



HEALTH CARE THAT WORKS FOR ALL CALIFORNIANS

HOW WE DO OUR WORK

The California Health Care Foundation is dedicated to advancing meaningful, measurable improvements in the way the health care delivery system provides care to the people of California, particularly those with low incomes and those whose needs are not well served by the status quo. We work to ensure that people have access to the care they need, when they need it, at a price they can afford.

At the California Health Care Foundation, we know that health care is a basic necessity. We work hard to improve California's health care system so it works for all Californians.

Because low-income Californians experience the biggest health burden and face the greatest barriers to care, our priority is to make sure they can get the care they need.

We are especially focused on strengthening Medi-Cal — the cornerstone of California's safety net — and are also committed to finding better ways to meet the health care needs of the millions of people who remain uninsured in our state.

We organize our work around three main goals:

Improving Access to Coverage and Care for Low-Income Californians

We advance statewide policies and practices that ensure all low-income Californians can get the care they need, when they need it. We support efforts to expand access to affordable coverage and strengthen the Medi-Cal program. We are also helping to foster delivery system transformation and workforce solutions that increase the capacity of safety-net organizations to provide timely, high-quality, and patient-centered care.

Promoting High-Value Care

We improve the health of low-income Californians by reducing their chances of receiving unwanted, ineffective, and unnecessary care. We focus on issues based on their broad population impact or high cost to the system as a whole. Currently, we are working to improve the quality and cost of care for people with complex needs, including mental illness and substance use disorder, maternity care, and care for people with serious illnesses or are at the end of life.

Laying the Foundation

We invest in people, knowledge, and networks that help to make meaningful change possible in California's health care system.

Delivering Market Analysis and Insight: We provide research and analysis that enables decisionmakers to have a market-wide view of California's complex health care ecosystem.

Sponsoring High-Quality Health Journalism: We support health journalism so that Californians have access to timely, relevant information about the most pressing health care issues:

- California Healthline is a free, daily publication featuring health care news, opinion, and original reporting for health care professionals, decisionmakers, media organizations, and consumers. It is independently published by Kaiser Health News for CHCF.
www.californiahealthline.org
- USC Annenberg Center for Health Journalism Data provide California health care journalists with the skills and tools to leverage and communicate important health data, and to help build capacity in newsrooms across the state in understanding, tracking, and creating visualizations of data related to health and health care.
www.centerforhealthjournalism.org

Building Leadership: We help to develop the leadership and skills of California's health care professionals, state policy partners, and safety-net organizations to meet the challenges of today and tomorrow:

- California Improvement Network (CIN) is a community of health care professionals committed to identifying and spreading better ideas for care delivery to improve the patient and provider experience and the health of populations while lowering the cost of care.
www.chcf.org/resource-center/california-improvement-network
- CHCF Health Care Leadership Program is a two-year fellowship that offers clinically trained health care professionals the experience and skills necessary for effective vision and leadership in the health care system.
<https://healthforce.ucsf.edu/leadership-training/programs/chcf-health-care-leadership-program>

Bridging the Innovation Gap: We support information, networks, and communications platforms that enable safety-net organizations and entrepreneurs to work together to improve the delivery system:

- As the nation's largest health insurer, Medicaid offers investors and entrepreneurs an especially promising opportunity to deliver value and improve health care at scale. Facing pressure to improve access, efficiency, and quality, the Medicaid market is primed for innovation.
www.chcf.org/innovation-opportunity

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CHCF

IMPROVING ACCESS TO COVERAGE AND CARE FOR LOW-INCOME CALIFORNIANS

WHY THIS WORK MATTERS

The California Health Care Foundation (CHCF) works to ensure that all low-income Californians have access to high-quality health care when and where they need it, at a price they can afford.

OUR GOAL

To achieve this goal, our work to improve access focuses on two key areas:

Coverage: Ensuring low-income Californians have access to affordable health insurance coverage they can use.

Care: Expanding the capacity of safety-net organizations to provide timely, high-quality, and convenient care.

We shine a light on gaps in health care coverage, identify barriers to care, and foster transformations across health care delivery, financing, and policy.

OUR APPROACH

We conduct rigorous research to understand what's working — and what's not — for low-income Californians in the current system. We collect and analyze data on various measures, including enrollment in health insurance programs, the cost of coverage, access to care for Medi-Cal enrollees, and more. This research allows us to identify patterns and trends in access and lift up problems to policymakers, government officials, advocates, and health care leaders.

We provide meaningful recommendations for change. Identifying problems is the first step, identifying solutions is the next. We study best practices from across the country, commission outside experts, and foster dialogue among diverse stakeholders to provide meaningful recommendations on how to address some of the biggest access challenges facing the state.

We help implement solutions. We help our partners turn recommendations into reality. We provide technical assistance to help state agencies implement new reforms and to safety-net clinics to evolve and adapt their business and clinical practices to better serve low-income Californians. We also identify and invest in promising new innovations in the safety net, with an eye to rapid scale-up and spread.

We evaluate and share what we learn. With any implementation, we strive to understand what worked, what didn't, and why. We share evaluation findings and lessons learned broadly, so the entire field can benefit.

PROJECT HIGHLIGHTS

Responding to a Changing Federal Landscape

Although efforts to repeal the Affordable Care Act (ACA) failed in 2017, the future of the ACA and Medicaid (Medi-Cal in California) remains unclear under the Trump administration. CHCF is tracking federal health policy, analyzing potential impacts on California, and helping to assess state policy options in response to federal policy changes.

Supporting California on the Path to Universal Coverage

While 93% of Californians have insurance under the ACA, approximately three million remain uninsured. California is considering a variety of state-based policy approaches to achieve universal coverage. CHCF informs these discussions with timely information on current coverage programs, explainers and analyses of policy options to expand coverage, targeted research to better understand the remaining barriers to coverage, and support for stakeholders to build support for solutions.

www.chcf.org/expanding-coverage

Building the Health Care Workforce of Tomorrow

In collaboration with philanthropic partners, CHCF supports the California Future Health Workforce Commission. Comprised of recognized senior leaders from health, education, employment, labor, and government, the commission will release in fall 2018 a strategic plan for building the health care workforce for California's future.

www.futurehealthworkforce.org

Moving Medi-Cal Forward

CHCF commissioned national experts to develop an actionable vision and path for delivery system transformation in Medi-Cal, with input from a wide array of California leaders. CHCF is working with state and county officials, health plans, providers, and consumer groups to implement many elements of this vision. Research studies will continue to monitor quality, access, and patient and provider experience in Medi-Cal.

www.chcf.org/MediCal4ward

Making Care More Available Through Telehealth

Many Medi-Cal enrollees struggle to get timely access to care, especially in rural areas. CHCF is working closely with Medi-Cal managed care plans and community health centers across California to increase the use of telehealth so more Californians can get the care they need, when and where they need it.

www.chcf.org/topic/telehealth

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ENSURING HIGH-VALUE CARE

WHY THIS WORK MATTERS

The California Health Care Foundation (CHCF) promotes high-value care — health care services that are effective, affordable, and align with patient values. This is an approach that is new for many working in health care today. We put research into practice to increase the use of high-value services and to close the gap between evidence-based information about what patients should receive and the care they typically get.

OUR GOAL

To achieve these aims, CHCF focuses on key areas that help Californians receive care they want, at better value, including:

Maternity Care: Working to reduce the state's high cesarean rate and improve maternal mental health care

People with Complex Needs: Supporting and evaluating statewide pilots aimed at better integrating physical care with behavioral health treatment, especially for people with serious mental illness and/or substance use disorder, including opioid addiction

Serious Illness and End-of-Life Care: Increasing access to palliative care services for underserved populations

OUR APPROACH

We bring decisionmakers together. To achieve high-value care, many sectors of the health care system must be aligned. CHCF convenes providers, payers, health insurers, clinics, and state government to cultivate meaningful discussion about needed change in policies and care models, leading to actionable recommendations for system change.

We conduct research. Where we see knowledge gaps, we conduct rigorous analyses to identify problems and determine what changes are needed to address the issues. We assess best practices from across California and around the country to advance the transformation of the way care is delivered.

We support our partners. From state agencies to local coalitions, we support our partners as they work to implement new practices by providing training and technical assistance. Our goal is to accelerate the impact of their critical work.

PROJECT HIGHLIGHTS

Toolkit to Support Vaginal Births and Reduce Primary Cesareans

This comprehensive, evidence-based guide is designed to educate and motivate maternity clinicians to apply best practices for supporting vaginal birth. CHCF funded the creation of this toolkit as part of our work to address the high cesarean rate in California.

Why Health Plans Should Go to the “MAT” in the Fight Against Opioid Addiction

Health insurance plans have emerged as a key partner in the fight against the opioid epidemic. This paper outlines concrete strategies that plans can implement to ensure that their members have access to medication-assisted treatment (MAT) when and where they need it.

Poll Reveals Californians’ Views on Insurance for Behavioral Health Treatment

A statewide poll by the Berkeley Institute for Governmental Studies showed that most Californians believe insurance coverage for treatment of mental health and substance use disorder conditions to be “very important.” This poll, supported by CHCF, also showed that people believe that treatment could help people with these conditions live healthy and productive lives.

Reflections on a Decade of Work in End-of-Life Care

Explore 10 years of CHCF’s work in end-of-life care in this interactive timeline.

California’s Public Substance Use Disorder Treatment System for Youth

California is redesigning its substance use disorder treatment system under Medi-Cal, but access to effective, age-appropriate services for youth continues to be a challenge. This report summarizes effective treatment approaches specific to this population and offers considerations for the development of a comprehensive system of care for youth.

CHCF Partners with Yelp to Add Maternity Care Measures to Popular Search and Review Site

It can be hard for California consumers to find comparative information that helps them decide where to get the best care. The website and mobile app Yelp, in partnership with CHCF, now displays maternity care measures for the roughly 250 hospitals that deliver babies in California.

Local Coalitions Help Drive Progress in California’s Opioid Epidemic

The leader of CHCF’s opioid work shares the contributions of local opioid safety coalitions to increase access to medication-assisted treatment and promote safer prescribing. CHCF supports many coalitions with a program of training and technical support designed to accelerate their impact.

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WHY THIS WORK MATTERS

Smart Care California (SCC) is a public-private partnership working to promote safe, affordable health care in California through the leverage of large health care purchasers. SCC is cochaired by the Department of Health Care Services (DHCS), Covered California, and the California Public Employees' Retirement System (CalPERS). Collectively, these groups purchase or manage care for more than 16 million Californians — or 40% of the state. The Integrated Healthcare Association (IHA) has convened and coordinated the partnership with funding from CHCF since 2015.

OUR APPROACH

SCC currently promotes improvement in opioid safety, c-section reduction, and low back pain care. Smart Care California works on three levels:

Leveraging the SCC brand to promote change across the state. SCC has developed a menu of payment and contracting options for lowering the rate of unnecessary c-sections, along with a public honor roll listing California hospitals meeting a statewide target; published a series of payer- and provider-facing materials for addressing the opioid epidemic in the state; sponsored two opioid safety convenings, one for plans and one for providers; and is working to develop two change packages (one for providers, one for plans), along with a resource catalog.

Inspiring each purchaser to push change through its contracted plans. Each purchaser is exploring contract requirements, changes in their formularies and benefit structures, and plan communications to advance SCC goals. The most comprehensive and public of these changes is Covered California's "Attachment 7 contracting requirements."

Motivating participants at quarterly meetings to push forward SCC priorities within their individual organizations. Attendance in quarterly meetings has motivated action from participating plans and provider organizations to improve outcomes in SCC priority areas. Examples include Health Net implementing the SCC opioid safety checklist, and Kaiser Permanente Southern California using SCC principles to roll out new systemwide guidelines on opioid safety.

A complete list of participating plans, providers, and consumer groups is available on the SCC website.

SCC will continue to build on these successes and promote improvement in opioid safety, unnecessary c-section reduction, and low back pain during the remainder of 2018 and 2019.

Learn more at www.iha.org/smartcare.



WHY THIS WORK MATTERS

The opioid overdose epidemic — fueled by the overprescribing of prescription medications and the increasing use of heroin and fentanyl — affects communities across the country. Nationwide, deaths involving opioids quadrupled between 1999 and 2015. Unlike the rest of the US, California's overdose death rates have held steady for the last three years, but fentanyl presents an urgent threat: California fentanyl overdose deaths increased 57% between 2016 and 2017. Other states and countries have proven that death rates can drop with coordinated, strategic effort. France reduced overdose deaths by 80% by making addiction treatment widely available on demand for those in need.

OUR GOAL

CHCF aims for zero overdose deaths in California, as every overdose death is preventable. As a first step, we are working to bring down opioid overdose deaths by at least 20% by 2020.

OUR APPROACH

To achieve this goal, we partner with state and local policymakers, health plans, providers, pharmacists, and clinicians on the following strategies:

- **PREVENT:** Reduce opioid use in treatment of acute and chronic pain — using lower doses and shorter durations for fewer diagnoses. Avoid starting people down the path of long-term opioid use.
- **MANAGE:** Identify chronic pain patients on high-risk regimens and work with them individually on safe treatment options. Make sure opioid-dependent patients are not abandoned by their providers.
- **TREAT:** Streamline access and make medication-assisted treatment (MAT) — which combines medications with counseling and is considered the gold standard for opioid addiction treatment — available on demand.
- **STOP overdose deaths:** Ensure the overdose antidote naloxone is widely available, and spread other proven harm-reduction strategies, such as needle exchange programs.
- **INFORM:** Lower stigma and change norms through public education, events, and communications.

CHCF focuses on increasing the knowledge and capacity of all stakeholders through training, technical assistance, research, and targeted communications. We engage and support local community leaders to take action, and we partner with state and federal leadership and broad-based task forces to address opioid overuse through collective impact.

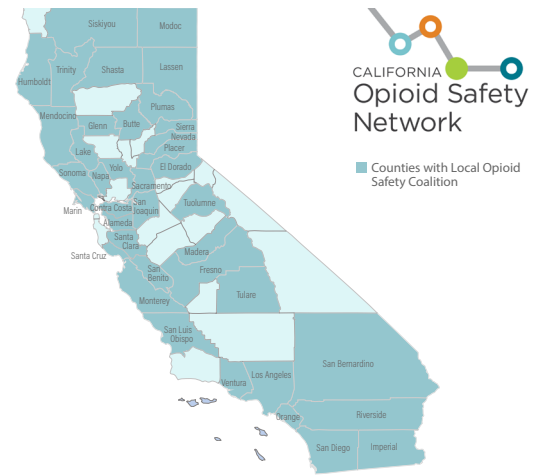
PROJECT HIGHLIGHTS: Partnerships with State and Local Governments to Advance Opioid Safety

California Department of Public Health

CHCF is an active member of the Statewide Opioid Safety Workgroup. The California Department of Public Health (CDPH) convened the workgroup in 2014 as a collaborative of more than two dozen state agencies and other organizations working to address the opioid epidemic in California.

A key component to understanding the opioid crisis in the state is collecting and disseminating sound data. CHCF helped to create the California Opioid Overdose Dashboard, a data tool with enhanced visualization capability that integrates local and statewide opioid data.

In 2015, CHCF collaborated with CDPH to launch the California Opioid Safety Network, which joins together 24 local opioid safety coalitions across 40 California counties. These local coalitions bring together health care and community leaders from many backgrounds to reduce overdose deaths. CHCF supports a program of training and technical assistance to advance the work of coalitions and spread best practices.



Department of Health Care Services

California was the first state in the nation to receive a Medicaid waiver to expand access and improve quality in its substance use disorder (SUD) treatment system. This effort is called the Drug Medi-Cal Organized Delivery System. CHCF provides technical assistance to the Department of Health Care Services (DHCS) to support effective implementation of these county-based pilot programs, which provide services to Medi-Cal beneficiaries with any alcohol or substance use disorders.

CHCF piloted two programs that expand access to medication-assisted treatment in hospitals — ED Bridge in emergency departments and Project SHOUT in inpatient settings — both of which are now supported by federal grants administered by DHCS and will be spread across the state. DHCS and CHCF are also collaborating to spread access to MAT in residential treatment centers through the development of a toolkit and training program, and in correctional settings through a learning collaborative.

Department of Justice

CHCF has funded technical assistance to the Department of Justice to improve the usability of CURES, California's prescription drug monitoring program, and to implement Assembly Bill 40, which allows CURES to interoperate with electronic health records.

Smart Care California

CHCF supports Smart Care California, a collaboration of public purchasers (Medi-Cal, Covered California, and the California Public Employees' Retirement System) that develops broad opioid safety initiatives and is creating toolkits for plans and providers.

For more information, contact Dr. Kelly Pfeifer at kpfeifer@chcf.org and visit www.chcf.org/opioid

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IMPROVING TREATMENT OF MATERNAL MENTAL HEALTH

WHY THIS WORK MATTERS

One in five California women suffers from depression, anxiety, or both while pregnant or after giving birth, negatively impacting the mother and the child. Despite this high prevalence of mental health issues, few women receive treatment. CHCF is working with partners to better understand this issue and to explore innovative, practical solutions for delivering mental health care to California's mothers and expectant mothers in need.

Perinatal mood and anxiety disorders are the most common medical complication affecting women during pregnancy and after childbirth. They include prenatal and postpartum depression and/or anxiety, and, in extreme cases, postpartum psychosis. According to the Maternal and Infant Health Assessment (MIHA) conducted by the California Department of Public Health (CDPH), 21% of pregnant and postpartum women in California are affected. The prevalence is estimated to be even higher in some populations. For example, one in four African American and Latina mothers in the state reports depressive symptoms, and so do as many as half of all mothers living in poverty.

Left undetected and untreated, these conditions can lead to negative health outcomes for the mother, and can negatively affect the mother-child bond and the child's long-term physical, emotional, and developmental health. Additionally, the financial cost of untreated maternal mental health conditions can be significant (for example, more use of emergency care services, higher rates of absenteeism at work).

OUR APPROACH

Fortunately, these conditions are treatable, and early detection can make a significant, positive impact. CHCF is currently funding projects to better understand maternal mental health care in California and to explore ways that it can be improved. A summary of the projects that are part of CHCF's maternal mental health portfolio is provided on the following page.

PROJECT HIGHLIGHTS

Background and Landscape

- A CHCF Health Care Almanac report describes the status of maternity care in the state.
www.chcf.org/publication/maternity-care-in-california-delivering-the-data
- CHCF and The California Endowment supported a statewide task force on maternal mental health in California, which produced a report with recommendations.
www.2020mom.org/ca-task-force
- Cofunded with Yellow Chair Foundation and fielded in English and Spanish, the Listening to Mothers in California survey is an effort to collect the opinions and experiences from mothers about maternity care.
<http://www.nationalpartnership.org/issues/health/maternity/listening-to-mothers-in-california.html>
- CHCF is partnering with University of Southern California's Hollywood, Health & Society program to incorporate more accurate depictions of maternity care into TV programming.
www.hollywoodhealthandsociety.org

Delivery System Improvement

- The Institute for Medicaid Innovation is identifying and summarizing promising approaches to address maternal depression and anxiety during pregnancy and one year post-birth with a focus on the Medicaid population.
www.medicaidinnovation.org
- The National Committee for Quality Assurance is developing clinical quality measures for perinatal depression to be proposed for inclusion in the national Healthcare Effectiveness Data and Information Set.
blog.ncqa.org/depression-measure-mothers
- Maternal Mental Health Now tested collaborative maternal mental health care in three Los Angeles community clinics.
www.maternalmentalhealthnow.org
- With the Los Angeles County Health Agency and the University of Southern California, a pilot program is testing the use of secure email in electronic consultations between reproductive psychiatrists and general psychiatrists to improve management of pregnant and postpartum women with severe, persistent mental illness.
www.centerforhealthjournalism.org/2018/02/05/qa-dr-emily-dossett-disturbing-lack-mental-health-care-moms-safety-net
- Researchers from the University of Washington and the Advancing Integrated Mental Health Solutions Center are assessing the impact and cost effectiveness of longitudinal remote consultation when used provider to provider. The National Institute of Mental Health is the main funder; CHCF is supporting California sites.
www.aims.uw.edu
- Read about CHCF's efforts to improve maternal care in California.
www.chcf.org/topic/maternal-health/

For more information, contact Stephanie Teleki, MPH, PhD at steleki@chcf.org and visit www.chcf.org/maternity

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WHY THIS WORK MATTERS

Across California, health care costs and quality vary widely — a potentially troubling indicator of substandard outcomes and wasted resources. Where a patient lives in the state should not impact the care they receive. Benchmarking and tracking performance on key quality and cost measures is critical to reducing unwarranted variation and achieving high-quality, affordable, patient-centered care for every Californian.

The California Regional Health Care Cost & Quality Atlas is an online tool that tracks performance on 13 clinical quality measures. Data are gathered for certain health conditions like cancer, diabetes, and asthma; 11 measures of hospital utilization like emergency department visits; and cost-of-care measures across 19 California geographic regions.

OUR APPROACH

Developed by the nonprofit Integrated Healthcare Association (IHA), in partnership with the California Health Care Foundation (CHCF) and California Health and Human Services Agency, the atlas includes information about care provided in 2015 to nearly three-fourths of the state's total population, or 30 million people.

Spanning commercial insurance, Medicare, and Medi-Cal, the atlas brings together data on clinical quality, hospital use, and total cost of care in a meaningful way to assess performance variation in geography and insurance product type.

Along with giving purchasers, providers, payers, policymakers, and the public a clearer picture of overall health and costs across the state, the atlas identifies “hot spots” for performance improvement and establishes a benchmark to track changes over time.

With continued CHCF support, IHA in 2018 will update the atlas with 2017 data, highlighting changes from 2013 and 2015. Tracking regional performance on key quality and cost measures through the atlas marks an important step toward reducing unwarranted cost and quality variation and advancing high-value care for all Californians.

Learn more at <http://costatlas.iha.org>