



Delivering Health in Rural California

CalPERS Board of Administration
Offsite Meeting
January 23, 2019

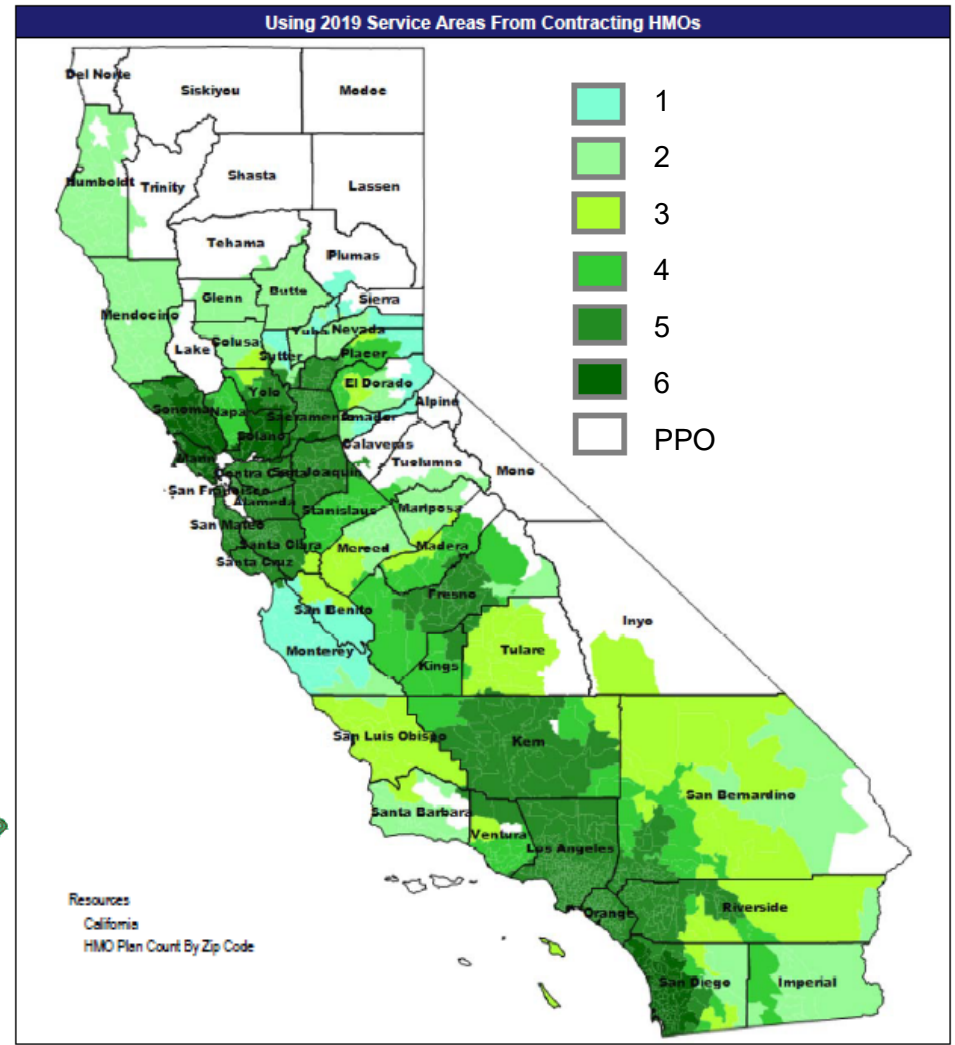
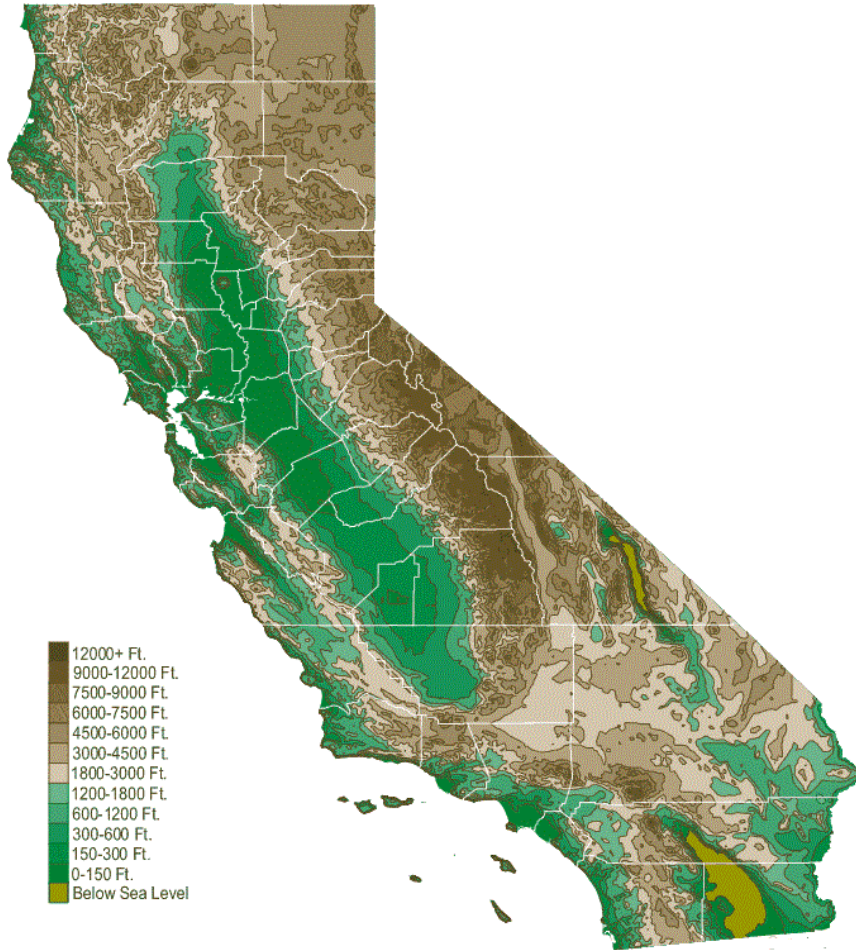
Agenda

- **Rural Markets and Network Challenges**
 - Aldo De La Torre, President/CEO, Community Care Health Plan
- **Department of Managed Health Care**
 - Shelley Rouillard, Director, California Department of Managed Health Care
- **Anthem Opportunities in Rural Health**
 - Barsam Kasravi, MD, Interim Plan President, Anthem Blue Cross
- **Telehealth in Delivering Care**
 - Mei Kwong, Executive Director, Center for Connected Health Policy

Kathy Donneson, Chief
Health Plan Administration Division
CalPERS

Moderator

Delivering Health in Rural California



Challenges

Geographic Access

Provider Access

Provider Shortages

Specialty Care Access



Opportunities

Harnessing Community Resources

Taking Care to the Patient

Alternative Access Policies

Telehealth and Telemedicine



Panelists



Aldo De La Torre
President/CEO
Community Health
Care Plan



Shelley Rouillard
Director
California
Department of
Managed Care



Barsam Kasravi
MD, MPH
Interim Plan
President
Anthem Blue Cross



Mei Kwong
Executive Director
Center for
Connected Health
Policy



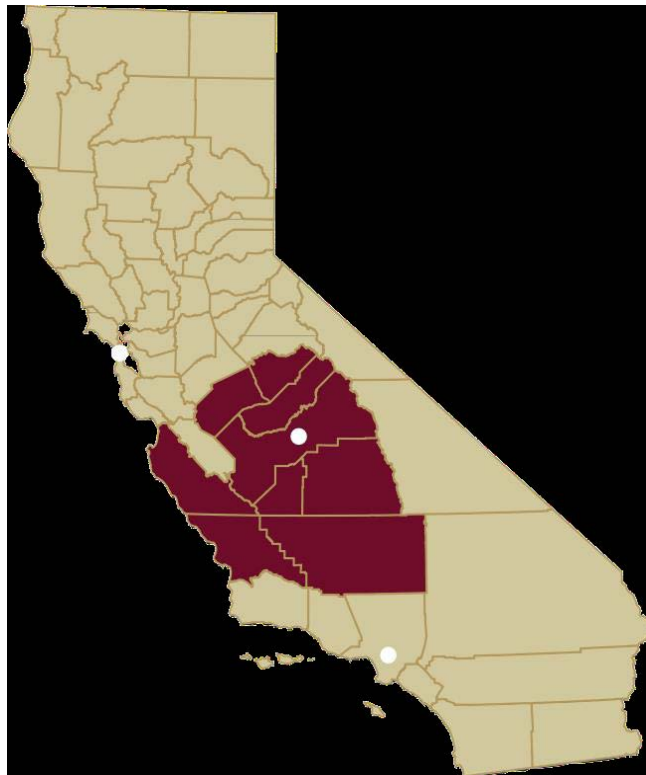
Aldo De La Torre

Rural Markets and Network Challenges

Aldo De La Torre, President/CEO
Community Care Health

January 23, 2019

Community Care Health's service area consists of ZIP codes in Fresno, Kings, Madera & Tulare counties



California Rural Markets

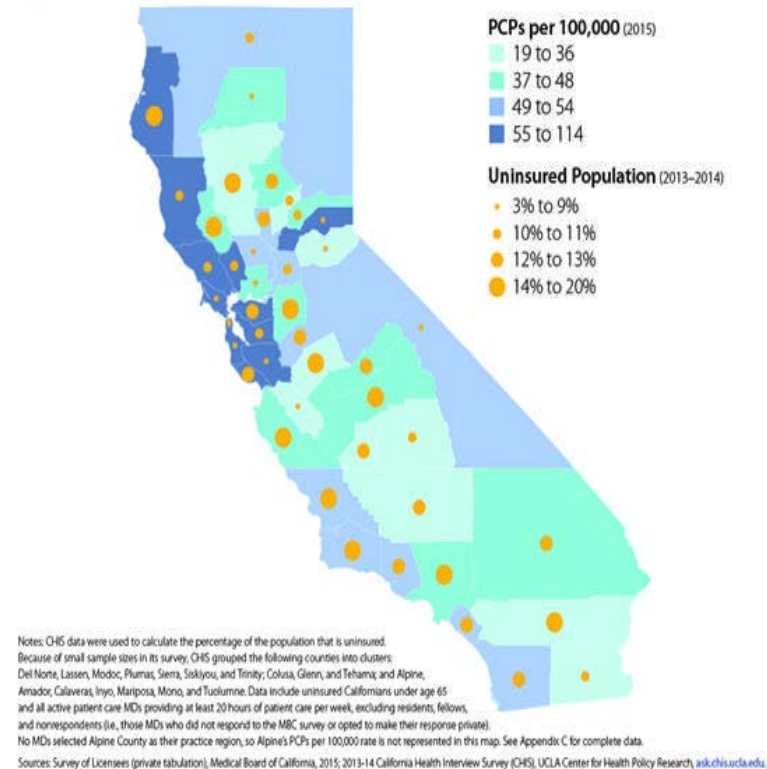


Source: GeoCurrents Map

Rural Network Challenges in California

- **Provider Resource Availability**
 - Hospital Closures
 - Provider Shortage
- **Distance/Geography**
 - Access Standards
 - Weather
- **Payor Mix**
 - Government Programs
- **Reimbursement Incentives**
 - FQHC/RHC Reimbursement

Primary Care Physicians Per 100,000 and Uninsured Population by California County



CALIFORNIA HEALTH CARE FOUNDATION

Rural Network Challenges in California

- **Local Community Hospital (District/County)**
 - Limited Capital/Investments
 - Governance/Civic Pride
 - Critical Access Hospital Status
- **Generally High Cost**
 - 1206d Clinic
 - Single source hospital/higher commercial reimbursement
 - Physician Subsidies/ Non-Par hospital based physicians
- **“Don’t Tread on Me” Disposition**
 - Lifestyle/Attitude
- **Socio-Economic/Cultural Considerations**





Shelley Rouillard

Department of Managed Health Care

Shelley Rouillard, DMHC Director
CalPERS Board of Administration

January 23, 2019

DMHC Mission Statement

The California Department of Managed Health Care protects consumers' health care rights and ensures a stable health care delivery system.

Our Accomplishments





2.1+
Million Consumers
Assisted

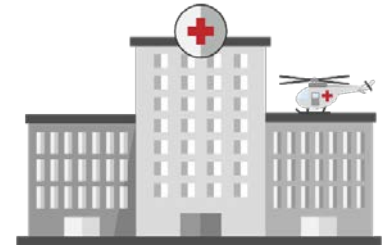
more than
26
million
Californians' health care rights are protected by the DMHC.



123
Licensed Health
Plans

 **75 Full Service**
 **48 Specialized**

\$82 million dollars in payments recovered to physicians and hospitals.



Health Care Premiums Saved Through the Rate Review Program

Since 2011
\$226
Million Dollars



\$26
million dollars recovered from health plans on behalf of Californians.



96%
of commercial and public health plan enrollment is regulated by the DMHC.



April 2018

What is the DMHC?

Regulator of full service and specialized health plans

- All HMO and some PPO/EPO products
- Some large group and most small group & individual products
- Most Medi-Cal managed care plans
- Dental, vision, behavioral health, chiropractic and prescription drug
- Medicare Advantage (for financial solvency)

more than
26
million
Californians'
health care
rights are
protected by
the DMHC.



Health Coverage NOT Regulated by the DMHC

- Products regulated by the CA Department of Insurance
- Medicare Fee-For-Service coverage
- Some Medi-Cal coverage (Fee-For-Service and County Organized Health System plans)
- ERISA self-insured plans
- Private health benefit exchanges

DMHC Assessments

- DMHC is funded by an assessment on all licensed health plans
- Health plan assessments are calculated by distributing the total assessment amount to each plan based on enrollment



 **75 Full Service**

 **48 Specialized**

DMHC Help Center

- Assists consumers with health care problems and concerns
- Ensures managed care patients receive medical care and services to which they are entitled
- Administers the Independent Medical Review process
- Addresses provider complaints

2017 BY THE
NUMBERS:

Help Center

164,151

Consumers assisted

144,963

Telephone inquiries

11,964

Consumer complaints

4,719

IMRs closed

2,505

Non-jurisdictional referrals

4,833

Provider complaints

\$8.8 Million

Recovered provider payments

0

AB 72 IDRPs

Network Adequacy Standards

The Knox-Keene Act establishes three standards the DMHC follows to determine if a network is adequate:

- Network Capacity – Provider to enrollee ratios
- Timely Access – Appointment wait times
- Geographic Access – Time and distance

Network Adequacy Review

- New Network Service Area
- 10% Change in Provider Names
- Annual Network Review
- Block Transfers
- Timely Access Reporting
- Alternate Access

Telehealth

Increase access to care without
restricting face-to-face
appointments

Workforce Development

Support for the Office of Statewide Health
Planning and Development
Health Professions Education Foundation

DMHC Help Center



Voice: **1-888-466-2219**

FAX: **1-916-255-5241**

TTY: **1-877-688-9891**



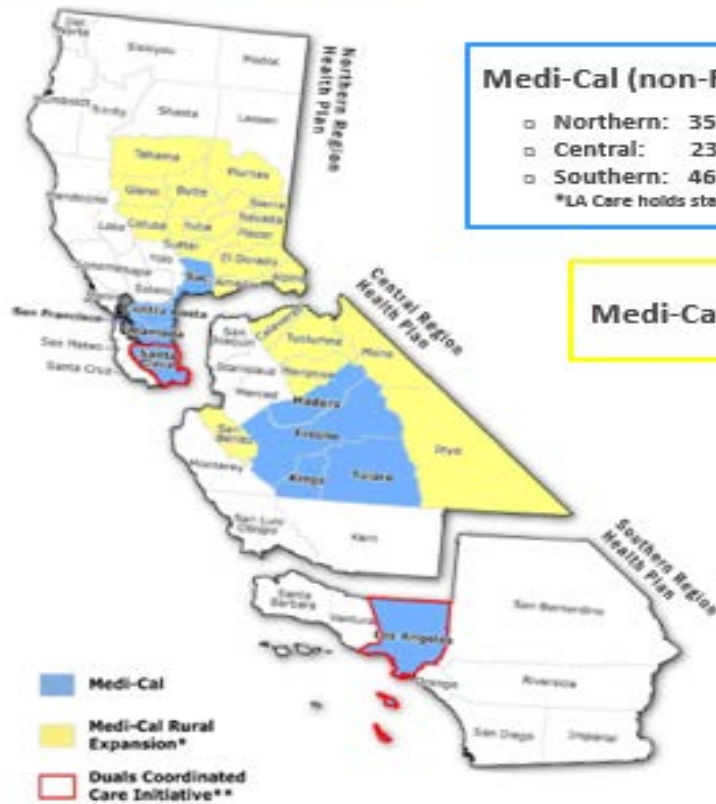
Barsam Kasravi

Delivering Health in Rural California

Barsam Kasravi, MD, MPH
Anthem Blue Cross
January 23, 2019

Anthem's California Medicaid Footprint

California Medicaid Membership
November - 1,211,679



Medi-Cal (non-Rural): 1,052,285 (10 counties)

- Northern: 350,451 (5 counties)
- Central: 238,542 (4 counties)
- Southern: 463,292 (1 county) *

*LA Care holds state contract / Anthem assumes full risk

Medi-Cal (Rural): 159,394 (19 counties)



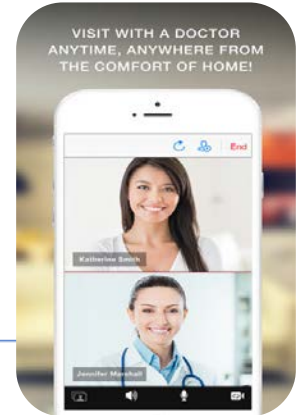
Opportunities in Rural Health

- Increase access to specialists
 - Leveraging networks for Commercial/Medicaid
 - Tele-health
 - Physician Recruitment
- Care Coordination/Social Determinants of Health
- Partnering with local stakeholders
 - Public Health and County
 - Providers/Hospitals
- Behavioral Health/Substance Use



Anthem's Medicaid Tele-health Program (Live Health Online)

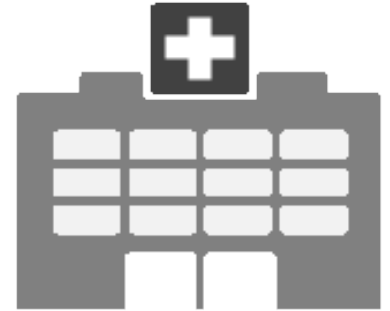
- LiveHealth Online (LHO) is a website and mobile application that gives patients 24/7 access to on-demand video visits (medical). It has an urgent care focus and provides convenient access anytime, anywhere in California (even at home!) via smartphone, tablet or computer
- LHO connects patients with board-certified physicians supporting Physical and behavioral health
- Physicians can electronically prescribe to the member's pharmacy. Note: Only noncontrolled substances can be prescribed
- It is available at no cost for Anthem Blue Cross (Anthem) members enrolled in Medi-Cal Managed Care (Medi-Cal) beginning September 1, 2018



	LiveHealth Online Medical	LiveHealth Online Psychiatry	LiveHealth Online Psychology
Provider types	Board-certified doctors	Board-certified doctors	Licensed psychologist (PhD) and therapist (social workers — masters level)
Benefit offered	Medication if clinically necessary	Medication if clinically necessary Post-initial evaluation	
Availability	On demand 24/7/365	Appointment: 8 a.m. to 8 p.m. Across all time zones	Appointment: 7 a.m. to 11 p.m.
Visit length	10 minutes	30 to 45 minutes for initial evaluation 15 minutes for follow-up sessions if needed for medication review	45 minutes
Average wait time	About 10 minutes	14 days or less	4 days or less
Age served	No age limit, doctor determines if the patient can be treated virtually or not.	18 years or older	10 years or older
Value	Convenient access to care at home. Prevents time consuming ER visits for nonemergent conditions.	Significantly increased access to behavioral health providers at home	

Anthem's Care Coordination Programs In Rural Counties

- **Readmission Reduction Initiative**
 - Assistance at the hospital IP bedside, at PCP visits, and in the home to support members in navigating healthcare
- **Complex Discharge Planner**
 - CM assistance to catastrophically ill members in need of post discharge follow-up to ensure care needs are met
- **Sacramento Triage and Referral (STAR)**
 - Face to Face Behavioral Health support to keep members safe and healthy at home
- **Safe Choice Program**
 - CM supports to assist members with multiple pain/Opioid medications to obtain services from one provider or one pharmacy. Connections to pain management, community resources and support
- **Choice Plus Program**
 - CM support to assist members with multiple pain/Opioid medication. Connections to pain management, community resources and support (Members that don't meet Safe Choice criteria)
- **Emergency Department Reduction Program**
 - CM supports to assist members with Behavioral Health or Substance Abuse diagnosis or symptoms



Anthem's Social Determinants of Health Programs In Rural Counties

- **Whole Person Care**
 - Locally based Care Coordination/Case management programs that will coordinate Physical Health, Behavioral Health. WPC are county led and funded
- **Palliative Care**
 - Vendor "Aspire" assists members with serious medical illness and advanced life planning
- **Housing Assistance Program**
 - Support for homeless or members at risk of homelessness to find housing which may include medical respite or recuperative care
- **Clinic Support through Practice Consultants or Nurses**
- **Transportation**
 - Need to increase options for transportation
- **High Risk OB Program**
 - CM program dedicated to helping high risk pregnant mom's deliver healthy babies



Anthem's Partnerships

- Practice Consultants in Clinics
- Partnerships with local public health and county organizations
- Behavior Health County Organizations
- Hospital Partnerships
- Other Stakeholders





Mei Kwong

Telehealth in Delivering Care to Rural Areas

Mei Kwong, JD

Executive Director, Center for Connected Health Policy

January 23, 2019

DISCLAIMERS

- Any information provided in today's talk is not to be regarded as legal advice. Today's talk is purely for informational purposes.
- Always consult with legal counsel.
- CCHP has no relevant financial interest, arrangement, or affiliation with any organizations related to commercial products or services discussed in this program.

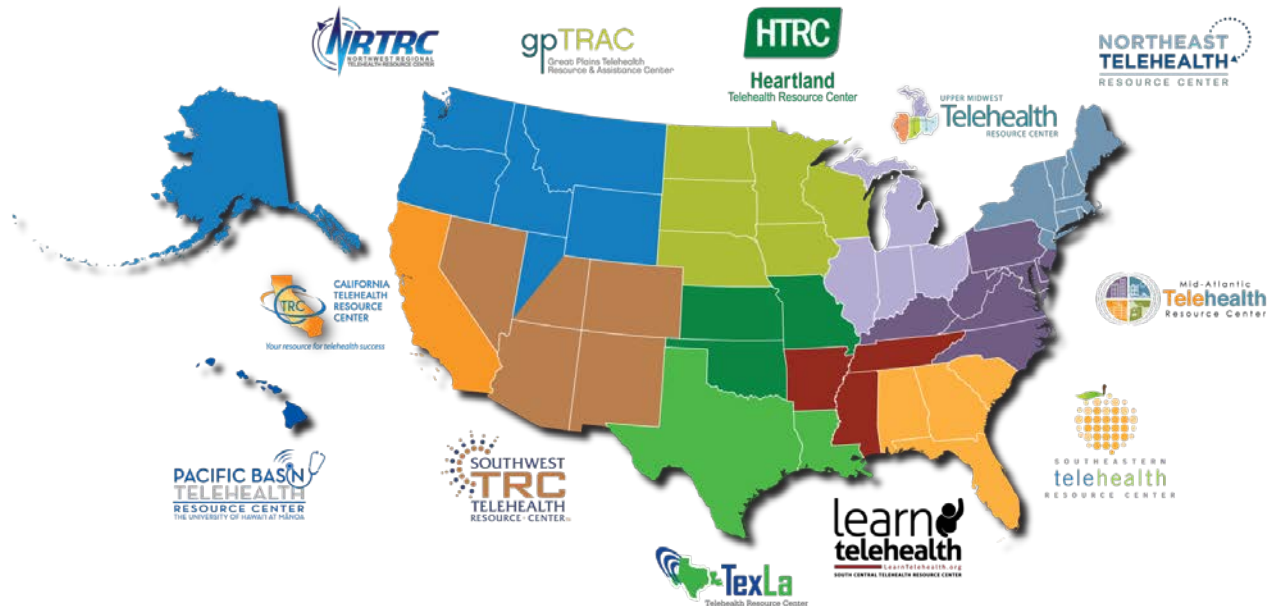
CENTER FOR CONNECTED HEALTH POLICY

CCHP is an independent, **public interest** organization that strives to advance state and national telehealth policies that promote better systems of care improved health outcomes and provide greater **health equity of access to quality, affordable care and services.**



National Consortium of Telehealth Resource Centers

TelehealthResourceCenter.org



2 National Resource Centers

NRTRC	gpTRAC	NETRC
CTRC	HTRC	UMTRC
SWTRC	SCTRC	MATRC
PBTRC	TexLa	SETRC

12 Regional Resource Centers

National Telehealth Policy Resource Center

Search by Category & Topic

Medicaid Reimbursement

- Live Video
- Store & Forward
- Remote Patient Monitoring Reimbursement

Private Payer Reimbursement

- Private Payer Laws
- Parity Requirements

Professional Regulation/Health & Safety

- Cross-State Licensing
- Consent
- Prescribing
- Misc (Listing of Practice Standards)

Physicians are disappearing from the map of rural America. Twenty percent of the country's population lives in a rural area, and the ratio of physicians to patients is 1 to 2,500, which means that 60 million people are dealing with the impact of this shortage.

~ Becker's Hospital Review June 20, 2018

From 2013 – 2015, number of rural physicians dropped by 1,400.

~ US Census Bureau

In 2016, Americans in rural communities were seven times as likely as those in urban areas to report they were never able to get the healthcare they needed.

~ Association of American Medical Colleges Consumer Survey of Health Care Access

Telehealth & Its Modalities



Synchronous
or Live Video



Remote
Patient
Monitoring

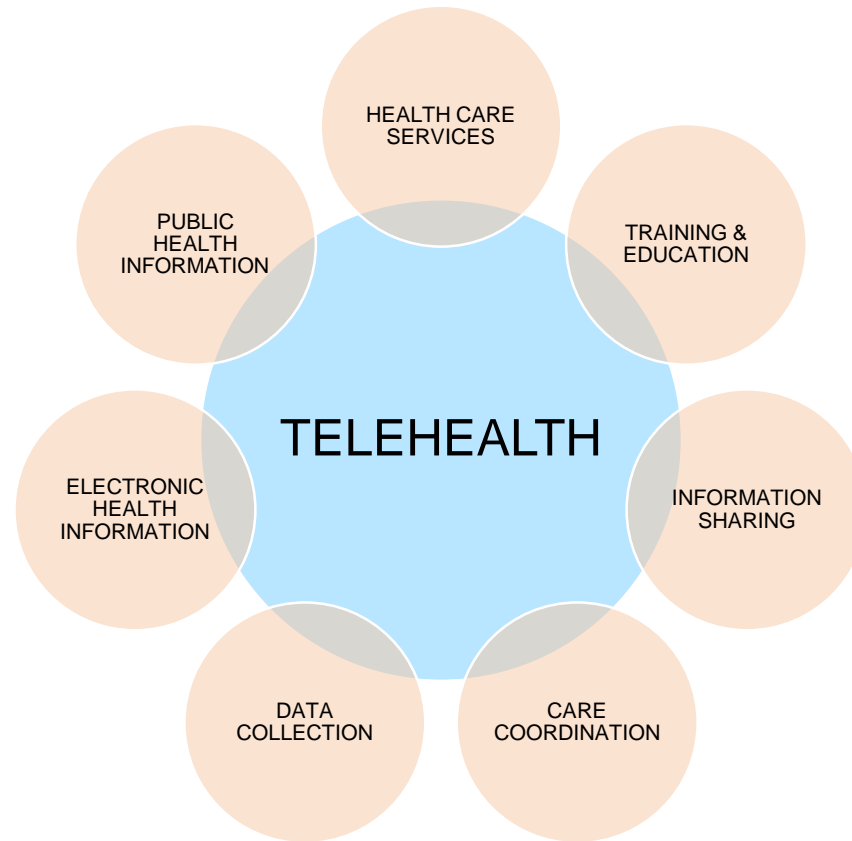


Asynchronous
or Store-and-
Forward



mHealth

Telehealth Goes Beyond Just Providing Healthcare Services





Adult and Pediatric Telehealth Services

We're proud to connect physicians and their patients with specialists at UC Davis Health.

Adult Specialties

- Cardiology*
- Dermatology* (Store and Forward)
- Emergency Medicine
- Endocrinology*
- Genomic Medicine*
- Hepatology* (Hepatitis)
- Infectious Disease*
- Nephrology*
- Neurology*
- Neuromuscular Disease Medicine
- Neurosurgery*
- Nutrition*
- Ophthalmology* (Store and Forward)
- Orthopaedics
- Otolaryngology
- Perinatology*
- Psychiatry*
- Psychology (Medical Health and Behavior)
- Pulmonary and Critical Care*
- Rheumatology*
- Thoracic Surgery
- Trauma
- Urology

Pediatric Specialties

- Behavior and Development*
- Cardiology
- Critical Care
- Dermatology* (Store and Forward)
- Emergency Medicine*
- Endocrinology*
- Gastroenterology
- Genomic Medicine*
- Hematology/Oncology
- Infectious Disease
- Nephrology
- Neonatology*
- Neurology*
- Neuromuscular Disease
- Otolaryngology (cleft and craniofacial)
- Pediatric Hospital Medicine
- Psychiatry*
- Psychology* (Medical Health and Behavior)
- Psychology* (Mental Health and Evaluations)
- Pulmonary
- Urology

Inpatient and Outpatient Care



Contact Us

4610 X Street, Suite 4301
Sacramento, CA 95817

Phone: (877) 430-5332

Fax: (866) 622-5944

<http://health.ucdavis.edu/cht>

*Services denoted by an asterisk are offered by contract only.

*Inpatient-only service.

- ✓ Use for a multitude of specialties
- ✓ Widely used in specialties such as mental/behavioral health, dermatology, cardiology, critical care, ophthalmology
- ✓ Used in treating chronic conditions
- ✓ In California, used in both rural and urban areas

Utilization of telehealth has been impeded by policy barriers around:

- Reimbursement
 - When/where it can take place
 - What/how it can be used
 - Who can provide services
- Prescribing
- Licensing
- Other legal issues
 - Privacy
 - Malpractice coverage



Recent Policy Changes – State & Federal



- ✓ Medicare
 - ✓ Limited by law but have made Administrative changes
 - ✓ Virtual Check-Ins
 - ✓ eConsult
 - ✓ Chronic Care Management (CCM)

- ✓ Medi-Cal
 - ✓ Recent proposed changes that would make CA Medicaid telehealth policy one of the most progressive in country

- ✓ Efforts to address the opioid/substance use disorder

Thank you!

meik@cchpca.org



Questions & Discussion

Question

What are the most promising solutions to improve rural health care?