

2021-2022



MY HEALTH LA PROGRAM SNAPSHOT REPORT FOR FISCAL YEAR 2021–2022



My Health LA (MHLA) is a no-cost health care program for low-income and uninsured individuals who live in Los Angeles County. MHLA participants receive primary medical care and dental care at Community Partner clinics throughout the LA County. When needed, participants also receive specialty, inpatient, emergency and urgent care at Los Angeles County Department of Health Services facilities.

To qualify for MHLA, individuals must be Los Angeles County residents ages 26 - 49 and be ineligible for publicly funded health care coverage programs such as full-scope Medi-Cal. MHLA participants must also have a household income at or below 138% of the Federal Poverty Level.

This report is designed to provide the public, policy makers, participants, clinics, researchers and other interested groups with some information about the MHLA program during Fiscal Year 2021-22. MHLA had a successful 8th year of operation serving its participants, and we are thankful for everyone's contributions to the program.





MHLA is closely aligned with the Department of Health Services mission,

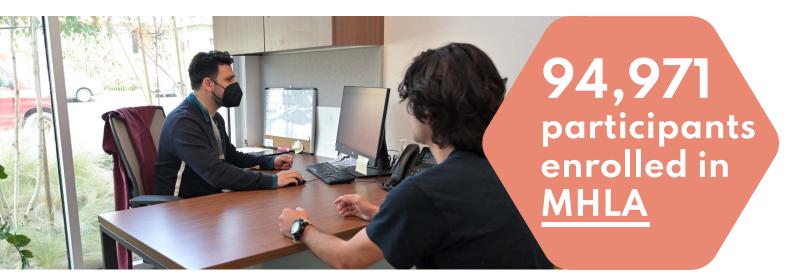
"To advance the health of our patients and our communities by providing extraordinary care."

The goals of the MHLA program are to:

Preserve Access to Care for Uninsured Patients	Ensure that Los Angeles County residents who are not eligible for comprehensive public health care coverage have a medical home and can access needed services.
Encourage coordinated, whole-person care	Encourage better health care coordination, continuity of care and patient management within the primary care setting.
Payment Reform/ Monthly Grant Funding	Encourage appropriate utilization and discourage unnecessary visits by providing monthly grant funding as opposed to fee-for-service payment.
Improve Efficiency and Reduce Duplication	Encourage collaboration among health clinics and providers and avoid unnecessary service duplication by improving data collection, developing performance measurements and tracking health outcomes.

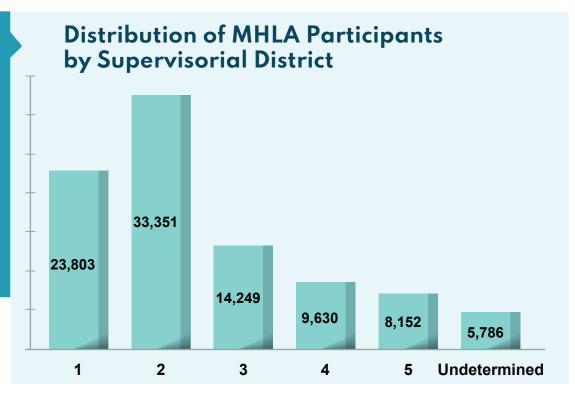
Participant Demographics

- **95**% of participants identified as Latinos.
- **59%** were female and **41%** were male.
- SPA 6 had the largest concentration of MHLA participants at 22%.
- 91% said Spanish was their preferred language.
- **48**% of participants were between 26 and 44 years old.



MHLA Enrollment

At the end of FY 2021-22, there were 94,971 participants enrolled in MHLA. Supervisorial districts 1 and 2 have the largest number of MHLA participants. Participants received care at more than 200 Community Partner clinics, also called their medical home clinics.



Older Adult Medi-Cal Expansion



The expansion of full-scope Medi-Cal to older adults aged 50 and over, regardless of immigration status, took effect on May 1, 2022. MHLA had nearly **60,000** adults who became eligible for Medi-Cal and no longer qualified for MHLA. MHLA partnered with clinics, community organizations and other County departments to ensure a smooth transition out of MHLA.

Disenrollment and Denials



Disenrollments occur when a participant no longer qualifies for the program or because they do not renew in time. Denials occur when a person is enrolled in MHLA but is later denied because they were not eligible. There were **155,121** participants enrolled in the program at any point during FY 2021-22. During the year, **3.5%** (**5,403**) were denied and **50%** (**77,185**) of participants were disenrolled. Participants can re-apply at any time.

Renewals and Re-enrollments



Participants are required to renew their MHLA coverage every year. Renewals can be done in person or by phone. Of the MHLA participants due to renew FY 2021-22, **68%** (**77,680**) of the participants renewed on time. Of the individuals who did not renew, **11%** (**12,855**) reenrolled in the program within the year.

MHLA Annual Clinical Audits

MHLA conducts annual audits of the fifty-one (51) contracted Community Partners' facilities, administration and medical records. The clinical audit team consists of Nurse Auditors and Contract Program Auditors who conduct Facility Site Reviews (FSR)/Credentialing Reviews (CR), Medical Record Reviews (MRR), Dental Record Reviews (DRR), and Dental Site Reviews (DSR) for each clinic site providing medical care for the program participants.

Medical Record Review (MRR)

MHLA conducted a total of 212 Medical Record Reviews. Twenty-five (12%) of the 212 MRRs required a corrective action plan. The most frequent MRR deficiencies were related to foot exam, TB screenings, seasonal flu vaccines, immunizations, and diabetic retinal scans.

212

clinic sites

received a Medical

Record Review



88% passed compliance and did not require a corrective action plan

Dental Record Review (DRR)

MHLA conducted a total of 63 Dental Record Reviews. None of the 63 sites showed deficiencies. All 63 sites met the passing compliance threshold of 90% without repeat deficiencies. Therefore, none of the sites were required to submit a corrective action plan.

63 clinic sites received a Dental Record Review 100% passed compliance and did not require a corrective action plan

Member Services and Participant Complaints

Member Services staff members are available to answer questions for MHLA participants Monday through Friday from 7:30 a.m. – 5:30 p.m. at 844-744-MHLA (844-744-6452). Interpreters are available for MHLA participants. Member Services staff also help make medical home changes, process address changes, and resolve any program issues. There were only five complaints made to Member Services in FY 2021-22.



Mental Health Prevention Services



Department of Health Services continued its collaboration with the Department of Mental Health (DMH) for the provision of mental health prevention services for MHLA participants. Trained clinic staff deliver short-term services in stress management, grief and loss, and trauma-informed care. Community Partner agencies submit claims based on screening and services provided. Based on data analysis conducted by DMH, there were 51,501 claims submissions for 28,593 unique individuals in FY 2021-22. The project is funded by the Mental Health Services Act. In FY 2021-22, DMH reimbursed DHS a total of \$3.8 million for mental health prevention services.

28,593 MHLA participants received mental health prevention services

Substance Use Disorder (SUD) Services



MHLA partnered with the Los Angeles County Department of Public Health's (DPH) Substance Abuse Prevention and Control Division to provide substance use disorder treatment services to MHLA participants. This fiscal year, 712 MHLA participants accessed treatment services through DPH. The largest group of SUD treatment recipients was the age group of individuals 26 to 34 years old. Most people receiving help did so for methamphetamine, followed by alcohol. Other participants received services through their medical home clinics.

712 MHLA participants accessed treatment services through DPH

Pharmacy Utilization



MHLA participants can receive medications for free through an approved formulary. They can go to more than 600 retail pharmacies managed through the DHS pharmacy administrator, Ventegra, or they can go to pharmacies or dispensaries at their clinic. Participants also can have medications mailed to their home or clinic using the DHS Central Pharmacy.

Pharmacy Utilization (Community Partner and DHS)

FISCAL YEAR	UNIQUE Participants	TOTAL NUMBER OF PARTICIPANTS RECEIVING PRESCRIPTIONS (DHS & VENTEGRA)	% OF PARTICIPANTS RECEIVING PRESCRIPTIONS	MEDICATIONS DISPENSED BY VENTEGRA	MEDICATIONS DISPENSED AT DHS (PRESCRIBED BY DHS)	TOTAL PRESCRIPTIONS DISPENSED
2021-22	155,121	81,917	53%	846,760	65,758	912,518

Service Utilization



MHLA analyzes utilization of primary care at the Community Partner clinics and of specialty, urgent, and hospital services at DHS facilities. There were a total of 448,996 primary care visits by 111,663 unique participants. In FY 2021-22, 72% of all MHLA participants had an in-person primary care visit. The average annual number of primary care visits per person was 3.59. Participants with chronic conditions had more visits per year (5.30 on average) than participants without chronic conditions (1.84).

Primary Care at the Community Partner Agencies

FISCAL YEAR	UNIQUE Participants	TOTAL NUMBER OF VISITS	TOTAL NUMBER OF Participant Months	AVERAGE PARTICIPANTS PER MONTH	AVERAGE VISITS PER YEAR
2021-22	111,663	448,996	1,501,726	125,144	3.59

Average Number of Primary Care Visits

Care at DHS Facilities

SERVICE CATEGORY	UNIQUE PARTICIPANTS	NUMBER OF PARTICIPANTS Utilizing at least One service	PERCENTAGE OF Participants utilizing At least one service	NUMBER OF ENCOUNTERS
Specialty (DHS)	155,121	31,157	20.09%	178,409
Emergency (DHS)	155,121	9,539	6.15%	13,509
Urgent Care (DHS)	155,121	5,278	3.40%	8,001
Inpatient (DHS)	155,121	2,525	1.63%	3,528

Participants Utilizing at Least One Service at a DHS Facility

In FY 2021-22, **6%** percent of MHLA participants used DHS emergency rooms. Of those visits, **21%** were considered avoidable.

Emergency Room Visits at DHS

	0 ED VISITS	1 ED VISITS	2 ED VISITS	3 ED VISITS	4 ED VISITS	5-9 ED VISITS	10+ ED VISITS	TOTAL Participants
ALL PARTICIPANTS	145,582	7,111	1,633	465	185	135	10	155,121
ED PERCENTAGE OF TOTAL PARTICIPANTS	93.85%	4.58%	1.05%	0.30%	0.12%	0.09%	0.01%	100.00%



Quality Incentive Payments

To help increase in-person patient visits, MHLA created the Quality Incentive Payment project in FY 2021-22. The new project incentivized clinics to bring their participants back for in-person preventative and follow-up services with their primary care provider. A total of **24** clinics received incentive payments, totaling **\$1,354,904** in payments.

MHLA Expenditures



DHS pays Community Partner agencies in two ways: (1) Monthly Grant Funding (MGF) payments for preventive and primary care, and (2) Fee-for-service payments for dental services provided by those Community Partner agencies with dental contracts with MHLA. In addition, MHLA pays for medications on behalf of participants.

\$42,788,553 In Primary Care Services (MGF Payment)	 MGF payment per month of \$32 plus the \$3.30 supplemental behavioral health payment Based on enrolled participants who had an in-person allowed primary care visit in the prior 24 months.
\$5,007,866 In Dental Care Services (Fee-for-Service)	• 26 of the Community Partners provide dental services to MHLA eligible enrolled participants.
\$8,283,982 In Pharmacy Related Services	• Payments for medication costs, administration and other fees, as well as to the Community Partners for dispensary costs.
\$56,080,399 Grand Total Expenditure for FY 21-22	 MGF payment Dental payment Pharmacy expenditures





To read the full annual report, visit: <u>dhs.lacounty.gov/my-health-la</u>/. Go to Reports. MHLA Administrative Office: 626-525-5789 MHLA Member Services: 844-744-6452