The Root Cause Coalition’s Webinar “How To” Series
How To: Utilize Funding Mechanisms to Address Housing as a Health Issue
November 27, 2018, 10am PST/1pm EST

Kelly Bruno, CEO
National Health Foundation

David Kagan, MD, MBA, MPH
Medical Director
LA Care Health Plan

Kim Hurley, MSW, LCSW, CAS, Director of Population Health Social Services, Enterprise, St. Mary Medical Center
Agenda

I. Introduction to topic
II. Overview of recuperative care funding models
III. Dignity Health System’s rationale for participation and ROI
IV. LA Care’s rationale for participation and ROI
V. The future of funding, potential reimbursements
VI. Questions from audience
Introduction & Overview

• Recuperative Care / Medical Respite

• National Health Foundation’s program
  • History, service and outcome statistics

• Funding models
  • Fee-for-service contracts with hospitals
  • Shared-cost model with hospitals in a defined community based on usage
  • Advanced leasing model with health plans and health systems
• Overview of Dignity Health
• History of utilization of recuperative care programs
• Rationale for partnerships and ROI determinations
L.A. Care Health Plan

• Overview of L.A. Care Health Plan
  o L.A. Care Health Plan (Local Initiative Health Authority of Los Angeles County) is a public entity and community-accountable health plan serving residents of Los Angeles County through a variety of health coverage programs
  
  o The coverage programs include L.A. Care Covered™, Medi-Cal, L.A. Care Cal MediConnect Plan and PASC-SEIU Homecare Workers Health Care Plan
  
  o L.A. Care is a leader in developing new programs through innovative partnerships designed to provide health coverage to vulnerable populations and to support the safety net. With more than 2.0 million members, L.A. Care is the nation’s largest publicly operated health plan.
L.A. Care Health Plan

• History of planning & utilization of recuperative care programs
  o L.A. County Department of Health Services Housing for Health (HfH) has operated a recuperative care program for DHS High Utilizers and selected Housing for Health clients only.
    • DHS average cost per bed night is $110 and the average length of stay is 4 months (122 days)
    • DHS uses a mix of directly-operated and contracted recuperative care providers
  o In June 2017, the L.A. County Board of Supervisor’s Measure H funding allocation provided additional funding for HfH recuperative care under strategies B7 and E8.
    • HfH had requested potential assistance from L.A. Care in guiding referrals appropriately from hospitals into these slots. Did not end up pursuing this option with HASC and HfH
  o In 2016, L.A. Care considered the recuperative care model pursued by Illumination Foundation and IEHP (Inland Empire Health Plan) but decided not to proceed

• Rationale for partnerships and ROI determinations
  o Under current leadership, decided a recuperative care pilot with NHF would provide the opportunity to test out the model
  o Evaluation plan will need to be developed to determine early ROI and outcomes
The Future

• The future of funding mechanisms and potential reimbursement strategies

• Questions
THANK YOU!
Questions?

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