



Improving Care for California's Older Adults: The Role of Community Health Centers and Public Hospital Systems

Webinar
June 28, 2022

Presenter and Panelists

- Rafael Gomez, Senior Health Consultant, Pacific Health Consulting Group
- Pat Curran, CEO, Health Plan of San Mateo
- Kevin Mattson, CEO, San Ysidro Health
- Erica Murray, President & CEO, California Association of Public Hospitals and Health Systems
- Christine Noguera, CEO, Community Medical Centers



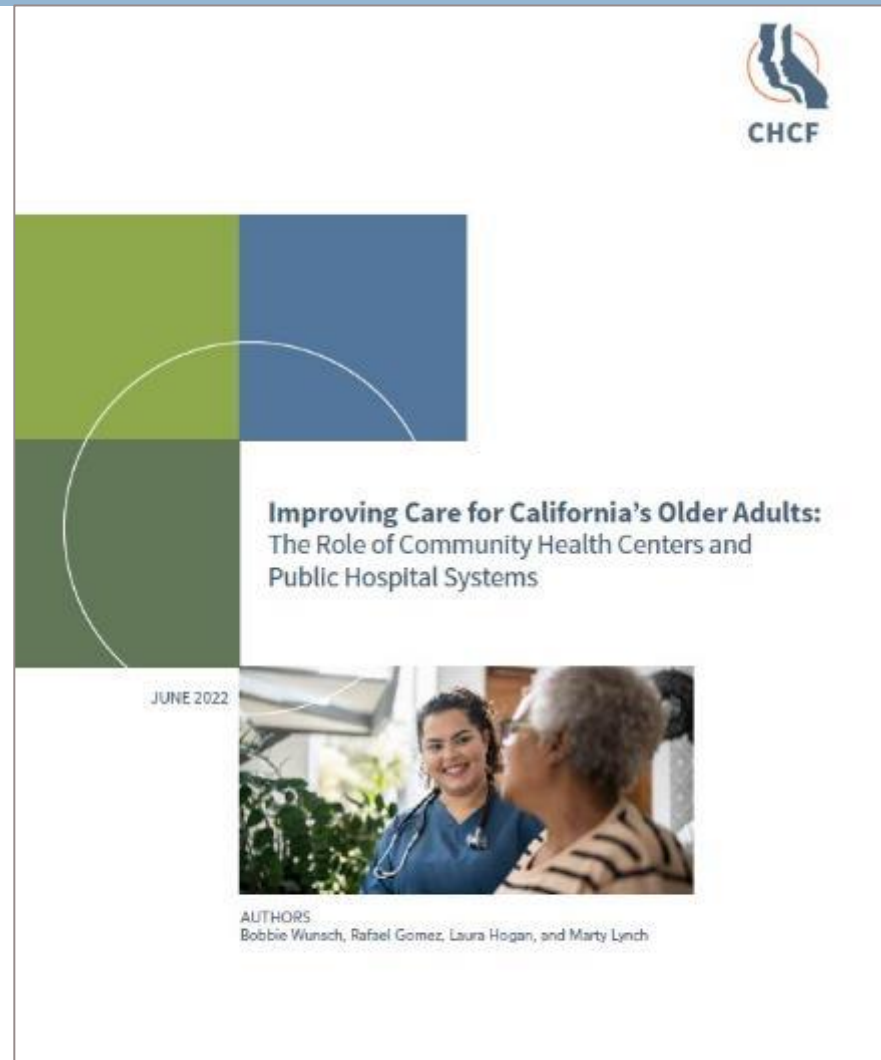
IMPROVING CARE FOR CALIFORNIA'S OLDER ADULTS:

THE ROLE OF COMMUNITY HEALTH CENTERS AND PUBLIC HOSPITAL SYSTEMS

CALIFORNIA HEALTH CARE FOUNDATION

Prepared by Pacific Health Consulting Group
June 28, 2022

CHCF Report Overview



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California Context

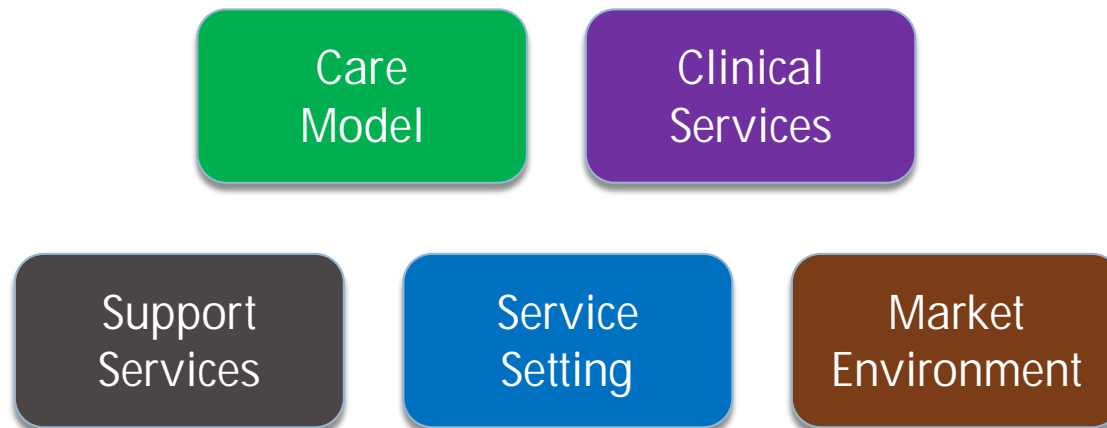
- A growing (and diversifying) California older adult population
 - ▣ +2.2 million residents 65+ between 2020 and 2030
 - ▣ Older adult population majority people of color by 2035
- Older adults growing as proportion of safety net patients
 - ▣ +80% patient growth in patients 65+ at community FQHCs between 2014-19 (8.5% of all patients) – 6 in 10 dually eligible
 - ▣ 1 in 4 community FQHC patients aged 45-64
 - ▣ 60+ patient discharges increased from 21% to 28% at public hospitals between 2014-19

California Context

- Medi-Cal policy focus on integrated and whole person care for complex populations
 - ▣ CalAIM reforms
 - ▣ Home and Community-Based Services spending
- Safety-net provider comprehensive service model and experience with complex populations
 - ▣ Well positioned to care for older adults with low incomes
- Care for older adults an emerging issue for safety-net providers, but crowded out by immediate needs and pressures

Considering Older Adult Population Needs and Your Service Role

- Intention and population knowledge as keys
- Service needs along a continuum – where can we add value?
- Age and complexity can overlap
- Multiple dimensions of care and support...



Emerging Older Adult Service Models Among Safety-Net Providers

- Older Adult Clinics (50+ and complex patients)
 - ▣ Internal medicine, aligned specialty and enabling services
- Care Coordination and Management
 - ▣ Intensifies along the continuum of need
- Medicare Enrollment Assistance
 - ▣ From patient transition to new patient recruitment
- Program of All-Inclusive Care for the Elderly (PACE)
 - ▣ Full-risk capitated program of comprehensive services for older adults otherwise requiring institutional care
- Other Services and Models
 - ▣ Geriatric Clinics
 - ▣ Medication Reconciliation
 - ▣ Enhanced Technology
 - ▣ Primary Care at Home
 - ▣ Geriatric Emergency Rooms

New Strategic Business and Financial Considerations

- **Productivity:** Primary care staffing, productivity
- **Payment:** PPS and Medicare reimbursement
- **Coverage:** Varied Medicare coverage arrangements
- **Managed Care:** Unique local Medicare managed care environments
- **New Levers:** Leveraging risk, 340B, PACE, other

Providers at Different Places

At the
Starting Line

Deliberate
Movers

Strategic
Foresight

So, Where Can We Start?

- Community Assessment – What are the needs and trends?
- Organizational Capacity – How well equipped are we to respond?
- Business Assessment – What are the strategic business opportunities and considerations?
- Phased Approach – How can we expand our role in a meaningful but realistic way?