Through the Lens of Access:
How Can Health Plans and Hospitals Play a Larger Role?

National Congress on the Un and Underinsured
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Maureen Hanrahan, National Director, Medicaid and Subsidy Programs
Gayle Everidge-White, National Director, Community Benefit Planning and Compliance Kaiser Permanente
Session Objectives

- Demonstrate the unique and innovative role that health plans and hospitals can play in expanding access for the uninsured, at the local level, meeting local needs.

- Stimulate discussion about creative approaches to improving access to care at the local level.

- Discuss how Legal, Compliance and Sarbanes Oxley can enhance an organization's ability to care for the uninsured.
Kaiser Permanente?

- The largest nonprofit health care organization in the United States and America's leading integrated health plan. Kaiser Permanente (KP) cares for 8.5M members, and 875,000 Medicare members, in 8 geographic regions, 9 states and the District of Columbia.

- Kaiser Permanente’s mission is to provide affordable, high-quality health care services and improve the health of the members and communities it serves.

- In 2006, KP dedicated over $800M to community benefit; over $644M, 80% of the portfolio, was dedicated to improving access to care and coverage.
Through the Lens of Access

The Problem

"The number of uninsured people climbed to 47 million in 2006, and an estimated 16 million adults are inadequately insured. Health insurance coverage is the most important determinant of access to health care. People who lack coverage have fundamentally different life experiences than those who have it; many die prematurely, and many suffer lost productivity and earnings.

With so many people left outside the health care system, it is no wonder that the U.S. system performs poorly compared with systems in industrialized nations that have universal health insurance. It is critical on moral and economic grounds that the nation move affirmatively to guarantee affordable, comprehensive and continuous health insurance for everyone."

Sara Collins, PhD
Commonwealth Fund
Invited Testimony to House Ways and Means Subcommittee on Income Security and Family Support
November 14, 2007
The Lens of Access

Kaiser Permanente believes everyone has the right to quality care and coverage. We achieve our access goals in a variety of ways, both indirect and direct.
Public Policy

- Kaiser Permanente recognizes that public policy influences the environment and impacts the communities we serve. In 2006, we contributed more than $2M to advance public policy that is beneficial for the community at-large.
- Our public policy strategy includes building public/private partnerships to advance population health, supporting legislation that advances expanded access, health promotion and disease prevention, and convening policy makers.
- Provided approximately $1M in grants to other nonprofit organizations to promote public policy advocacy.
- In CA, KP leaders developed a detailed proposal for universal coverage based on an individual mandate, and shared responsibility with employers and government.

Research

- Kaiser Permanente is one of the largest non-academic research centers in the U.S.
- Contributed more than $17M to support clinical and health research activities.
- Investigators participated in 2,079 research and evaluation studies.
- Partnered with numerous prestigious organizations: National Institutes of Health, Institute of Medicine, the federal Agency for Healthcare Research and Quality, Centers for Disease Control and Prevention, Harvard University, Stanford University, Washington University, University of CA.
- Studies: Diabetes Study of Northern CA, Parental Perception of Neighborhood Safety and Children’s Physical Activity. Lead evaluators of Colorado’s Thriving Communities initiative.
Medical Financial Assistance (MFA)

• Free care 200% – 300% FPL
• Partial – Free care if experiencing catastrophic medical expenses
• Discounts for uninsured below 400% FPL, ineligible for MFA
• Covers all usual and customary services, including pharmaceuticals
• Bridges gap in coverage eligibility
• Targeted Community Partnership: Breast Buddies, Lab & X-ray, Operation Access, O/P weekend clinic and Dental Clinic
• Provided subsidized medical care and discounts for the uninsured to >256,000 individuals

MFA Emergency Response

• Responsive in a Disaster: Katrina, Southern California Wildfires
• Coordinated approach with Federal and State regulatory agencies
• Streamlined eligibility process
• On-site triage care
• Referrals to local Kaiser Permanente facilities for up to 6 months
• Covers all usual and customary services, including pharmaceuticals
• MFA disaster toolkit: attestation form, caregiver instructions (What to do when patient presents), communication talking points for all staff – highlighting our desire to be part of the solution.
Setting a Bar for Quality

Kaiser Permanent Medicaid and S-CHIP Plans - HEDIS-like* Quality Measures

<table>
<thead>
<tr>
<th>Measure</th>
<th>KP Medicaid Plans</th>
<th>KP S-CHIP</th>
<th>NCQA Medicaid 90th Percentile</th>
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<tbody>
<tr>
<td>Childhood Immunizations</td>
<td>85%</td>
<td>91%</td>
<td>83%</td>
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<td>Adolescent Immunizations</td>
<td>88%</td>
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<td>Breast Cancer Screenings</td>
<td>78%</td>
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<td>Cervical Cancer Screenings</td>
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*Health Plan Employer Data and Information Set (HEDIS) is a tool used by more than 90% of America’s health plans to measure overall Health Plan population performance on important dimensions of care and service. The displayed "HEDIS-like" measures are an approximation of the performance on very similar measures adapted for payor-defined populations and based on available Kaiser Permanente data.

Advancing Important Research

National collaboration with the Center for Health Care Strategies tested innovations in caring for complex co-morbid Medicaid patients. Results disseminated publicly through multiple channels.
Safety Net Partnerships - Why?

- Increases capabilities and capacity in safety net improves access in low income communities
- Provides continuity of care for those on and off public programs
- Provides expertise to both partners in serving vulnerable and diverse populations
- Share commitment to innovation and social change
Evolving into True Partnership: From Giving Grants to Exchange of Expertise

- Volunteerism
- Grantmaking
- Sharing expertise
- Technical Assistance

PARTNERSHIP: Two-way exchange of information/expertise
5 Domains of Safety Net Partnership

• **Policy**
  – Preserving the safety net under health care reform (Calif. Ass. Of Public Hospitals, California Primary Care Association)

• **Access**
  – Improving access to specialty care, and fortifying primary care (Center for Excellence in Primary, CPCA and CAPH)
  – Staff support for clinics in Colorado Springs to increase reach to uninsured

• **Clinical Quality**
  – Partnerships in improving chronic care, particularly in diabetes (Bundled therapy for diabetes care in San Diego, SF, Alameda)
  – Natl. Ass. Of CHCs, Natl. Ass. Of Public Hospitals Quality Improvement Centers

• **Operational and Resource Sharing**
  – Operation Access in Northwest, Orange County, SF

• **Information Technology**
  – Purchase of EPICare for Oregon Community Health Information Network
  – Sharing KP Health Connect expertise, and $7 million investments in HIT implementation efforts
Charitable Coverage Programs

• Charitable Coverage programs provide access to comprehensive health care and a medical home over a long period of time

• Programs are designed to target local needs and populations

• 80-100% of cost is subsidized by KP

• In 2006, we provided coverage to over 72,000 low income persons ineligible for public coverage at a value of over $120M

• Most NCQA quality measures exceed the 90th percentile for Medicaid
Charitable Coverage Programs

Kaiser Permanente Charitable Coverage and KP Commercial - HEDIS-like* Quality Measures

<table>
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Success is losing members, to coverage

- **When we provide care ourselves**
  - CHP in California and North-West (Portland Oregon) target children, including undocumented
  - Colorado program in collaboration with Micro Business Development
  - Georgia Nursing and health professional program

- **When we provide care in community partnership**
  - MidAtlantic States (Maryland, Virginia and Washington DC) Childrens programs
  - Washington Basic Health Plan benefit enhancement
  - Positioning KP Georgia’s plan to provide continuity of coverage to those impacted by S-CHIP shortfall
What’s Challenging

• Finding those in need, building trust

• Choosing the best product and subsidy levels to maximize dollars, and assure access

• Measuring impact beyond dollars and numbers

• Anticipating and informing changes in public programs
Community Benefit Compliance

**Vision**

The standard of excellence for non-profit accountability to our shareholders – the communities we serve

**What Is It**

…an adaptive program designed to mitigate risks to KP’s tax exemption and position KP as a leader in the delivery of Community Benefit and Social Accountability

**Accomplishments**

- Integrity validation – SOX
- Monitoring/Auditing
- Training/Education
- Infrastructure
- Develop CB Policies/procedures
- Corrective Action

**Role in serving the uninsured**

- Reporting transparency
- Performance monitoring
- Operational infrastructure
- Partner with programs to develop innovative solutions which meet regulatory requirements and address gaps in care/coverage
Contact Information

Gayle Everidge-White
National Director, CB Planning & Compliance
626-405-6282
Gayle.S.Everidge-White@kp.org

Maureen Hanrahan
National Director, Medicaid and Subsidy Programs
303-344-7260
Maureen.B.Hanrahan@kp.org

Winston F. Wong
Medical Director CB Disparities
Improvement & Quality Initiatives
415-271-3127
Winston.F.Wong@kp.org