# Welcome to the BHRS College!

Jean S. Fraser, Chief March 2013



#### You asked me five questions

- 1. What is the Health System?
- 2. What is your vision for the Health System?
- 3. What does healthcare reform mean for the Health System?
- 4. What is the relationship between BHRS and the rest of the Health System?
- 5. Who are you anyway?

# What is the Health System?

#### SMC Health System Mission

- **Prevent i**llness and injury to all residents
- **Protect** residents from environmental and other health hazards
- **Provide** services to those who cannot get them elsewhere
- **Partner** with others to accomplish our mission

#### Preventing illness and injury

- Policy work to change the environment so the healthy choice is the easiest choice
  - Promoting physical activity through active transportation, e.g. walking, biking, public transit
  - Improving food system so healthier food is most accessible
  - Decreasing harmful things, e.g. tobacco, alcohol, plastic bags, climate change

#### Protecting SMC from health hazards

- Environmental hazards protection and mitigation
  - Hazardous wastes and water quality
  - Restaurant, pool inspections
- Disease hazards protection and mitigation
  - Watching for communicable diseases and stopping their spread
    - Tuberculosis, Sexually Transmitted Diseases, flu

### Providing healthcare and other services

- Medical
- Mental health
- Substance use
- Prenatal and childhood intervention
- Elderly and disabled adult support and protection
- In Home Support Services (IHSS)
- Emergency medical response (911)

### Providing healthcare and other services

#### • To those who qualify

- San Mateo residents
- Usually limited to 200% Federal Poverty Level
  - \$20,000 for one person
  - \$44,000 for family of four
- -Usually lacking private health insurance
  - Uninsured or have government-subsidized insurance
  - In county jail
  - Seriously mentally ill

### Partnering with others to fulfill our mission

- Private hospitals and doctors support SMMC
- Community-based organizations provide many of our services
- We get financial support from local hospital districts
- We work with other county departments, e.g. HSA, Sheriff, Probation, HR, County Counsel, ISD

#### Fast facts on Health System

- Fulfill health function for entire county
- \$540 million annual budget
- Only 19% of \$\$ come from County
- 2,000 employees
- 8 operating divisions
- Coordinate our work with Health Plan of San Mateo

#### **Health System Operating Divisions**

- Aging and Adult Services
  - Behavioral Health and Recovery
  - Services
    - **Correctional Health Services**
    - **Emergency Medical Services**
    - Environmental Health Services
    - Family Health Services
    - Public Health, Policy and Planning

San Mateo Medical Center

My vision for the Health System: "The Triple Aim in action"

#### The Triple Aim

- Improve the experience of care
- Improve the health of populations
- Reduce the cost of health care

Don Berwick, "The Triple Aim: Care, Health and Cost" Health Affairs (May 2008)

### We have the parts of a whole system

- We provide services to people throughout their life span
- We have a close relationship with our major payer, the Health Plan of San Mateo
- But the reality is that our clients/patients do not experience us an integrated system, and we do not leverage our "systemness" enough

### Goal 1: Integrate information across our systems

- Use SMMC Master Patient Index to match patients across Health System and HPSM
- Deliver relevant information to providers at the point of care
- Create ability to mine our information to develop better programs and care

### Goal 2: Integrate our services across the delivery systems

- Further integrate mental health/substance use services into primary care and vice versa
- Integrate medical, social and other supports for Medi-Medi patients through Long Term Care Integration with HPSM
- Focus some population-based services on Health System patients/clients

#### Goal 3: Reduce the waste in our system

- Continue using LEAN process improvement approach at SMMC
- Spread LEAN to other parts of the Health System, led by BHRS and Aging

 Standardize work with HR in hiring and disciplinary processes

#### Goal 4: Invest in prevention

 Increase physical activity by promoting walking, biking and transit

Decrease access to sugar-loaded drinks

- Decrease violence through treatment for offenders
- Increase investment in early intervention programs in Family Health and BHRS

### What does health reform mean for the Health System?

### Starting Jan 1, 2014, all citizens must get health insurance

- Affordable Care Act based on "individual mandate," meaning every citizen must get health insurance or face a tax penalty
- Affordability is provided through free care for very low-income (Medicaid/Medi-Cal) and federal subsidies for middle income

#### Financial help available to 47,000 uninsured SM County residents

- 34,000 will qualify for subsidies to purchase private insurance in new State-based "Exchange"
- 13,000 will qualify for free insurance through Medi-Cal

Those eligible for new coverage must enroll during open enrollment = Oct 2013 – March 2014

- State's "Covered California" will run large marketing campaign
- HSA, Health and others will inform residents of new offerings
- Easy enrollment is key goal for HSA and "Covered California"

### Big issue is how many eligible people will enroll?

- Experts predict "take up" of around 50%
- Full enrollment will not occur in the first year
- Health System still responsible for those who do not enroll

### Ease of enrollment, affordability provider networks will matter

- Not clear how easy enrollment will be
- Covered California will offer insurance from private insurance companies at three different benefit/cost levels with mostly private providers
- Medi-Cal will be operated through Health Plan of San Mateo; Health System, community clinics, and some private providers will be main providers

### 20,500 uninsured residents will not get coverage thru Affordable Care Act

- 4,000 children enrolled in our local Healthy Kids program
- 16,500 adults enrolled in our local indigent health care program (ACE)

#### Federal and state reimbursement to Health System to decrease

- ACA funded in part by reduced supplemental funds for caring for uninsured
- State is attempting to take Health Realignment away or stick counties with costs for other programs
- Medicaid budget is always a target at federal level

#### The law requires parity!

- Mental health and substance use services must be provided at parity with general healthcare services in all insurance
- Must cover behavioral health services on same basis as physical health
- Must not impose cost-sharing, quantity or authorization requirements only to behavioral health

## HSA, Health, HR will play different roles

HSA	Eligibility, enrollment, and case management of health coverage programs
Health System	Providing physical and behavioral health care services to Medi-Cal and uninsured. Outreach to uninsured patients.
HR	Assuring that we meet responsibilities in providing health insurance to employees

### What is the relationship between BHRS and the Health System?

BHRS provides services Health System clients really need

 Low-income population we serve has so many behavioral health needs

 BHRS is an excellent collaborator with Health System divisions

 BHRS is an excellent collaborator with other departments

#### BHRS is a leader in client engagement and targeted outreach

- Leader in client and family engagement
- Leader in working on early intervention
- BHRS thinks about how system feels to clients/families
- Important work on de-stigmatizing mental health and addiction issues

#### Still plenty of work to do

Stigma is profound barrier; need to continue to work on this

 Need to find more ways to keep clients out of, and extract clients from, criminal justice system

 Excited that BHRS is going to use LEAN process improvement in revenue cycle Who are you?