

Medi-Cal and Health Care

What We've Learned During COVID-19 and How We Can Move Forward

Wednesday, October 7, 2020

12:30 - 1:30 pm

Cathy Senderling-McDonald, CWDA, Moderator

Panelists

Jacey Cooper

CA State Medicaid Director
Chief Deputy Director, Health Care Programs
California Department of Health Care Services

► Andie Patterson

Vice President of Government Affairs California Primary Care Association

Mimi Hall, MPH

Director

Santa Cruz County Health Services Agency



Medi-Cal and Health Care – What We've Learned During COVID-19 and How We Can Move Forward

Jacey Cooper
CA State Medicaid Director



Waivers & Flexibilities

- CMS Blanket Medicare Waivers
- Request for Federal Flexibilities
 - 1135 Waiver Requests
 - Home and Community-Based Services (HCBS) Appendix K Requests
 - 1115 Waiver Request
 - Disaster SPA Requests
 - Implemented provisions of Children's Health Insurance Program (CHIP) SPA
- Governor's Executive Order



COVID Guidance

Eligibility

Beneficiary Outreach

Providers

Managed Care

Behavioral Health

Telehealth



Phone Call Away



Medi-Nurse Line



Medi-Nurse Line: (877) 409-9052



Hope will persevere

(833) 317-HOPE

calhope.dhcs.ca.gov



Challenges

Even beyond the lifetime of the Public Health Emergency, COVID-19 will have a long-term impact on the Medi-Cal program and its health care delivery systems

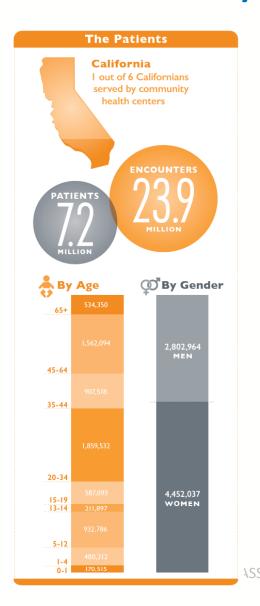
- Exacerbated pre-existing health disparities and inequities
- Financial impact to providers
- Program Oversight: Quality reporting and network adequacy
- Adverse effects the pandemic is having on the behavioral health of Californians
- Resuming regular care impact to well-child visits and immunization rates
- Unwinding the federal and state waivers and flexibilities
- CA budget deficit

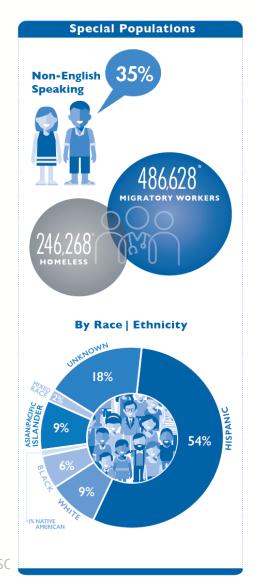


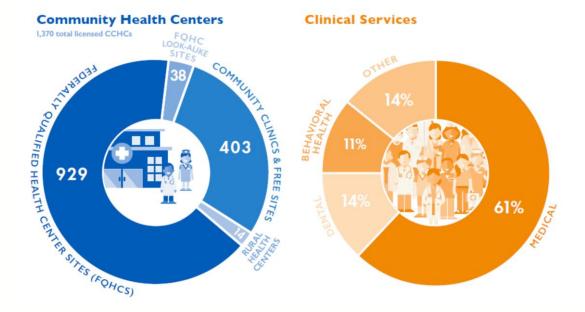
Community Health Centers and COVID-19

October 2020

Community Health Center Profile: 2019







COVID-19: Response and Obstacles

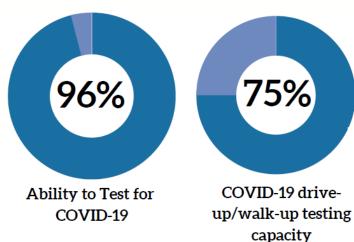
Response

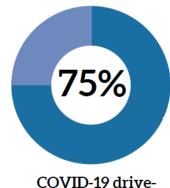
- Protecting and ensuring public health
- Testing
- Securing PPE
- Having to close sites, reduce hours and execute furloughs

Obstacles

- FQHC payment is fee for service (volume oriented)
 - FFS comes with many restrictions- types of providers, locations, services provided
- Staff health concerns/ family dynamics (kids at home)
- Federated State/County public health model

COVID-19: CHC August Response





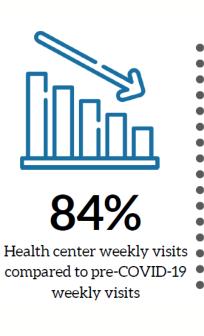
Average turnaround time for COVID-19 test results

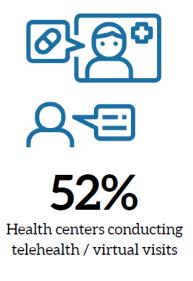
42% at more than 5 days

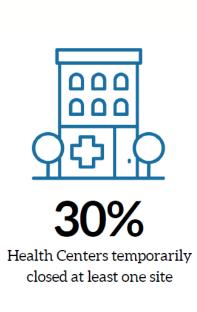


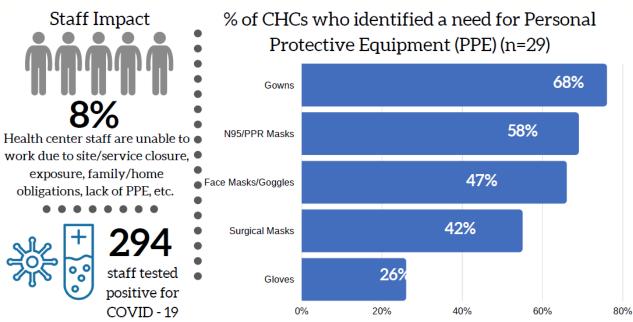
	Patients Tested for Virus Detection	Patients Tested for Antibody Detection
Patients Tested	78,935	2,984
Patients Tested Positive	12,581	531
% of Patients Tested of Racial / Ethnic Minority	72%	53%
% of Patients Tested <u>Positive</u> of Racial / Ethnic Minority	81%	69%

COVID-19: CHC August Response









Data Source: HRSA Health Center COVID – 19 Data Collection Survey administered on August 7, August 14, August 21, and August 28. Data reflects 158 FQHCs and Look Alike Clinics.

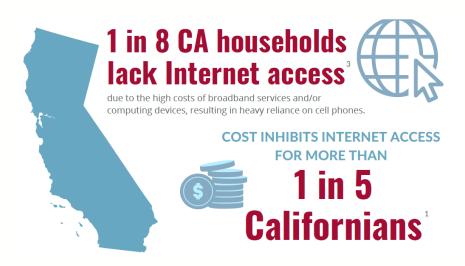
Data represents information provided by health centers from a single, specified reporting date.

COVID-19: Opportunities

Opportunities

- Virtual care FOREVER!!!!
 - Decreases no show rates
 - More equitable for patients (easier access/ less time consuming)
 - Telephonic flexibilities/payment must be kept
- Health centers realizing how quickly they can change delivery
- Value based payment
- Deeper connections and best practices with public health

Why telephonic access is so important



COVID-19 DIGITAL INEQUITIES IMPACTING ACCESS

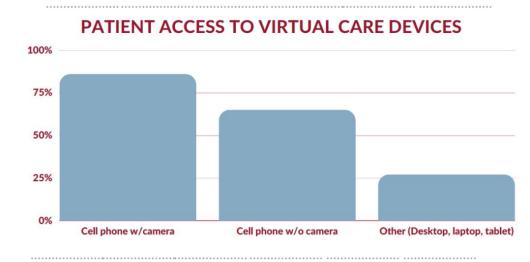
2 out of 3 patients

rely on cell phones to receive virtual care

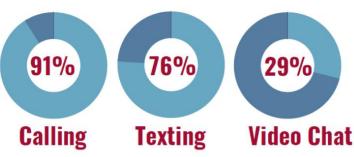


1 out of 4 patients

rely on non-mobile devices to receive virtual care



91%
of patients are most comfortable using phones for care



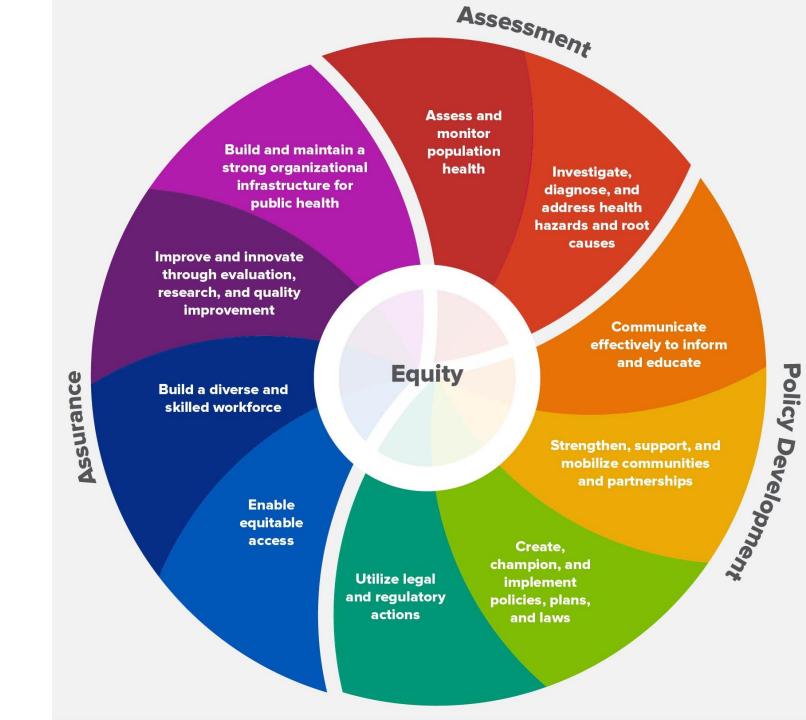
COVID-19: Lessons for Local Health Jurisdictions

CWDA Annual Conference October 7, 2020

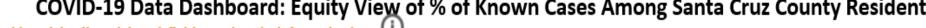
Mimi Hall, Director
County of Santa Cruz
Health Services Agency

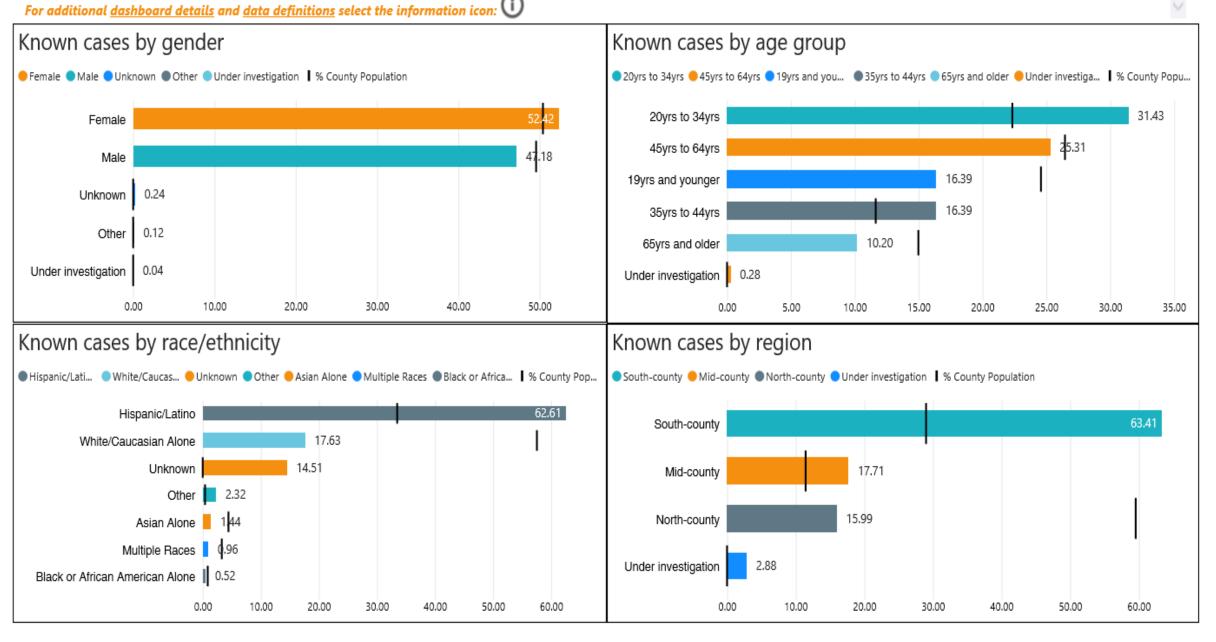
Ten Essential Public Health Services

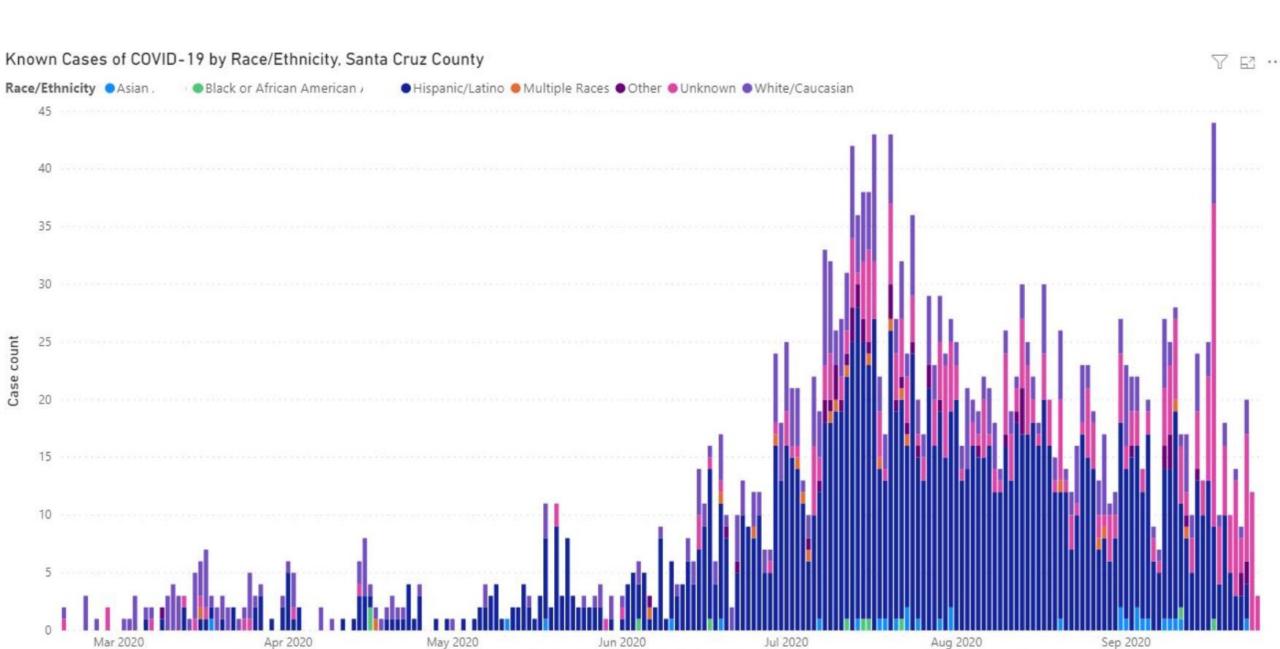
- This framework underscored by COVID-19
- Equity at the core
- Opportunity to demonstrate the use of epidemiological data to inform pandemic response
- Allocation of diverse resources to populations most impacted and at risk



COVID-19 Data Dashboard: Equity View of % of Known Cases Among Santa Cruz County Residents







Earliest Date Reported to Public Health

Challenge



Transformation



The changing landscape of COVID created adaptability in the service delivery system



Chronically underfunded public health infrastructure resulted in strengthened public/private partnerships



Lack of coordinated national, state and local strategies required reliance on local systems innovations and resources



Polarization and politicizing of public health science and practice

"Injustice anywhere is a threat to justice everywhere"

Dr. Martin Luther King, Jr.

Questions?

Please type your questions into the Q&A Box on your screen.

We will answer as many questions as possible.