

April 14, 2015

Los Angeles County Board of Supervisors

> Hilda L. Solis First District

TO: Each Supervisor

Mark Ridley-Thomas
Second District

FROM: Mitchell H. Katz, M.D. Mulhell Ko

Director

Sheila Kuehl Third District

SUBJECT: STEPS REQUIRED TO SUCCESSFULLY ADAPT THE

DEPARTMENT OF HEALTH SERVICES AND LOS

ANGELES COUNTY FOR THE AFFORDABLE CARE ACT

Don Knabe Fourth District

Michael D. Antonovich

Mitchell H. Katz, M.D.

Hal F. Yee, Jr., M.D., Ph.D. Chief Medical Officer As requested by the Board at the meeting of December 4, 2012, the following report is an update on various issues relating to the County's implementation of the Affordable Care Act (ACA). At its meeting on November 5, 2013, the Board instructed the Director of the Department of Health Services (DHS) to continue to report to the Board on a monthly basis on the implementation of the ACA; and at its meeting on April 7, 2015, the Board requested a report on a quarterly basis.

313 N. Figueroa Street, Suite 912 Los Angeles, CA 90012

To ensure access to high-quality, patient-centered, cost-effective

health care to Los Angeles County residents through direct services at

DHS facilities and through collaboration with community and

university partners.

Tel: (213) 240-8101 Fax: (213) 481-0503

www.dhs.lacounty.gov

<u>UPDATE</u>

As detailed in the attachment, DHS continues to make progress on key initiatives and operational changes that will prepare our health system to succeed under the ACA.

As always, I welcome your suggestions and feedback on the dashboard report, which we will continue to modify and improve in successive iterations. If you have any questions or need additional information, please contact me at (213) 240-8101.

MHK:GP:rm

Attachment

/ tttaoriiiiciit

c: Chief Executive Office

County Counsel
Executive Office, Board of Supervisors
Department of Public Social Services
Department of Public Health

Department of Mental Health



www.dhs.lacounty.gov

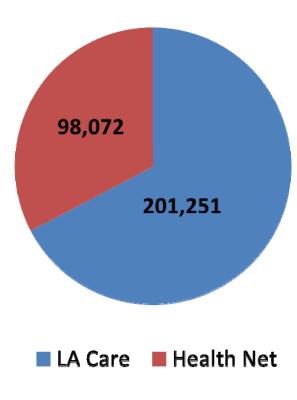
# Status Report on Implementation of the Affordable Care Act (ACA)

Mitchell H. Katz, MD
Director
LOS ANGELES COUNTY
DEPARTMENT OF HEALTH SERVICES

**APRIL 2015 Update** 

# DHS Medi-Cal Managed Care Enrollment (as of April 2015)





#### Gender breakdown

Male: 53%

• Female: 47%

### Age breakdown

0-18: 15%

• 19-64: 83%

• 65+: 2%

### **Distribution of DHS enrollment (LA Care)**

• Default assignment: 64%

Prior DHS affiliation/family link: 29%

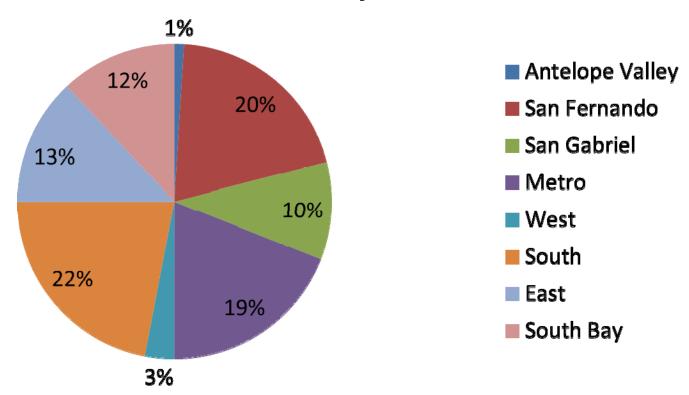
• Choice: 7%



## **Update on My Health LA**

The My Health LA program is a partnership with over 180 Community Partner clinic sites across LA County. As of February 28, 2015, there were **93,253** enrolled in the program.

### MHLA Enrollment by SPA



# **Covered CA and Medi-Cal Statewide Enrollment Data**





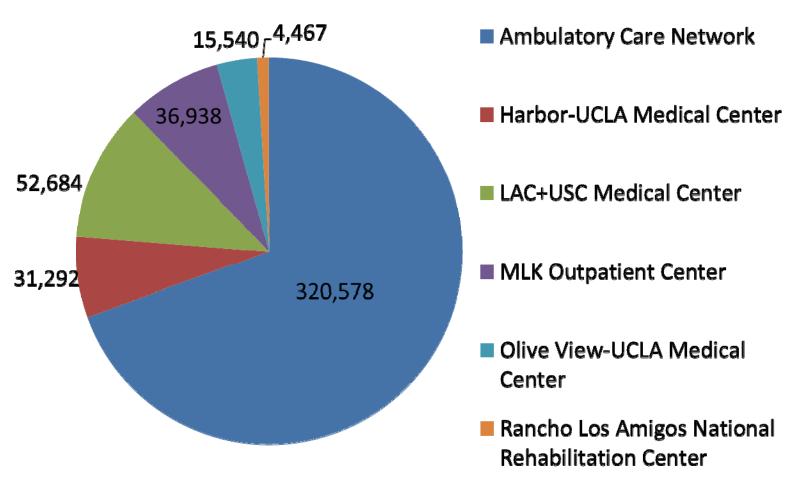
Enrollment Statistics	Nov. 15- Feb. 22	
Covered California plan selections and Medi-Cal* enrollments	1,274,073	
Enrollments in a Covered California health plan	495,073	
Subsidized enrollments (those eligible for federal premium assistance, cost-sharing reduction) in a Covered California health plan	436,970	
Non-Subsidized enrollments in a Covered California health plan	58,103	

Source: Covered California press release dated 03/05/2015

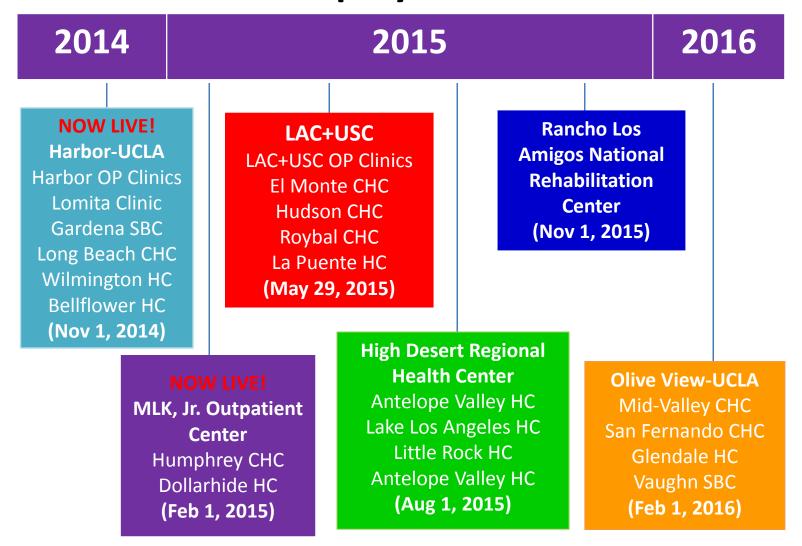
<sup>\*</sup>Medi-Cal information is through Jan. 31, 2015

## **DHS Empanelment by DHS Facility**

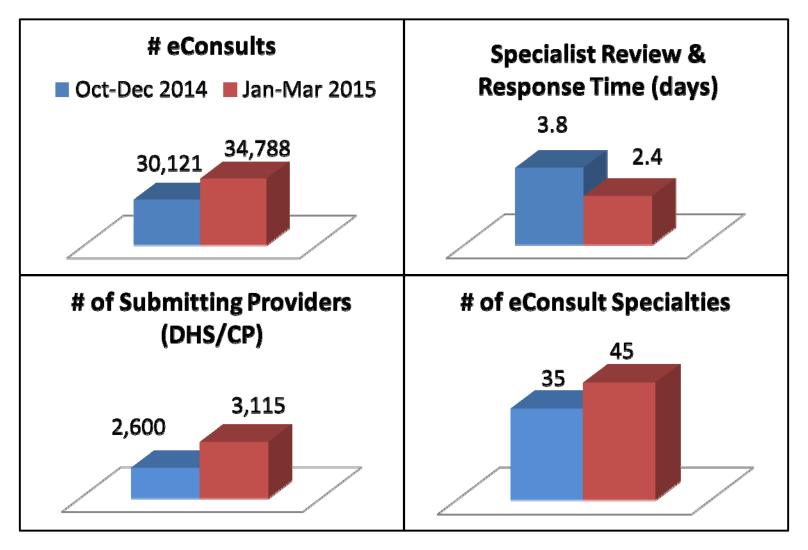
461,499 patients have been empaneled as of April 7, 2015



## **ORCHID Deployment Timeline**

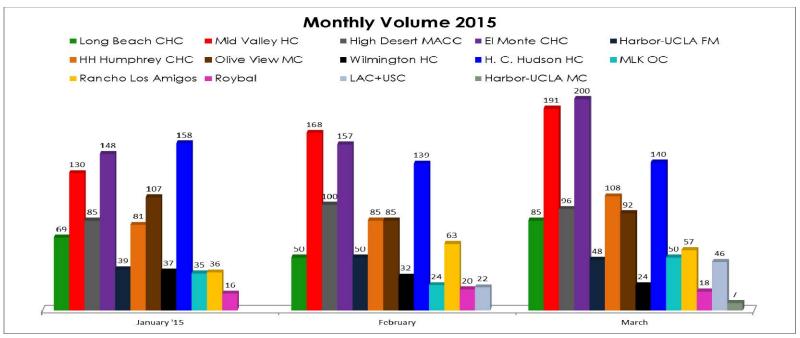


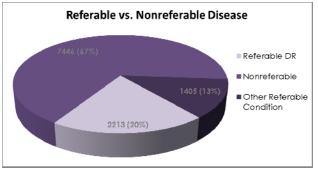
## e-Consult Summary



### **DHS Teleretinal Diabetic Retinopathy Screening Initiative**

(As of 03/31/15)





#### **Case Statistics**

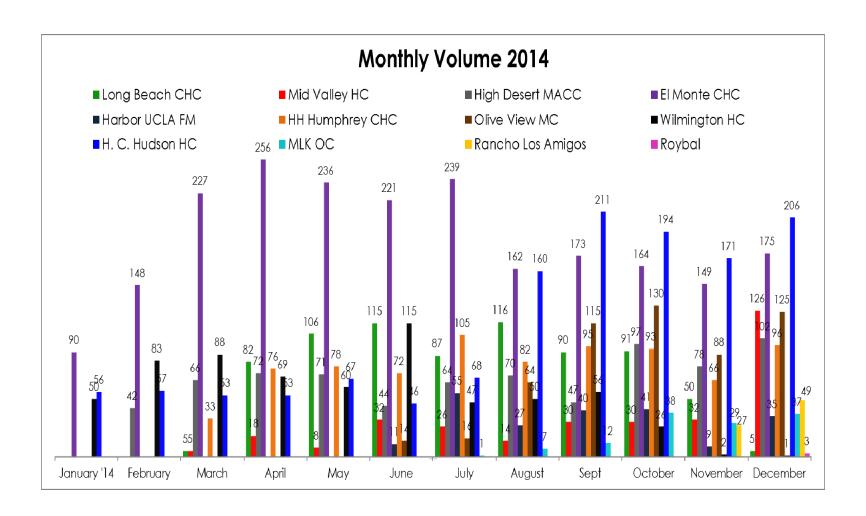
Total Encounters - 11,135

Awaiting Review - 71

Reviewed - 11064

- No Referral Needed 7446
- Referred for Diabetic Retinopathy 2213
- Referred for Other Eye Conditions 1405

## **DHS Teleretinal Diabetic Retinopathy Screening Initiative**



## Lots done, Lots more to do!

- Although many of DHS' initiatives for health reform are underway and proving successful...
- There are many more steps to take as we accelerate our transformation



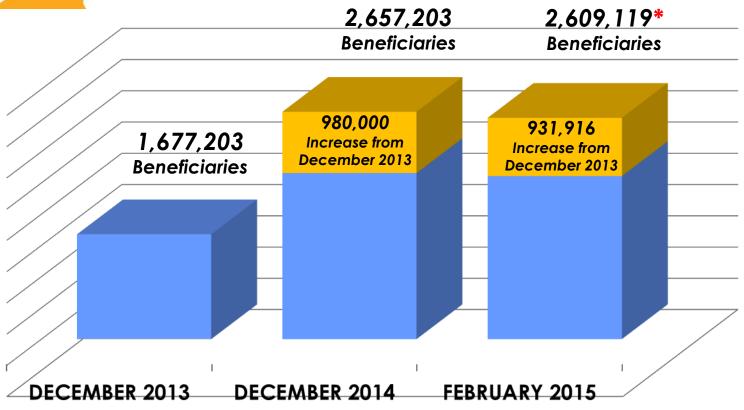
# Implementation of Health Care Reform: Status Update



Sheryl L. Spiller, Director Department of Public Social Services

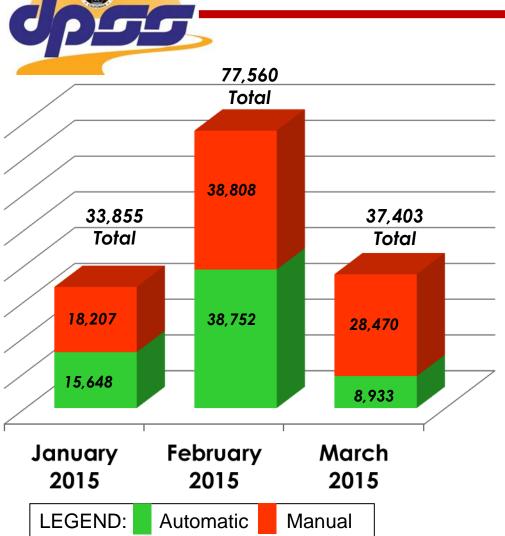


### **MEDI-CAL BENEFICIARIES**



\*LEADER Data Only. Does not include an additional 66,174 beneficiaries approved in MEDS due to CalHEERS/LEADER interface issues.

## **2015 RENEWAL PROCESS**



#### **New Renewal Process**

Designed to automatically re-evaluate each case for ongoing eligibility.

#### **Automatic Authorizations**

If no discrepancies are found, benefits are automatically approved.

#### **Manual Reviews**

Beneficiaries with case discrepancies will be sent a pre-populated form to complete.



## CHALLENGES/OPEN ISSUES

#### **Advocates Filed Two Lawsuits**

- One is in regards to the delays in processing applications timely.
- The second alleges that enrollees were not properly notified that they were required to renew their coverage.

#### **CalHEERS**

- State developed a 24-month Roadmap to correct CalHEERS system.
- We anticipate continued system issues and increased staff workload until all CalHEERS issues are corrected.

#### **Covered California**

Open-enrollment with Covered California began November 15<sup>th</sup>
and was extended through April 30, 2015, to accommodate tax
payers unaware of potential penalties for not having health
coverage.

MEDI-CAL enrollment continues and is available year-round.



## **Affordable Care Act:**

Opportunities for Healthier Communities

Cynthia A. Harding, M.P.H.
Interim Director
Los Angeles County Department of Public Health
April 2015 Update



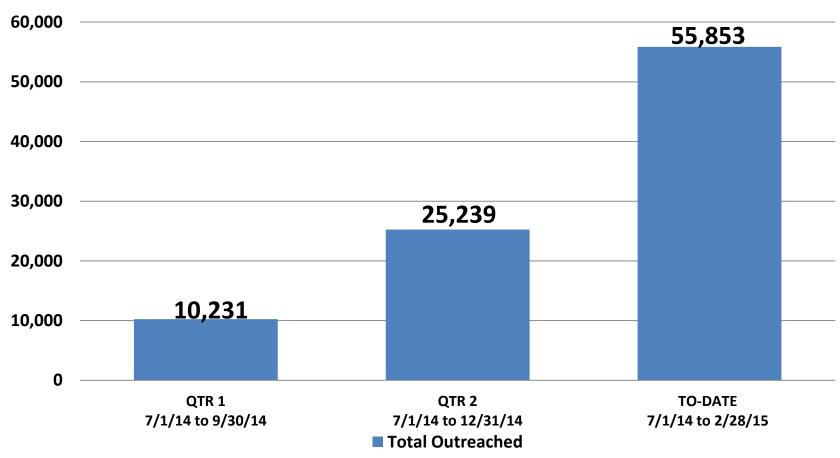
# Medi-Cal Outreach & Enrollment Project Public Health

## State DHCS Two-Year Grant: LA County – \$7 million

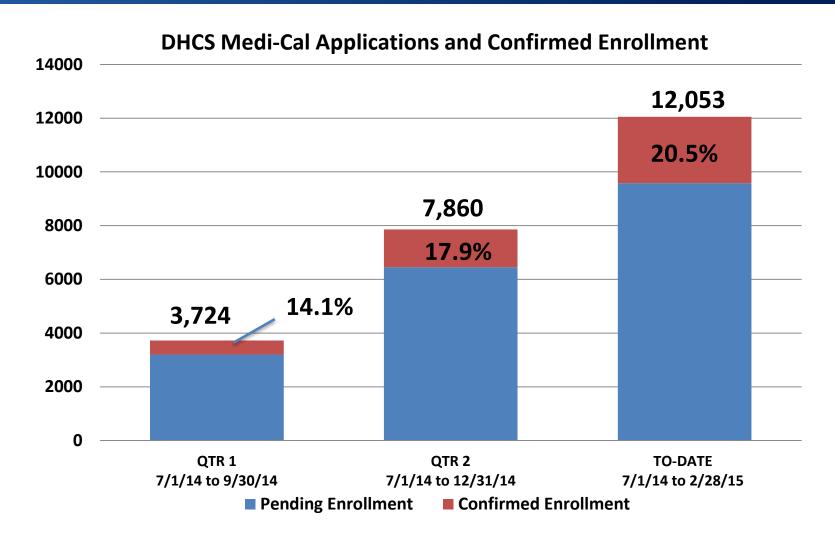
- UPDATE: Additional \$4.8 million for renewal assistance grant extension through December 2016
- DPH oversees grant collaborative
- Partners:
  - 5 County departments,
  - 37 contractors and subcontractors, and
  - 80 community- and faith-based organizations

## Medi-Cal Outreach & Enrollment Project Public Health





# Medi-Cal Outreach & Enrollment Project Public Health



## **Substance Abuse Prevention & Control**



## **ACA Expansion of Substance Use Treatment Services**

Pre-ACA Eligibility
Low-income

Low-income children, pregnant women, & families

<u>ACA</u>

**Expansion** 

Single childless adults with

income

< 138%

poverty

LA County Implementation

Opting in to State's Drug

Medi-Cal

Organized

Delivery System

Waiver

### **DPH Clinical Services**



Partnering with DHS on billing consultant services

# Revenue Generation / Billing for Services

Initiated a billing pilot in 5 DPH health centers for TB Direct Observed Therapy (DOT)

Completing Targeted Case Management (TCM) pilot planning for communicable disease case management at 5 DPH health centers

Implementing ORCHID in DPH clinics

### Electronic Health Records (EHR)

Readiness assessment, roadmap, resource planning, and contracting – Early 2016

Initial ORCHID rollout - Mid-2016

## **ACA Funding for LA County Public Health**



Community
Transformation Grant

Public Health Improvement Initiative

Epidemiology & Laboratory Capacity

Chronic Disease Prevention Strategy

Maternal, Infant, Early Childhood Home Visitation Program

Drug Medi-Cal Expansion

# **Communicable Disease Control and Prevention**



## **Epidemiology and Lab Capacity**

### **Lab Testing Capabilities for Disease Detection & Response**

- Testing for foodborne illness and outbreaks
- New rapid methods to identify causative agents and fingerprinting to help determine disease clusters and source tracing
- Disease Monitoring: Norovirus,
   Flu, West Nile Virus, Carbapenemresistant enteric (CRE) bacteria...
- CRE prevention initiative

#### **Achievements**

- New lab certifications
- Updated electronic lab information systems for reporting
- Ebola and MERS testing

## **Chronic Disease & Injury Prevention**



ACA
Opportunities:
Creating
Healthier
Communities

**Community Transformation Grant – Completed Accomplishments posted:** 

http://publichealth.lacounty.gov/chronic/

CDC Prevention Fund Grant –
State and Local Public Health Actions

CDC Partnership to Improve Community Health – Los Angeles County Office of Education

**Coordination and Collaboration on Other Grant Efforts in Los Angeles** 

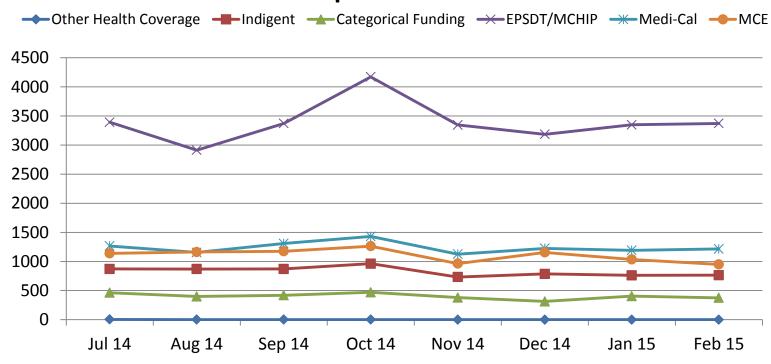


# DMH and the Affordable Care Act (ACA)

Robin Kay, Ph.D., Chief Deputy Director
Los Angeles County Department of Mental Health
April 14, 2015

# Service Capacity & Access

# FY 14/15 New Clients by Month by Funding Type Outpatient Claims



<sup>&</sup>quot;New clients" identified as no prior service in last 12 months

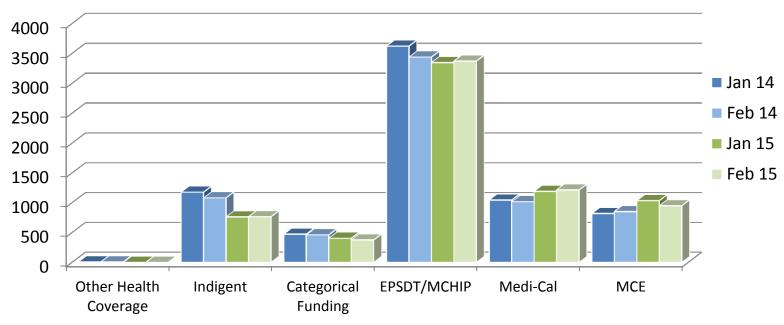
<sup>&</sup>quot;Categorical Funding" includes CalWORKs, SAMHSA, etc.

<sup>&</sup>quot;Medi-Cal" includes all Medi-Cal, including Medi-Medi, except for MCE and EPSDT/MCHIP "EPSDT/MCHIP" includes EPSDT, MCHIP, MCHIP EPSDT

# Service Capacity & Access

# New Clients by Month by Funding Type Outpatient Claims

January - February 2014 compared to January - February 2015



<sup>&</sup>quot;New clients" identified as no prior service in last 12 months

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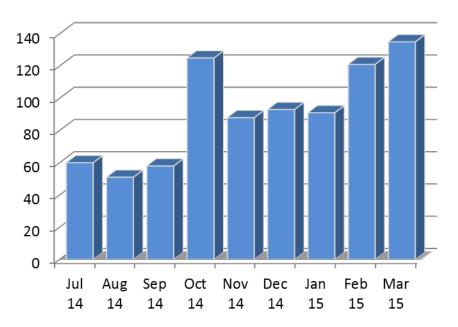
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# Service Capacity & Access

Referrals from Medi-Cal Managed Care Plans for Urgent Appointments

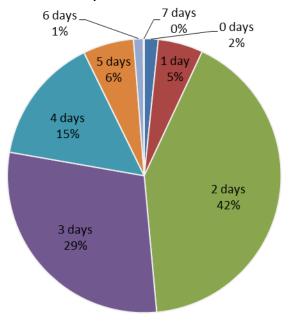
Total Number of Urgent Referrals per Month

July 2014-March 2015



Number of Days from Referral to Initial Appointment

January 2014-March 2015



# Organizing Service Delivery: Health Neighborhoods



# Organizing Service Delivery: Health Neighborhoods

	Number of Health Neighborhood Partners			
Health Neighborhood	Mental Health	Health	Substance Abuse	Other
Lancaster	11	3	5	6
Pacoima	10	10	9	1
El Monte	9	3	6	1
Boyle Heights	11	5	4	2
MLK/Watts/Willowbrook	15	3	5	1
Southeast Los Angeles	7	4	6	1
Central Long Beach	7	2	2	2

<sup>\*</sup>Some providers may offer more than one type of service. Each service is counted.

# Organizing Service Delivery: Health Neighborhoods

An Example of Collaboration within the Pacoima Health Neighborhood:

# FIRST 5

Caregivers of DCFS involved children need more support



We have
Specialized Foster
Care Parent
Advocates that
can help!

#### Solution

- Biweekly meetings with 20 – 25 caregivers of DCFS involved children focusing on education and advocacy
- Collaborate with DCFS to develop curriculum with more topics on Child Welfare