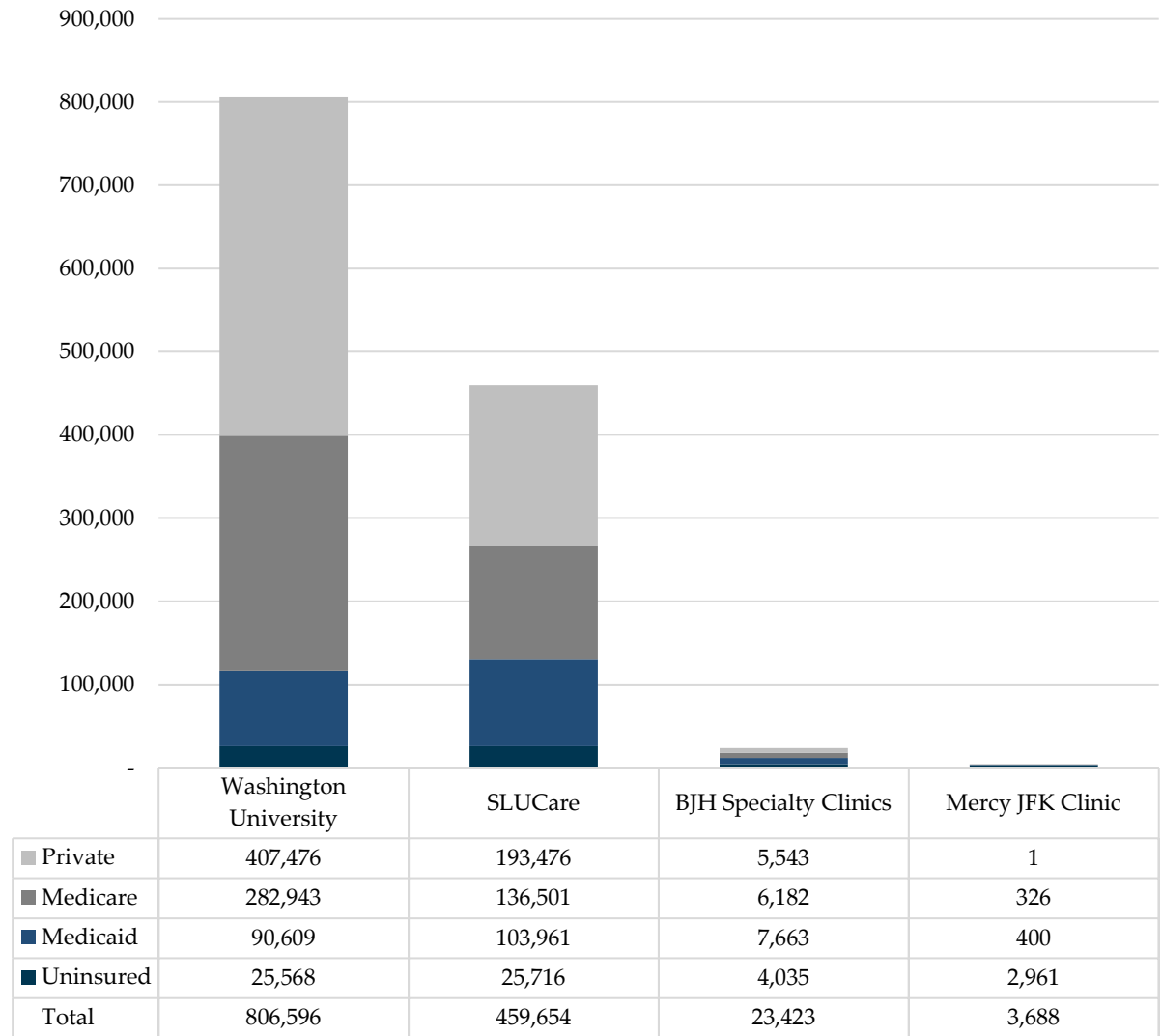


- Of the more than 1,293,000 total specialty care encounters reported in 2020, 47% occurred among those privately insured, 33% among the Medicare population, 16% among the Medicaid population and 5% among the uninsured.
- Over the past year, specialty care encounters among Medicaid, uninsured, and Medicare patients decreased by 15%, 14%, and 12%.
- Over the past year, specialty care encounters among Private patients have decreased by 11%.

Note: Diagnostic services are not included in the specialty care analysis. For the purpose of this report, all Gateway to Better Health encounters and users are reported as uninsured.

Specialty care encounters among the uninsured and Medicaid populations varied by safety net specialty care organization.

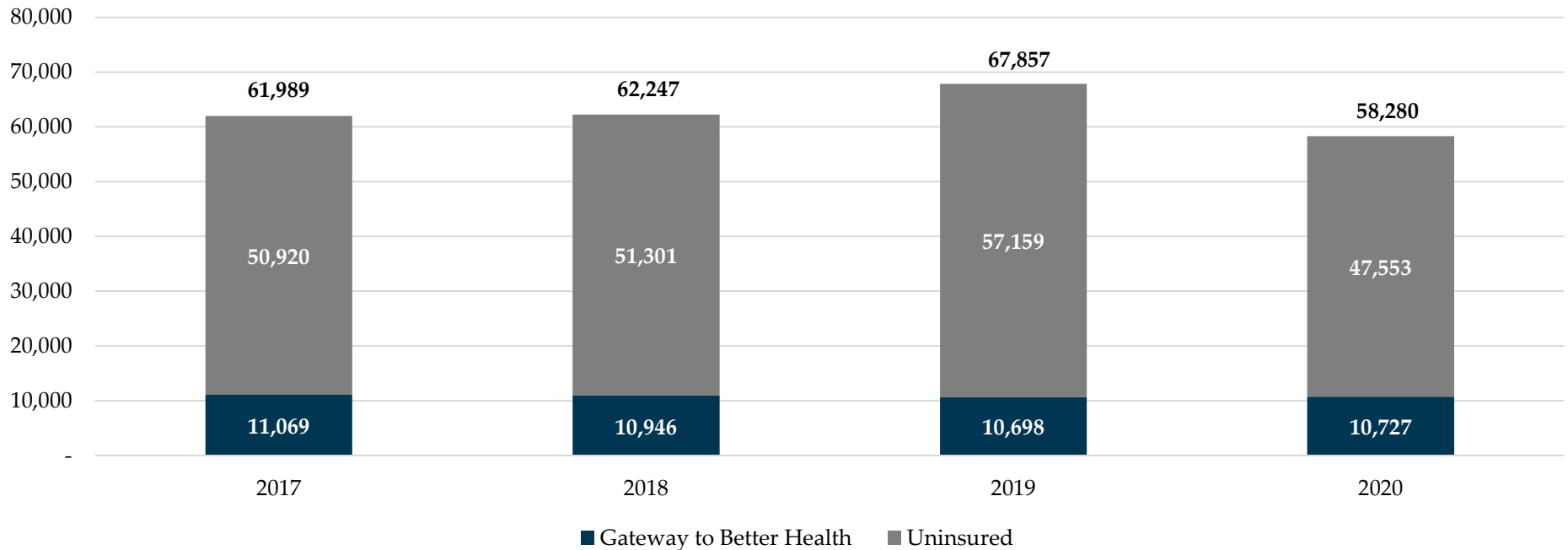
Specialty Care Encounters by Payor Category and Organization, 2020



Note: SLUCare’s reported data includes all sites in which their doctors practice, including the following hospital-based clinics: SSM St. Mary’s, SSM St. Clare, SSM St. Joseph, SSM DePaul, SSM Cardinal Glennon and SSM St. Louis University (SLUH). SLUCare’s data also includes some smaller practices located outside of St. Louis City and County limits, which accounts for less than 2% of their total reported encounters. SLUCare’s and Washington University’s data includes information for both pediatric and adult patients.

Uninsured specialty care encounters decreased by 14% over the past year.

Uninsured Specialty Care Encounters, 2017 - 2020

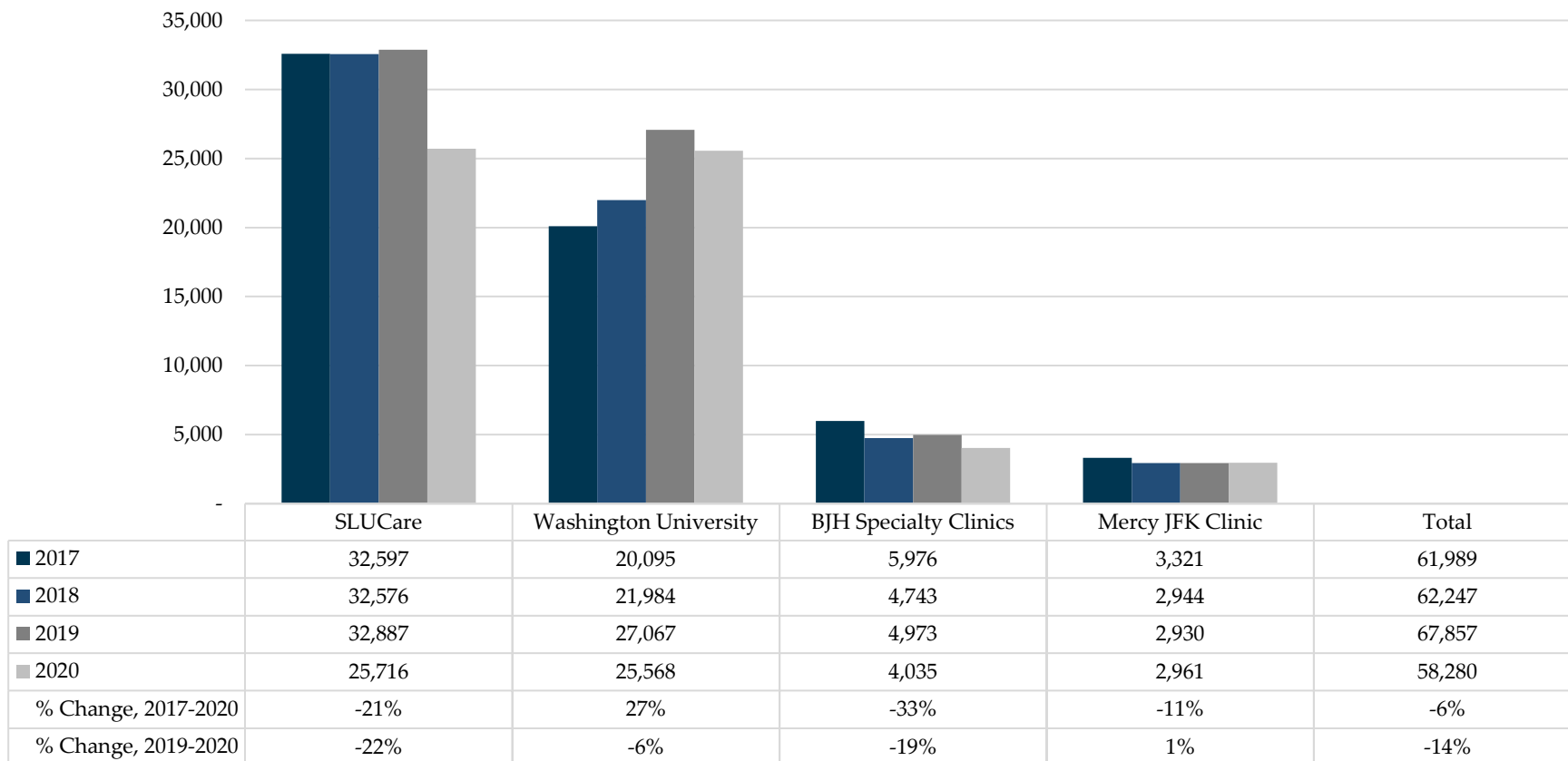


- Uninsured specialty care encounters have decreased by 6% since 2017.
- Gateway to Better Health specialty care encounters have remained relatively stable in 2020, as compared to 2020.
- Approximately 10,700 specialty care encounters were provided to Gateway to Better Health patients in 2020, comprising 18% of all uninsured specialty care safety net encounters

Note: For the purpose of this report, all Gateway to Better Health encounters and users are reported as uninsured. The Gateway to Better Health program began in July 2012. Beginning January 1, 2014, income eligibility for the Gateway to Better Health program was reduced to 100% of the federal poverty line (FPL). Consistent with the trend in reported encounters among Gateway patients, overall enrollment for the Gateway program has declined over time from an average of 16,194 in 2017 to an average of 14,408 in 2020. An additional 36,600+ diagnostic and other outpatient services were provided to Gateway to Better Health patients in 2020, which are not included in the chart above. Medicaid Expansion was approved in October 2020. The Gateway to Better Health program is currently working to transition its' members to a Medicaid Health Plan. To date, 3,518 Gateway to Better Health members have transitioned to Medicaid.

Washington University and SLUCare account for more than 88% of all uninsured specialty care encounters at major safety net organizations.

Uninsured Specialty Care Encounters by Organization, 2017 - 2020

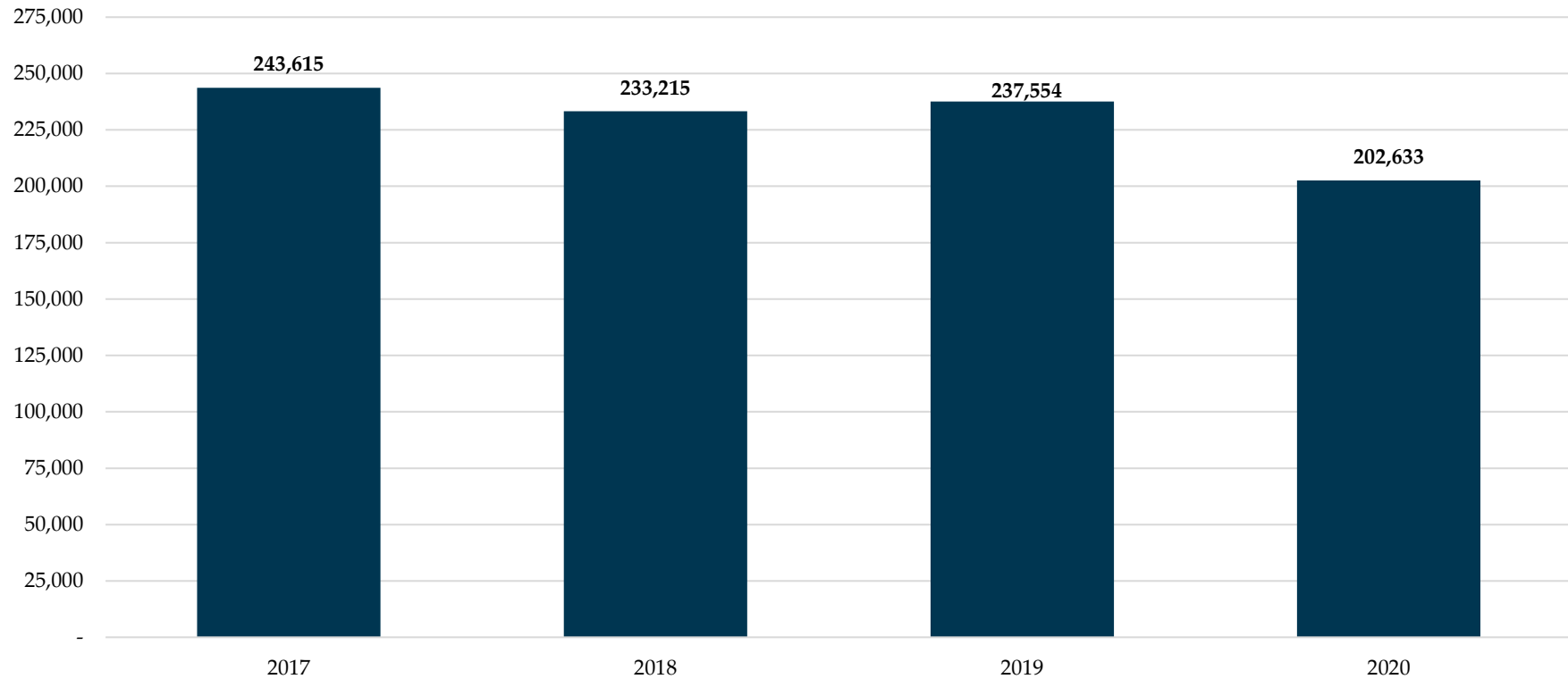


Uninsured specialty care encounters decreased at SLUCare, BJH Specialty Clinics, and Washington University by 22%, 19%, and 6% since 2019.

Note: For the purpose of this report, all Gateway to Better Health encounters and users are reported as uninsured. SLUCare’s reported data includes all sites in which their doctors practice, including the following hospital-based clinics: SSM St. Mary’s, SSM St. Clare, SSM St. Joseph, SSM DePaul, SSM Cardinal Glennon and SSM St. Louis University Hospital (SLUH). SLUCare’s data also includes some smaller practices located outside of St. Louis City and County limits, which accounts for less than 2% of their total reported encounters. SLUCare’s and Washington University’s data includes information for both pediatric and adult patients.

Medicaid specialty care encounters decreased by 15% over the past year.

Medicaid Specialty Care Encounters, 2017 - 2020



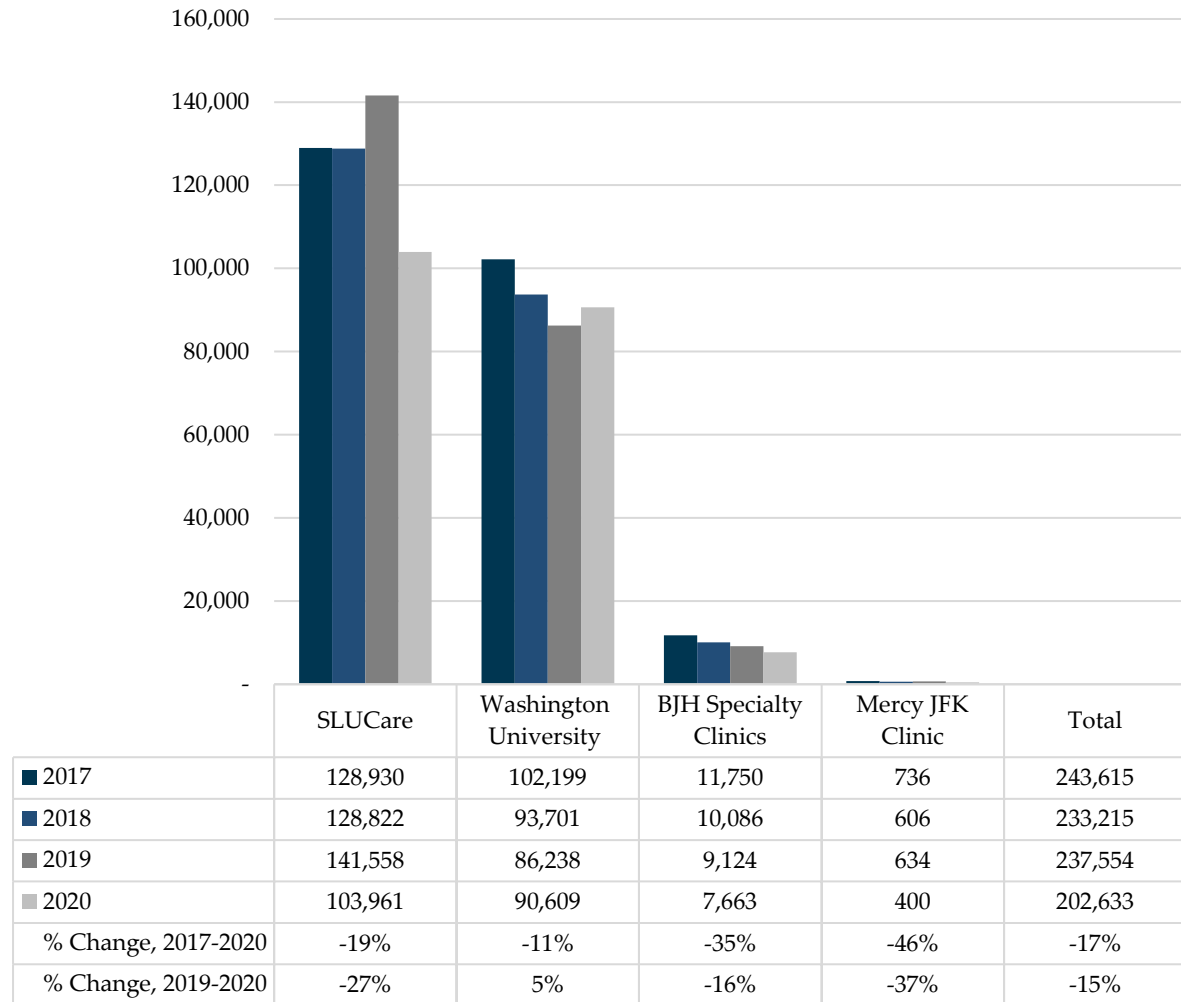
Over the past four years, Medicaid specialty care encounters decreased by 17%.

Note: The number of individuals enrolled in MO HealthNet (Medicaid) from St. Louis City and County decreased from 138,781 in 2019 to 171,748 in 2020; a 24% increase from the previous year.

Washington University and SLUCare account for 96% of all Medicaid specialty care encounters at major safety net organizations.

- Specialty care encounters among the Medicaid population decreased at Mercy JFK Clinic, SLUCare, and BJH Specialty Clinics by 37%, 27% and 16% over the past year.
- Specialty care encounters among the Medicaid population increased at Washington University by 5% in 2020.

Medicaid Specialty Care Encounters by Organization, 2017 - 2020



Note: SLUCare services many Medicaid patients from Illinois. Those patients are reflected in the data above. SLUCare’s reported data includes all sites in which their doctors practice, including the following hospital based clinics: SSM St. Mary’s, SSM St. Clare, SSM St. Joseph, SSM DePaul, SSM Cardinal Glennon and SSM St. Louis University Hospital (SLUH). SLUCare’s data also includes some smaller practices located outside of St. Louis City and County limits, which accounts for less than 2% of their total reported encounters. SLUCare’s and Washington University’s data includes information for both pediatric and adult patients.

Average wait times (in days until next available appointment) for new patients at specialty care organizations varied by specialty department.

Specialty	2019 New Patient Average	2020 New Patient Average	2020 New Patient Range
Rheumatology	37	62	17-103
Hepatology	2	38	16-83
Endocrinology	31	55	51-62
Gastroenterology	31	75	71-83
Pain Management	18	25	25
Neurology	17	61	50-68
Infectious Disease	28	37	26-43
Gynecology/Obstetrics	5	21	1-40
Ophthalmology	13	28	22-31
Nephrology	28	45	29-53
Pulmonology	30	63	56-67
Podiatry	56	100	100
Neurosurgery	85	53	23-120
Mental Health	24	29	23-34
Urology	18	23	17-33
Cardiology	30	28	19-32
Orthopedics	35	37	21-75
Dermatology	62	31	1-55
Gynecology Only	22	21	1-40
Ear, Nose, Throat (ENT)	15	16	13-21
Hematology	17	22	8-29
Oncology	21	17	8-21
General Surgery	22	12	11-12
Physical Therapy	1	16	16
Obstetrics Only	1	1	1

- For new patients, the five specialties with the longest wait times are podiatry, gastroenterology, pulmonology, rheumatology, and neurology.
- Average wait times for new patients at least or almost doubled for podiatry, pulmonology, and rheumatology.

Note: Providers were requested to provide wait times as close to June 3rd, 2021, as possible. The number of organizations who provided responses are different for each specialty, based on availability. Averages were calculated using only the provided wait times for each specialty, individually. This data was collected from BJH Specialty Clinics, Mercy JFK Clinic, SLUCare and Washington University.

Average wait times (in days until next available appointment) for returning patients at specialty care organizations varied by specialty department.

Specialty	2019 Returning Patient Average	2020 Returning Patient Average	2020 Returning Patient Range
Rheumatology	30	43	17-68
Endocrinology	-	37	37
Gynecology/Obstetrics	-	20	1-39
Infectious Disease	-	20	20
Neurology	9	33	5-61
Ophthalmology	7	18	22-31
Neurosurgery	49	21	20-22
Gastroenterology	-	73	73
Gynecology Only	1	20	1-39
Hepatology	-	73	73
Mental Health	14	26	23-28
Cardiology	-	19	19
Pulmonology	7	45	45
Urology	21	42	25-59
Ear,Nose,Throat (ENT)	14	17	13-21
Orthopedics	20	23	20-25
Dermatology	30	25	3-55
Hematology	-	4	4
Oncology	-	4	4
General Surgery	7	14	14
Podiatry	21	20	20
Obstetrics Only	1	1	1
Pain Management	-	-	-
Physical Therapy	-	-	-
Nephrology	-	29	29

For returning patients, the five specialties with the longest wait times are gastroenterology, hepatology, pulmonology, rheumatology, and urology.

Note: Providers were requested to provide wait times as close to June 3rd,2021, as possible. The number of organizations who provided responses are different for each specialty, based on availability. Averages were calculated using only the provided wait times for each specialty, individually. This data was collected from BJH Specialty Clinics, Mercy JFK Clinic, SLUCare and Washington University.

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