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# L.A. Health Collaborative

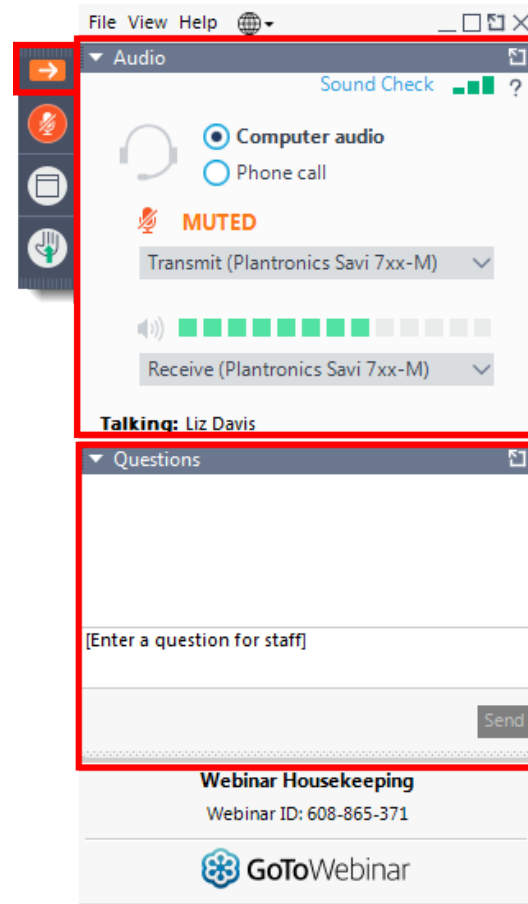
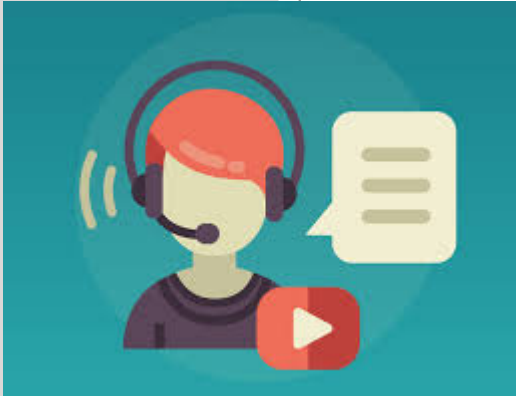
## COVID-19 and Medi-Cal Waiver Renewals

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November 19, 2020

# Welcome to the Webinar!



## Your Participation

Open and close your control panel

Join audio:

- Choose **Mic & Speakers** to use VoIP
- Choose **Telephone** and dial using the information provided

Submit questions and comments at any time via the Questions panel

**Reminder:** Today's presentation is being recorded and will be available within 48 hours.

# Who We Are



## Insure the Uninsured Project

- Nonpartisan, independent 501 (c)(3) organization, founded in 1996
- The mission of ITUP is to promote innovative and workable policy solutions that expand health care access and improve the health of Californians
- ITUP implements its mission through policy-focused research and broad-based stakeholder engagement

# ITUP Vision / Values



## ITUP Seeks a Health Care System that is:

- Universal** – All Californians are eligible for comprehensive health coverage and services, including primary, specialty, behavioral, oral, and vision health services, as well as services that address the social determinants of health
- Equitable** – All Californians receive health care coverage, treatment, and services that address the social determinants of health regardless of health status, age, ability, income, language, race, ethnicity, gender identity, sexual orientation, immigration status, and geographic region
- Accessible** – All Californians have access to coverage options and services that are available, timely, and appropriate
- Effective** – Health, health care, and related services that address the social determinants of health are person-centered, value-based, coordinated, and high-quality
- Affordable** – Coverage and services are affordable for consumers at the point of purchase and care; and, at the health system level for public and private purchasers





## LA HEALTH COLLABORATIVE

**COVID-19 and Medi-Cal Waiver Renewals:  
Where the Health Care Delivery and  
the Public Health Systems Intersect**

### AGENDA

**Thursday, November 19, 2020**  
1:00 p.m.- 3:30 p.m.

1:00 – 1:10 p.m.	<b>Welcome and Introductions</b>
1:10 – 2:25 p.m. <i>Includes Q&amp;A</i>	<b>Waiver Renewals—What's Next</b>  <b>Christina Ghaly, MD</b> , Director, Los Angeles County Department of Health Services <b>Lisa Wong, Psy.D.</b> , Senior Deputy Director, Department of Mental Health, County of Los Angeles <b>Gary Tsai, MD</b> , Interim Director, Medical Director, Science Officer, Substance Abuse Prevention and Control, Department of Public Health, County of Los Angeles <b>Heidi Marston, MPA</b> , Executive Director, Los Angeles Homeless Services Authority <b>Katie Heidorn, MPA</b> , Executive Director, Insure the Uninsured Project (Moderator)
2:25 – 3:20 p.m. <i>Includes Q&amp;A</i>	<b>Community Health During COVID-19</b>  <b>Yvonne Mariajimenez, JD</b> , President and CEO, Neighborhood Legal Services <b>John Connolly, PhD</b> , Chief Strategist, Department of Public Health, County of Los Angeles <b>Louise McCarthy, MPP</b> , President and CEO, Community Clinic Association of Los Angeles County <b>Maria Lemus</b> , Executive Director, Visión y Compromiso <b>Katie Heidorn, MPA</b> , Executive Director, Insure the Uninsured Project (Moderator)
3:20 – 3:30 p.m.	<b>Takeaways and Wrap Up</b>
3:30 p.m.	<b>Adjourn</b>

# Today's Agenda

## **Christina Ghaly, MD**

*Director, Los Angeles County Department of Health Services*

## **Lisa Wong, Psy. D.**

*Senior Deputy Director, Department of Mental Health, County of Los Angeles*

## **Gary Tsai, MD**

*Interim Director, Medical Director, Science Officer, Substance Abuse Prevention and Control, Department of Public Health, County of Los Angeles*

## **Heidi Marston, MPA**

*Executive Director, Los Angeles Homeless Services Authority*

**Waiver  
Renewals –  
What's Next**

# Section 1115 Waiver Update ITUP Convening

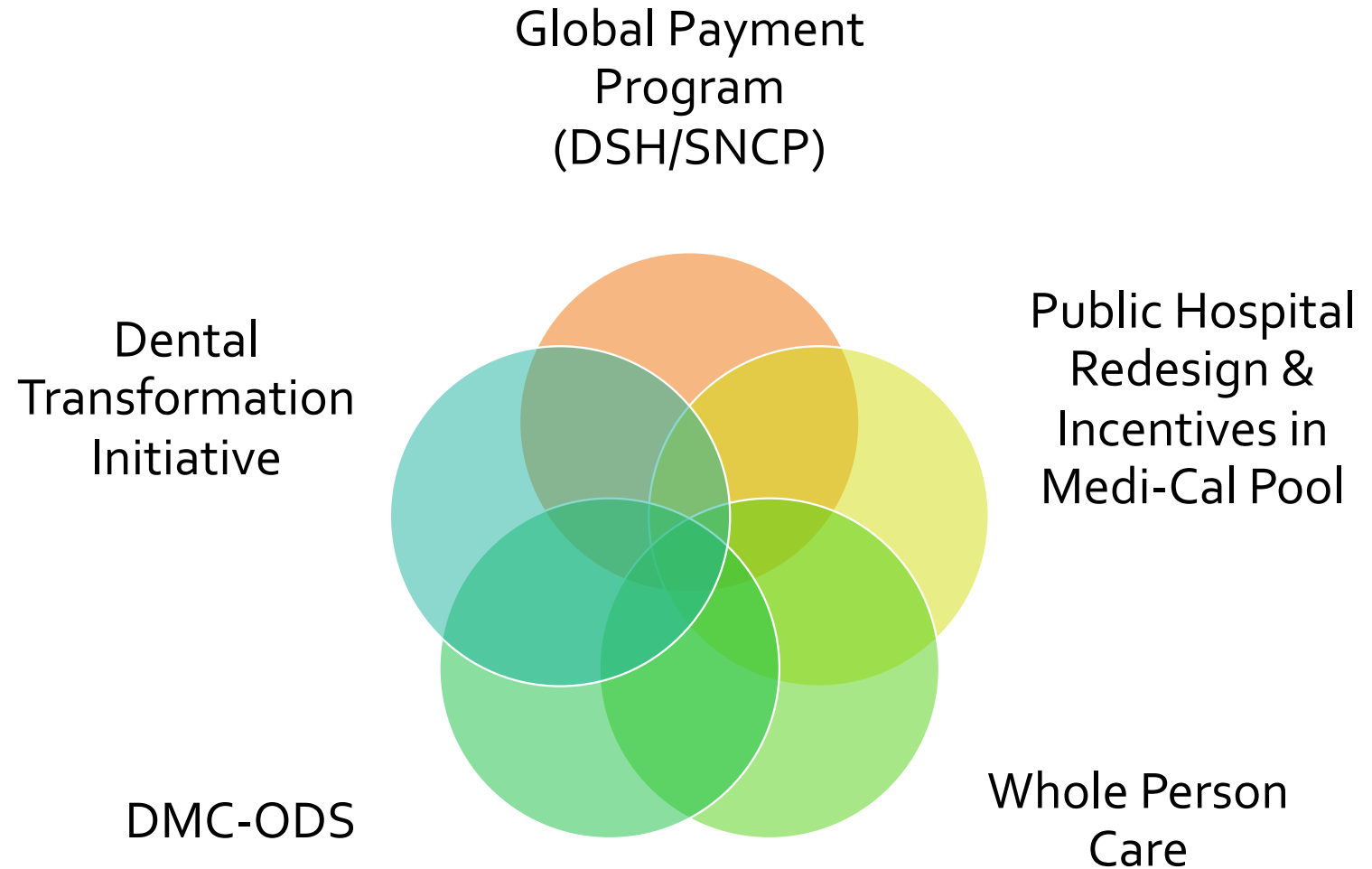
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Christina Ghaly, MD, Director, Los Angeles County Department of  
Health Services



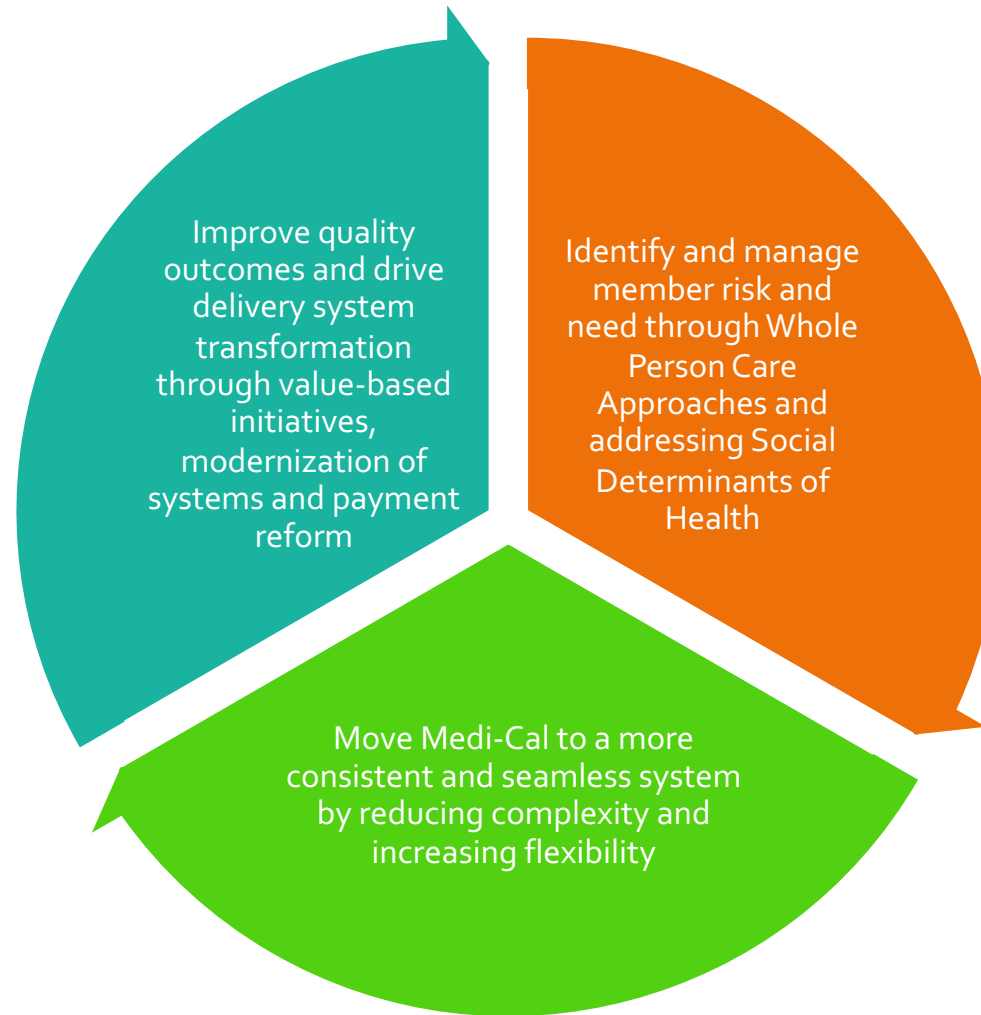
**Health Services**  
LOS ANGELES COUNTY

# Current 1115 Medicaid Waiver



Expires December 31, 2020

# Cal-AIM Program – previous proposed structure



# Major components of Cal-AIM

(non-behavioral health)

Population Health Management

Enhanced Care Management

In Lieu of Services

Incentive Payments

Mandatory Medi-Cal Application Process upon Release from Jail

Full Integration Plans

Looking  
ahead...

Waiver renewal

Cal-AIM revised proposal and stakeholder  
process

State budget

Medi-Cal managed care re-procurement



LOS ANGELES COUNTY  
**DEPARTMENT OF  
MENTAL HEALTH**  
hope. recovery. wellbeing.

# LAC DMH Outpatient Services During the COVID-19 Pandemic

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LISA H. WONG, PSY.D., SENIOR DEPUTY DIRECTOR





# Changes During COVID

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## Transition to Telework

- Reducing in-person services
- Maintaining in-person services for essential/urgent/emergent needs (e.g., vulnerable populations, 5150 evaluations, clients without access to technology)
- Developing ways to monitor/develop clinical practice

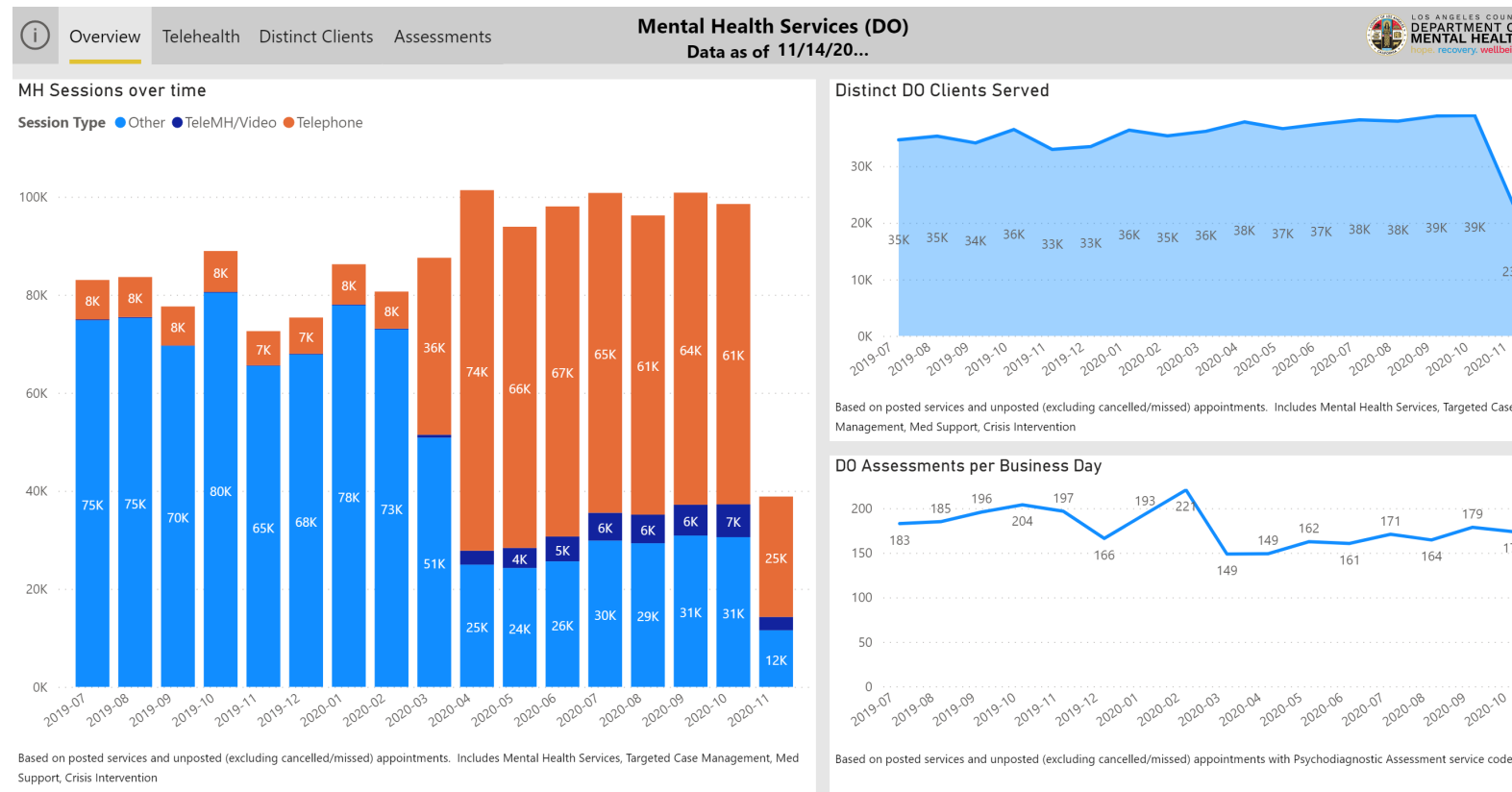
## Developing Technology

- Finding solutions that met our needs
- Adjusting to the virtual world
- Training

## Mobilizing Resources

- PPE Distribution
- MD “hubs”
- Clinical pharmacy refills
- Inventorying our resources (e.g., vans, laptops, phones)

# OP Services Before & During COVID



# Connecting with the Community's Health Needs

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- Service Area Leadership Teams
- Health Neighborhoods
- Providers Meetings
- Innovation (INN) 2 - Developing Trauma Resilient Communities through Community Capacity Building

# Moving Forward

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## Lessons Learned

- Advantages of Telehealth
- Telehealth Fatigue
- The importance of connectedness – clients & staff
- We have more capacity to be flexible and responsive than we thought

## Challenges Ahead

- Funding
- Maintaining a workforce
  - ✓ Illness
  - ✓ Child care
  - ✓ Deployments
- Collaborating with partners in the virtual realm
- The world does not stop for COVID

# The "Wii" of Healthcare (Waivers, Integration, & Innovation) – L.A. County's Specialty Substance Use Disorder System

**Gary Tsai, M.D.**

**Interim Director | Medical Director | Science Officer**

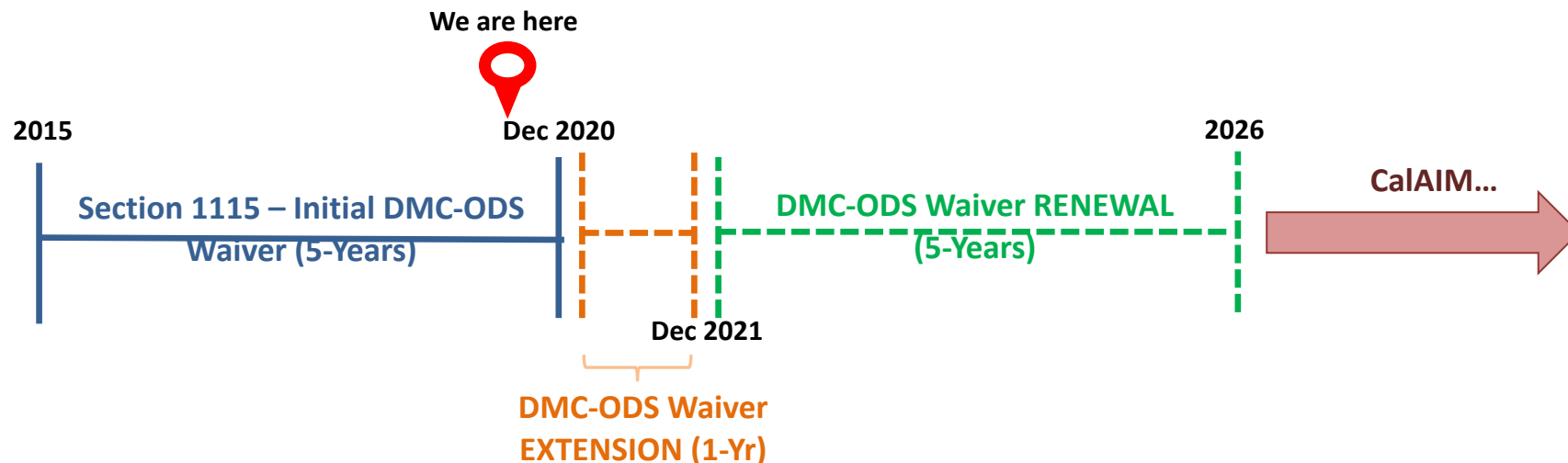
Substance Abuse Prevention and Control

County of Los Angeles Department of Public Health



## 1115 & DMC-ODS Waiver Background

- The Drug Medi-Cal Organized Delivery System (DMC-ODS) waiver was part of the broader 1115 waiver and was approved in 2015. It aimed to improve outcomes by providing more federal funding for the specialty substance use disorder (SUD) treatment system to support the delivery of more services for more people.
  - DMC-ODS fundamentally moved the SUD system into a managed care environment to enhance quality while also containing costs, and changed the way we fund specialty SUD treatment by moving away from fragmented funding streams and making Medi-Cal the primary payer of services.
- As of September 2020, 37 counties across CA have opted into the DMC-ODS waiver, accounting for 96% of the Medi-Cal population.
  - LA County launched DMC-ODS in July 2017



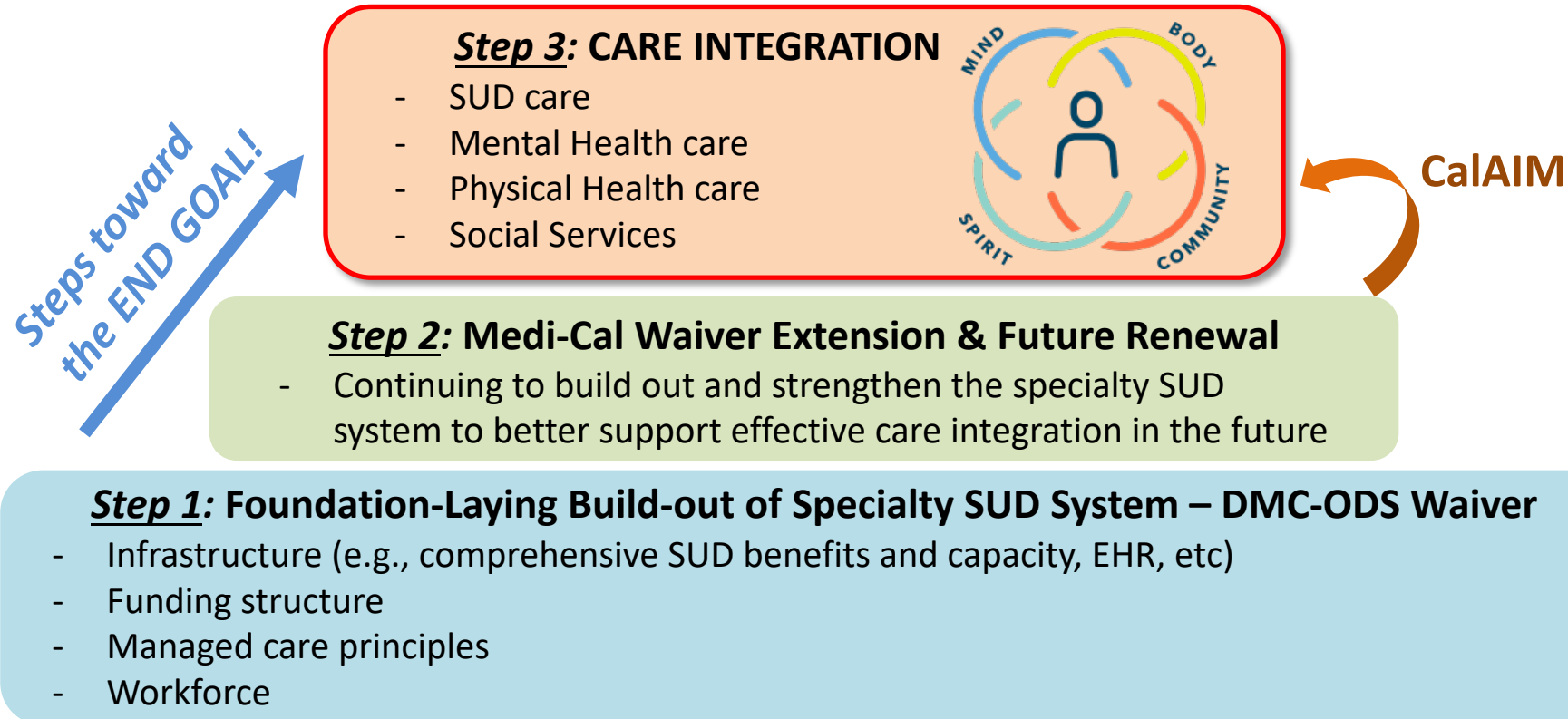
# 1115 Waiver Extension – DMC-ODS

- **Proposed DMC-ODS changes in DHCS' waiver extension:**
  - **RESIDENTIAL**
    - Remove the two-episode limit on Medi-Cal reimbursable residential SUD treatment and set goal for a 30-day statewide average length of stay.
  - **MAT**
    - Require all DMC-ODS providers to either directly offer Medication for Addiction Treatment (MAT) or offer it through referral.
  - **REIMBURSEMENT BEFORE DIAGNOSIS**
    - Clarify that reimbursement is available for SUD assessment and appropriate treatment even before a definitive diagnosis is determined.
  - **RECOVERY SERVICES**
    - Clarify the Recovery Services benefit – allowable services, criminal justice populations, and individuals on MAT.
  - **SUD SERVICES FOR AMERICAN INDIANS AND ALASKA NATIVES**
    - Increase access to SUD treatment for American Indians and Alaska Natives.



## Extension of 1115 Waiver allows for:

- Continual build-up of the specialty SUD system through DMC-ODS, which is otherwise a 5-yr demonstration project that would end after 2020.
- Opportunity to further align the administrative and financial infrastructure within counties and Medi-Cal to facilitate more effective care integration and payment reform.



# SUD Service Innovations

**1. Engagement strategies to meaningfully increase the # of people who need SUD treatment who receive it, despite longstanding national penetration rates of just 10% → Different approaches are more likely to result in different results**

- Harm reduction as an engagement strategy (safe consumption sites, etc.)
- De-coupling criminal justice issues from SUD care (SUD diagnoses should not be a crime)

**2. COVID-19 Lessons**

- We can change the status quo, and do so more quickly than previously imagined
  - Telehealth
  - Streamlined State licensing and certification processes
- Further emphasis of the criticality of care integration and what “whole person care” means (testing, PPE, behavioral health needs, etc.)

**3. Payment Reform – recognition that how we pay for things often drives how we do things**

- How can we rethink the way in which we pay for healthcare to support more flexibility and allow for care integration across systems, while making sure we both know how much efficient and high-quality care costs and are able to pay for it?



ITUP – 2020 Virtual LA Health Collaborative

# Medi-Cal Waivers

Los Angeles Homeless Services Authority

Heidi Marston – Executive Director

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November 19, 2020

Homeless services agencies sit at the intersection of health, mental health, and housing. During this COVID-19 crisis, LAHSA has engaged with new partnerships with managed care plans for new, collaborative and innovative programs that offer great promise to help us improve our client's health and housing stability.





LAHSA has not historically used Medi-Cal waiver programs, mostly due to their limited availability and flexibility.

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### Past

Today we are faced with an aging population of people experiencing homelessness (PEH) who have significant health issues. For many clients who are medically higher risk, LAHSA has relied on partners like DHS to assist. However, during the COVID-19 crisis, LAHSA engaged in new partnerships with managed care plans for new, collaborative innovative programs

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### Present

### Future

LAHSA wants to partner with managed care plans as we have during the pandemic. We would like to further these partnerships to include programs like tenancy support, housing navigation, transition services, and interim housing.

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## CalAim

In Lieu of Services (ILOS), would allow managed care providers the flexibility to engage in new, innovative partnerships that assist people experiencing homelessness.

## Assisted Living

Home and Community Based Services Waivers provides case management, community transition services, and in home care management services by a nurse or social worker for older adults with the goal of providing a higher level of care in the participants community of choice.



LAHSA has already begun to engage in the work to strengthen our partnerships, and we are excited to look towards the future of creating new and long-lasting partnerships.

Through these partnerships we can improve our clients health and housing stability and allow thousands of Angelenos to live long fulfilling lives.

## **Christina Ghaly, MD**

*Director, Los Angeles County Department of Health Services*

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*Executive Director, Los Angeles Homeless Services Authority*

# Q & A

## Waiver Renewals – What's Next



# Community Health During COVID-19

**Yvonne Mariajimenez, JD**

*President and CEO, Neighborhood Legal Services*

**John Connolly, Ph.D., M.S.Ed.**

*Chief Strategist, Department of Public Health, County of Los Angeles*

**Louise McCarthy, MPP**

*President and CEO, Community Clinic Association of Los Angeles County*

**Maria Lemus**

*Executive Director, Visión y Compromiso*

**Yvonne Maria Jimenez, JD**  
President and CEO, Neighborhood Legal Services

# PEOPLE POWER

- ❖ Access to Health Care for All – LA County Story
- ❖ The Expansion of the Affordable Care Act by LA County Residents
- ❖ Collaborative Effort with Decision Makers – LA County DHS
- ❖ Health Care Enrollment Effort – Thousands Get Coverage/Access
- ❖ Building Upon Achievements – Addressing Social Determinants of Health
- ❖ COVID 19
- ❖ What Lies Ahead

# HEALTH CARE FOR ALL LA COUNTY STORY

- My Health LA – Access to the Immigrant Community
- Medi-Cal – Access to Low-Income/DACA/Others
- Covered CA – Affordable Individual and Family Health Plans

# LA COUNTY RESIDENTS EXPAND ACCESS COLLABORATE WITH DHS

- NLSLA Lawyers Train Volunteer Workforce
- Enroll 7,000 Into Health Care Programs/Plans In 18 Months
- Successful Grassroots Effort Leads to Work with Decision-Makers
- Community Identifies Other Needs – Access to Mental Health Care



# COVID-19

- Community Education

- Nurture Trust
- Public Safety
- Stay Home vs. Work
- Access to Testing
- Education on Telehealth
- Policy Advocacy on Access

- Economic Impact

- Loss of Jobs
- Risk of Losing Housing
- Domestic Violence
- Food Insecurity
- EITC for Immigrants



# CHALLENGES AHEAD NEW FEDERAL ADMINISTRATION

## Humanitarian Crisis – Our Response

- Tsunami of Evictions
- Increased Homelessness
- Impact on Children
- New Leadership at the Federal Level
- New Stimulus Package



# Update: COVID-19 in Los Angeles County

John Connolly, Ph.D., M.S.Ed.

Chief Strategist

Los Angeles County Department of Public Health



# COVID-19 in Los Angeles County

- Cases increasing rapidly
  - Daily cases at 750 in September, now reaching 3000 presently
- Hospitalizations are rising
  - In early October 682 people were hospitalized, now over 1000
- Deaths remain low, but a lagging indicator
- If we don't stop acceleration, additional action may be necessary



## Disproportionate Impacts on People of Color

- Latinx and Black residents disproportionately affected
  - Gaps had been closing during the past 2 months, though this progress has stalled recently
- Average daily cases among Latinx residents more than twice that of Black and White residents
- Mortality rate among Latinx residents is twice that of Black residents, and higher than Asian and White residents

## COVID-19 in Skilled Nursing Facilities (SNFs)

- After early spike in cases and deaths in SNFs, numbers remained relatively low and stable during July spike; watching SNF cases closely given overall surge in cases
- SNF staff and residents must be tested every week
- DPH collects information weekly about PPE supply and staffing levels
- Site visits within 24 hours if any reports of infection control issues, with continued technical assistance through daily calls

## School Reopening in Los Angeles County

- Some schools have reopened for specialized instruction and services for students with high needs, waiver program (TK-2) and childcare with a State waiver
- Youth sports for conditioning and skill building
- Up to 50 schools per week may be approved for TK-2 waiver
  - Schools with higher shares of students eligible for free/reduced meals prioritized
- School Technical Assistance Team visits every school within 2 weeks of opening

## Ongoing and Future Steps to Reduce the Spread of COVID-19

- Environmental Health inspectors at businesses, manufacturing, interim housing for people experiencing homelessness, and public places to ensure compliance with reopening protocols
- COVID-19 Safety Compliance Program offers free training for businesses
- Vaccine distribution planning for those in phase 3 trials in the U.S.
- Awaiting guidance from the CDC about vaccine prioritization for those at highest risk
  - Health care workers and older residents



## LA's Community Clinics & Health Centers

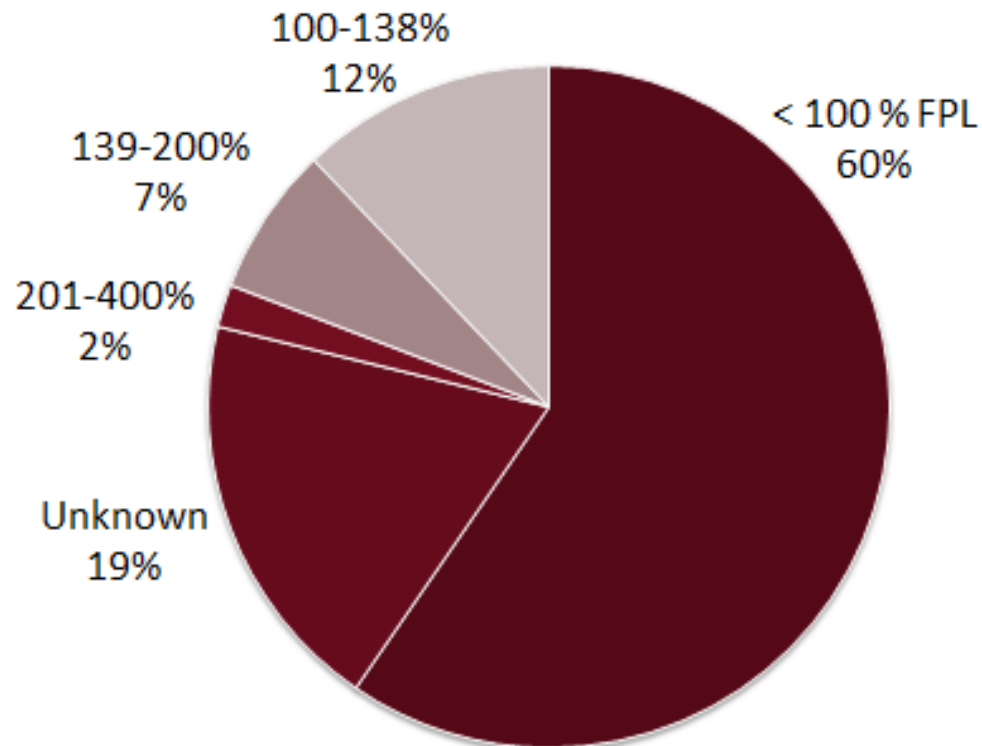
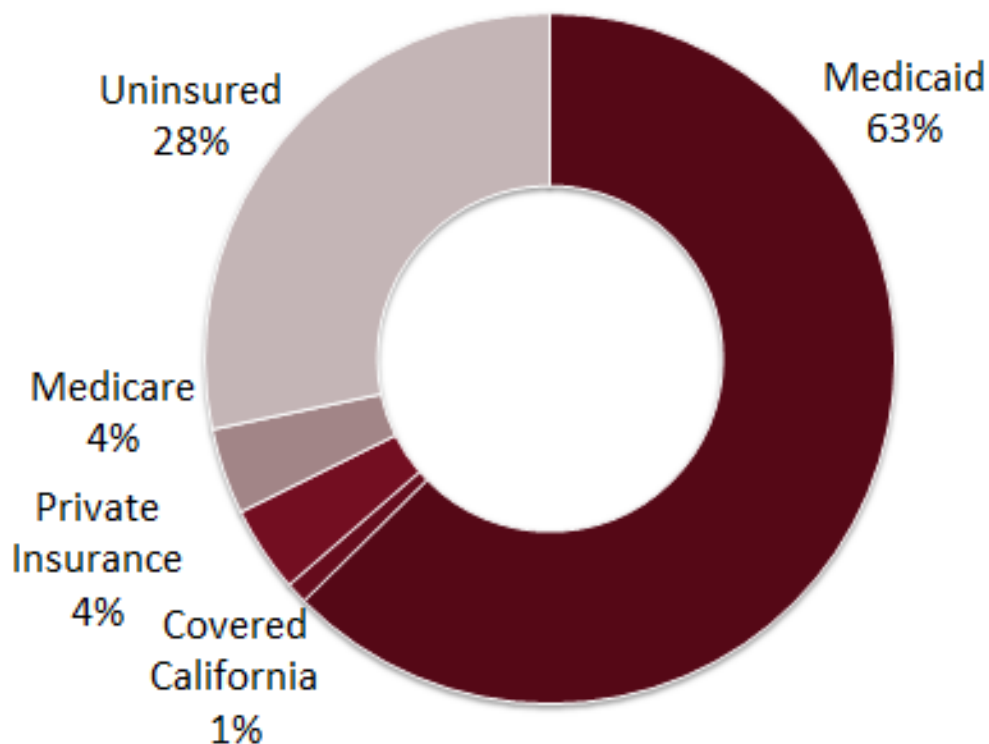
Community Health in the Era of COVID



Louise McCarthy, MPP  
President and CEO , Community Clinic Association of Los Angeles County

## LA's Community Clinics & Health Centers

64 Organizations • 350+ Sites • 1.7 million patients



### 1.7 million patients:

- 95% are publicly insured or uninsured
- 79% are low income
- 70,000 are homeless



## Health Centers Pre-COVID

### ACA “Boom”

- Growth in patients, visits, sites, services, staff
- Dramatic shift in MediCal from uninsured, stronger managed care relationships
- Improved financial stability and acumen
- Enhanced QI infrastructure, performance
- Focus on team-based care, systems integration, technology

### Post ACA / Pre-COVID

- Growth slows, payer mix stabilizes
- CA still outperforms national peers on QI measures
- Transformation continues
- Expenses start to outpace revenues



## Health Centers in the Era of COVID

Drop in in-person care, billable services

- Site closures, staff furloughs
- Health centers now back to 85% of pre-COVID visit levels

Challenges with lab capacity to process tests

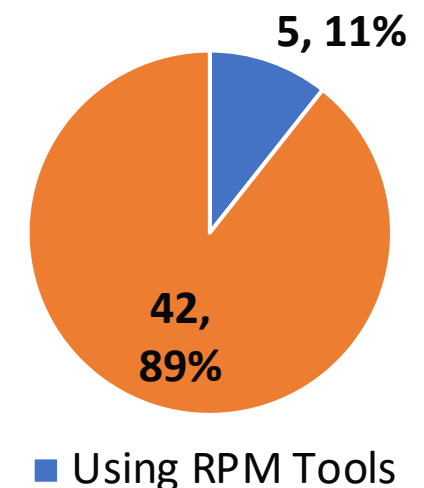
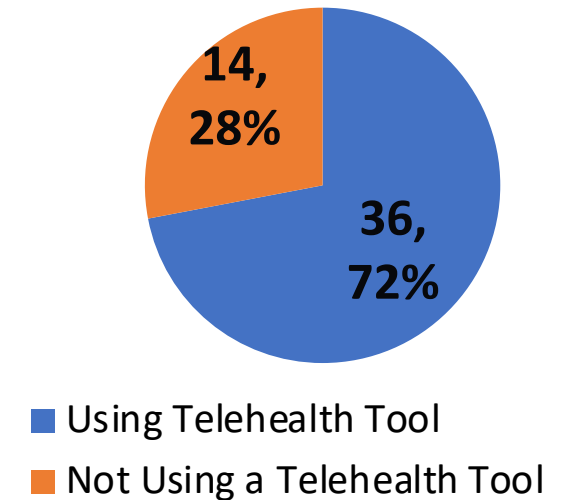
- Capacity improved via more labs, more test modalities.

Rapid adoption of telehealth/telephonic care

- 49% of health center visits are virtual
- Use cases: Behavioral Health, PEH, no show rates, RPM...
- Patient barriers remain & systems still not optimized

New & stronger partnerships to mitigate SDOH

Revised workflows to reflect new reality





## Health Centers in the Era of COVID

### What's Needed for Now

- Federal relief to states
- Expand testing for patients and staff.
- Increase PPE to facilitate testing and care.
- Extend telehealth reimbursement past emergency period
- Mitigate staff burnout and prioritize retention

### What's Needed for What's Next

- Agile Infrastructure: telehealth, testing systems, PPE, workforce, physical plant optimization
- Responsive Programs: coverage, services and supports
- Integrated Systems: networks of care, information exchange, modernized payment systems

*All of this requires investment.*

## LA's Community Clinics & Health Centers



# Visión y Compromiso™



## Promotoras Responding to COVID-19 in their Community

Maria Lemus, Executive Director  
[maria@visionycompromiso.org](mailto:maria@visionycompromiso.org)  
(510) 303-3444

# Visión y Compromiso: Who Are We?

Centered in health equity, social justice and heartfelt community service.

Represent a workforce of 5,000 promotoras, community health workers, peer educators, system navigators and other community leaders.

Network of Promotoras and Community Health Workers is anchored in 13 regions in urban, rural and suburban regions throughout California.

We have a deep understanding of the community transformation model and decades of experience developing training, professional development, capacity building, and support for this workforce.



# Who are Promotoras?

“Go to” leaders in their communities, promotores are grassroots community leaders with decades of experience engaging “hard to reach” residents; they are the people that others trust and naturally “go to” for support and information.

Essential workers, grounded in local communities, challenge myths and misinformation, share community resources, reduce barriers to care.

Strengthen social support networks, promote positive lifestyle change, address the social determinants of health, and improve health outcomes.

# IMPACT OF COVID-19



Latinos are getting sick and dying from COVID-19 at among the highest rates in the country.


They are overrepresented in high risk and low-wage jobs, work in warehouses, food processing plants, agriculture, health care, and workplaces with crowded conditions.

Many have few employment protections, no health care, no benefits, and limited access to an inadequate social safety net and live in heavily rent-burdened communities at increased risk of evictions and homelessness.

Immigrant and undocumented workers ineligible for unemployment and CARES Act.

Many fear being tested, fear losing their jobs if they become sick.

Latinos are 22.7% of students enrolled in CA schools, many do not have a tech device or steady internet connection at home.



# VISION Y COMPROMISO'S RESPONSE



Empowering promotoras with accurate information and resources (webinars, training).

Distribute over \$2M in emergency relief to immigrant and undocumented individuals.

Develop cultural humility training and deliver to 7,000 contact tracers in CA.

Train and deploy promotores in rural, socially vulnerable and highly impacted communities to share information, distribute PPE, increase access to testing, provide navigational support to local resources, and slow the spread of COVID-19.

Disseminate public health messaging in culturally specific ways to reduce or mitigate risk of exposure to COVID-19 and adverse outcomes.

Train promotores to respond to community needs such as facilitate peer-led social support groups online.



## ENGAGE PROMOTORES TO IMPROVE OUTCOMES



Promotoras and our community-based agencies are ready to be deployed- ready to join as a community partner! Look to the community experts. Aqui estamos.

Adelante!





# Q&A

## Community Health During COVID-19

**Yvonne Mariajimenez, JD**

*President and CEO, Neighborhood Legal Services*

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# Thank You!

Contact us at: [info@ITUP.org](mailto:info@ITUP.org)