

HASD&IC 2017 Regional Policy Priorities

HASD&IC's 2017 Regional Policy Priorities are driven by a shared vision with CHA and the Regional Associations of an optimally healthy society and goal that all Californians have equitable, safe, high quality, medically necessary, patient-centered health care.

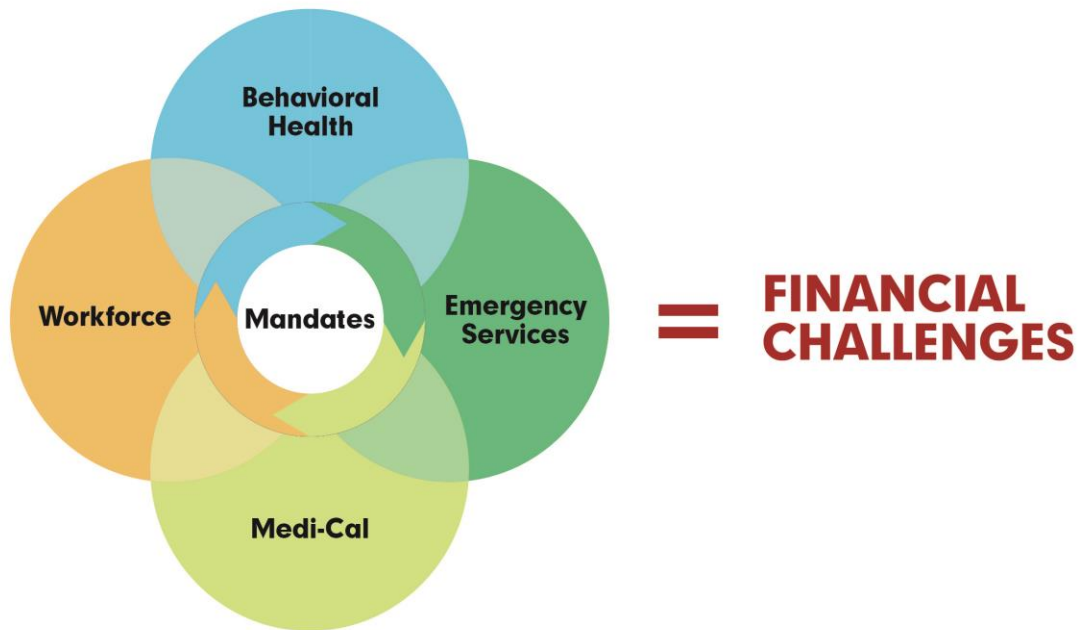
The primary focus of the Hospital Association of San Diego & Imperial Counties (HASD&IC) is to provide advocacy on behalf of our members at city, county, and regional level, and support CHA at the state and federal level. In partnership with CHA, HASD&IC works with state and federal elected officials in their districts. HASD&IC serves as a unified voice to represent and promote the value of community hospitals to elected officials, health care stakeholders, and to the communities they serve through effective advocacy, cross-sector convening, and education.

Of the six top public policy priorities identified this year, Behavioral Health, Emergency Services, Medi-Cal, and Workforce are at the core of our focus for 2017.

Addressing these policy priorities will alleviate the financial pressures faced by members, increase access to care, remove barriers to effective population health management, and lead us closer to the Association's vision of an optimally healthy society.

During 2017, HASD&IC will continue to:

- Work with state and federal elected officials in their districts, in coordination with CHA.
- Serve as a unified voice representing and advocating for members at the local and regional levels.
- Represent and promote the value of community hospitals to elected officials, health care stakeholders, and to the communities they serve through effective public advocacy outreach.
- Support local chambers and other community partners where beneficial political alignment exists.
- Engage members and educate key stakeholders, opinion leaders, legislators, and their district staff on hospital issues and efforts in support of CHA's advocacy goals.
- Support the California Hospital Association Political Action Committee (CHPAC) to ensure a strong voice for hospitals and health systems when decisions are made that affect hospitals' ability to fulfill their missions.



FINANCIAL CHALLENGES

In order for hospitals to provide effective patient care and make a positive economic impact within the communities they serve, financial stability is a necessity. Public policy priorities, including changes to healthcare and growing health needs of our communities, have the potential to impact a hospital's financial viability. It is the "lens" through which everything is viewed.

Issues of significant concern to the members:

- Reimbursement rates, including a growing Medi-Cal population and a decreasing commercial insurance market, as well as increased demand for behavioral healthcare services.
- Changing payment and healthcare delivery models.

To support member concerns, HASD&IC will:

- Educate elected officials, legislative and regulatory staff, community leaders, and community groups about the financial challenges faced by hospitals and the impact on patient care in support of CHA on state and federal issues.
- Advocate locally for policies that support hospitals and health systems.
- Advocate for continued hospital control and decision-making about the use of hospital community benefit contributions and in support of CHA's statewide efforts.
- Support effective outreach and enrollment services to reinforce work performed by hospitals, including the Hospital Outstation Services Program (HOS), as well as county agencies and community-based organizations.

BEHAVIORAL HEALTH

Hospital emergency departments (EDs) have become the epicenter for access to many patients with significant behavioral health needs. This is due in part to a lack of adequate public and private sector resources available to serve our community. There have been significant gaps due to the patient's payer source, as well as unavailable services necessary to meet the needs of patients in our community.

Issues of significant concern to the members:

- Insufficient system of services to meet the needs of patients, thus creating challenges to transfer patients to the appropriate services.
- Increased need and utilization of behavioral health in the community.
- Increasing impact of behavioral health on ED volume and throughput.
- Lack of adequate reimbursement for facilities and providers.

To support member concerns, HASD&IC will:

- Collaborate with the stakeholders in San Diego County, including the Health and Human Services Agency, Public Safety, Law Enforcement, clinics, physicians, and other key groups to identify and implement solutions to improve the behavioral health continuum of care in San Diego County.
- Include behavioral health needs and services as part of population health and Community Health Needs Assessment (CHNA) activities.
- Advocate for additional alternative treatment, placement, and care delivery options for patients; e.g. sobering centers, mobile crisis units, crisis residential centers, and the use of tele-health for care management of 5150 holds and releases and for court-ordered hearings.
- Develop and implement local solutions to increase access to behavioral health services and share those experiences as part of the development of statewide policy.

MANDATES

Governmental mandates at the local, state and federal levels continue to be of concern to members. In the past year, we have seen a significant increase in regulatory changes at the federal level from CMS which impact our hospitals.

Issues of significant concern to the members:

- Insufficient time/inadequate resources to move towards new mandates and regulatory changes (i.e. HOPD changes)
- Lack of adequate financial resources to support new mandates. (i.e. Seismic)

To support member concerns, HASD&IC will:

- Educate local, state, and federal elected officials, and staff about the impact of local, state, and federal regulations on hospitals.
- Proactively address local/county legislative and regulatory activities as they affect hospitals (e.g. land use, water, emergency service fees, etc.) and advocate for positions beneficial for hospitals.
- Actively oppose new mandates at the local level that are inconsistent with the association mission and vision.

WORKFORCE

Strengthen our Health Care Infrastructure with a Workforce to Meet Regional Needs.

California Hospitals are concerned about the need for an adequate supply of highly skilled health professionals to meet the demands for health care services now and in the future. Studies validate the need to address critical health professional shortages in nursing and the allied health occupations.

Issues of significant concern to members include:

- Lack of primary care providers.
- Significant shortages and an aging workforce in the allied health professions.
- Inability to use advance care practitioners to the full capability of their license.

To support member concerns, HASD&IC will:

- Continue to heighten awareness of workforce shortages in the region, especially to meet health care reform requirements.
- Work with local and statewide collaboratives and educational institutions to develop and implement strategies to address workforce needs and supportive curriculum.

EMERGENCY SERVICES

Many of the barriers to effective emergency care systems are also barriers to effective population health management and the Associations' vision of an optimally healthy society. Prehospital care and services, emergency department crowding, alternate destinations, and treatment sites as well as post-acute transfer options impact the effectiveness of emergency departments and the ability of residents to receive the right care, at the right time, and in the right place.

Issues of significant concern to the members:

- Significant volume increases in the region's emergency departments.
- Inadequate reimbursement and access to care challenges.

To support member concerns, HASD&IC will:

- Advocate for expanded primary and specialty care resources.
- Promote technology-based solutions including telemedicine, health monitoring, and health information exchange (HIE) development.
- Advocate for positive EMS policies in areas such as ambulance patient off-load delay (APOD), specialized ED designations, first responder expectations, and disaster preparedness.
- Advocate for increased alternate destination and treatment options to decrease avoidable ED visits and increase ED discharge/referral options.
- Advocate for an increase in community resources for pre- and post-acute care services including social support services to decrease avoidable ED visits, behavioral health ED visits, and social admissions.
- Advocate for collaborative work and appropriate funds to address health disparities through local efforts including community benefit programs.

MEDI-CAL

With the implementation of the Affordable Care Act (ACA), Medi-Cal enrollment has increased dramatically. Nearly all Medi-Cal beneficiaries are now enrolled in a Medi-Cal Managed Care plan. In late 2013, Imperial County started its own unique managed care model – the Imperial model, with two managed care plans providing coverage for Medi-Cal beneficiaries. In 2017, San Diego County will add two more Medi-Cal Managed Care plans (moving from 5 plans to 7 plans).

Issues of significant concern to the members:

- Network adequacy & the lack of providers who accept Medi-Cal is of tremendous concern, specifically there is a lack of:
 - Primary care providers
 - Behavioral health care providers
 - Specialty care providers
 - Post-acute care (short and long term) providers
- Low reimbursement rates for all Medi-Cal providers.

To support member concerns, HASD&IC will:

- Collaborate with health providers to advocate for improved network adequacy.
- Support policies to increase Medi-Cal reimbursement.
- Advocate for improvements to county Medi-Cal eligibility and enrollment systems, including the Medi-Cal plan selection process.