



# PARTNERSHIP HEALTHPLAN of CALIFORNIA

# Partnership HealthPlan of California 2017 – 2020 Strategic Plan

### Message from the CEO

While many of us have given up making predictions, myself included, one thing remains very clear at Partnership HealthPlan of California (PHC): Change is a constant, and we have to be flexible enough to weather many challenges while pushing ourselves to advocate for and seize the opportunities that will result in better health for our members now and into the future.

As we developed our Strategic Plan for the next three years, I am proud to say that we have utilized our previous plan and achieved many of the goals we set for ourselves in that effort. We have built our capacity to align payment with quality and will continue to do so. We are also extremely proud of investments made through our Strategic Use of Reserves initiative, which has resulted in much-needed member benefits, enhanced



provider reimbursement, and improved access to care throughout our 14-county service area. We will continue to seek out and invest in areas with promise for improved access and quality of care.

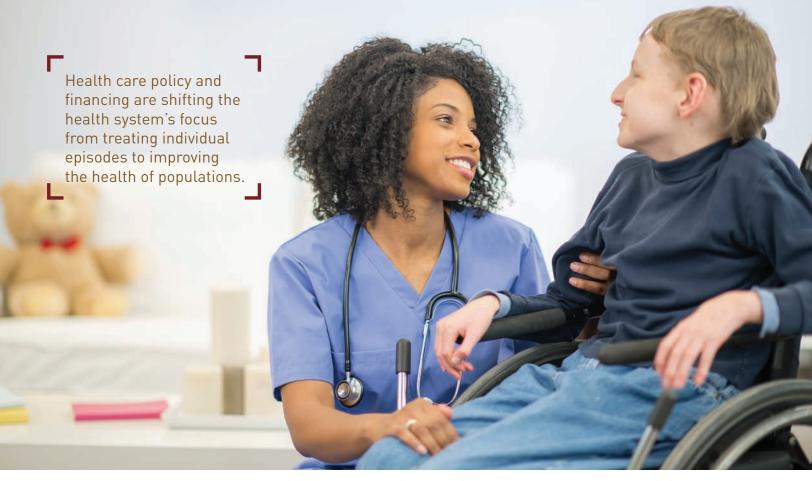
Our three major areas of concentration – high-quality health care, operational excellence, and financial stewardship – remain consistent themes in our daily work. However, there are many initiatives and ambitious goals behind those banners. As we share in this Strategic Plan, PHC continues to prepare for NCQA accreditation, establish a regional model for Drug Medi-Cal services in collaboration with our counties, and launch our housing initiative – the biggest investment to date under our Strategic Use of Reserves program.

I would like to thank our Strategic Planning Committee, Board of Commissioners, management team, and PHC staff for their work in not only developing this plan, but in ensuring we are ready to navigate the uncertain waters ahead.

Many thanks,

Elizabeth Gibboney, CEO

Partnership HealthPlan of California



- Health care policy and financing are shifting the health system's focus from treating individual episodes to improving the health of populations.
- There is a growing awareness that many issues, beyond medical care, directly impact health (e.g. housing, transportation, environment, nutrition).
   Cross-sector collaborations are forming to leverage resources and take a collective approach in addressing social determinants of health, wholeperson care, transitions of care from higher to lower levels of service, reducing dependence on opioid prescriptions, and improving care coordination and care management for homeless individuals and those moving from the criminal justice system back into the community.
- The health care system will continue to struggle with workforce shortages for both providers and skilled allied health professionals particularly in the most rural areas of PHC's network. While there are many statewide efforts underway to highlight and address workforce shortages, PHC will continue efforts to identify, train, and retain local expertise.

- Information technology and reimbursement methodologies are evolving among health payers and health providers.
- Health plans, including PHC, are working together to advocate for sustaining the Medicaid expansion and other core components of the Affordable Care Act.

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<sup>1</sup>The Institute for Healthcare Improvement's Triple Aim is an approach to improve the health care system. The approach simultaneously addresses three dimensions: (1) improving the patient experience of care (including quality and satisfaction), (2) improving the health of populations, and (3) reducing the per capita cost of health care.

# **Health Care Environment**

Partnership HealthPlan of California updated its Strategic Plan amid uncertain and tumultuous times as the new federal administration and congressional leadership actively pushed for repealing and replacing the Affordable Care Act (ACA).

There is uncertainty about which components of the ACA might be repealed, the timing of changes, and the policies that might replace those repealed. In addition to uncertainty over the future of the ACA, the following trends, conditions, and opportunities were taken into consideration as PHC revised the organization's three-year goals:

- The Final Rule on Medicaid Managed Care (Final Rule) is the first major change to Medicaid managed care regulations since 2002 and provides opportunities to continue to promote the Triple Aim¹ through high-quality care, operational excellence, and financial stewardship. Many issues highlighted in the Final Rule were previously implemented in California; however, there were additional changes required beginning in July 2017.
- Health plans around the country are seeking accreditation from the National Committee for Quality Assurance (NCQA) to publicly demonstrate their ability to meet a rigorous set of standards. These standards are rooted in strategies that NCQA believes improve care, enhance service, and reduce costs (such as paying providers based on performance), leveraging online resources to give consumers more information, disease management, and provider-level measurement.
- PHC members continue to have challenges as the complexity of their health conditions grows. Many members have multiple chronic conditions including mental health and substance use disorders, which often occur simultaneously and significantly limit their ability to obtain optimal health and well-being.



### **About Partnership** HealthPlan of California

PHC began serving Medi-Cal beneficiaries in Solano County in 1994 as a County Organized Health System (aka public plan). Governed by a Board of Commissioners comprised of physicians, county officials, hospital leaders, providers, members, and public representatives, PHC has over 700 employees in four regional locations - Fairfield, Santa Rosa, Redding, and Eureka.

Partnership provides coverage to 572,400 individuals living in 14 Northern California counties. Since the implementation of the Affordable Care Act, 163,000 new members received PHC coverage through Medi-Cal expansion. The plan's diverse membership lives in cities, suburbs, rural communities, and remote areas of the state. While members speak 26 different languages, the most common languages are English, Spanish, Russian, and Tagalog.



# PHC MEMBERS

# 2017 Strategic Plan Process

The PHC Strategic Plan was developed with input from a wide variety of constituents and a review of the organization's internal data. Individuals representing consumers, community clinics, hospitals, health care systems, and public agencies provided input for the strategic plan.

The process demonstrates a continued commitment to advancing the PHC mission and vision while upholding the core values of the organization.



# **Highlights of Strategic Investments**

Over the past three years, PHC invested over \$222 million from reserves to advance the organization's mission and goals. These investments resulted in a number of internal successes, including building capacity to evaluate pilot programs, improving cyber security, and launching a robust training and development initiative for staff.

In addition to internal successes, PHC is proud of the accomplishments made possible through strategic investments in community partners.

### COMMUNITY-BASED SUCCESSES





Built capacity to offer more access to drug and alcohol treatment



care benefit for adult members



Supported the recruitment of 173 providers through the Provider Recruitment Programs



Committed to the development of a Health Information Exchange/ Clinical Data Repository to share information with partners

# **Mission**

To help our members, and the communities we serve, be healthy

# **Vision**

To be the most highly regarded managed care plan in California

# **Values**

Partnership HealthPlan of California believes in...

- Fostering strong partnerships with members, providers, and community leaders to collectively improve health outcomes
- Focusing on continuous quality improvement in every aspect of the organization and in collaboration with our partners
- Setting a standard of professionalism, integrity, and accountability
- Communicating honestly, directly, and respectfully with our members, community partners, and staff
- Striving to be innovative and seeking creative solutions
- Being good stewards of our resources while making mission-driven business decisions
- Promoting diversity by accepting, respecting, and valuing individual differences and capitalizing on the diverse backgrounds and experiences of our members, community partners, and staff
- Creating a work environment that provides opportunities for employees to have fun, build relationships, and stay connected across the entire organization



### A Successful Health Plan Structure

PHC's solid foundation relies on effective partnerships to support the health of members. Innovation, principles, values, culture, and stewardship serve as the basis from which goals are built. The organization's commitment to sound governance, financial stability, and operational excellence is critical to advancing the mission to help our members, and the communities we serve, be healthy. PHC is able to successfully achieve organizational goals, in large part, due to successful relationships with providers, employees, leaders in public agencies, and community partners. As a result of the organization's solid structure, PHC is well positioned to manage dynamic changes in the health care environment and the evolving needs of our members and communities.



# Focus Areas and Three-Year Goals

Despite uncertainty in the health care environment, PHC remains committed to three focus areas: high-quality health care, operational excellence, and financial stewardship. The organization has prioritized three-year goals within each focus area.



# **High-Quality Health Care**

PHC's goals related to high-quality health care are aligned with the Institute for Healthcare Improvement's Triple Aim framework:

- Improving the health of members
- Enhancing the member experience of care
- Reducing or maintaining the cost of care

Four goals **targeting change at the individual, systems, and community levels,** will strengthen the ability of PHC to support the provision of high-quality health care.

# Goal 1: Improve the health outcomes of our members through the provision of high-quality health care

Strategies to advance this goal include work toward PHC acquiring **NCQA accreditation.** In order to become NCQA accredited, PHC will need to meet a rigorous set of standards that improve care, enhance the member experience, and reduce costs. Every department within PHC will engage in efforts to measure, analyze, improve, and repeat processes aimed at improving health outcomes and HEDIS scores.

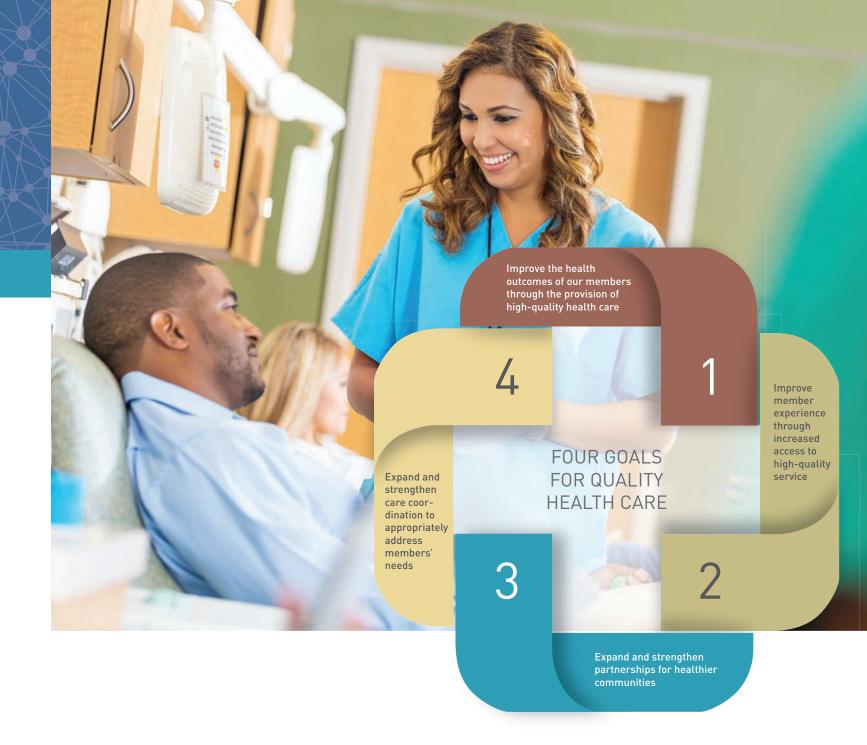
Another strategy to further this goal is related to PHC's efforts aimed at addressing the **social determinants of health.** For example, PHC has launched a housing initiative to help communities with high need, as lack of housing is correlated with poor health outcomes.

# Goal 2: Improve member experience through increased access to high-quality service

PHC learns about member experiences through a variety of ways, including focus groups with members and quarterly meetings with two Consumer Advisory Committees.

Members are interested in accessing their health planrelated information electronically, therefore PHC will focus on developing and launching a **member portal** over the next three years.

Increasing the number of providers within PHC's network, especially in rural areas of the service area, improves members' access to care. PHC's **Provider Recruitment Programs** helped bring 173 providers into the network over the span of two years. PHC will continue to invest in these programs to improve access.



# Goal 3: Expand and strengthen partnerships for healthier communities

PHC recognizes the value in collaborating with others to advance its mission. **Collaboration** will continue to occur at the local, regional, state, and federal levels and focus on policy and service delivery.

PHC will strengthen its work with counties to implement a Regional Model for the **Drug Medi-Cal Organized Delivery System**, a program where members have access to a full continuum of substance use disorder services that includes withdrawal management, medication assisted treatment, short-term residential, case management, and care coordination with medical care, mental health, and recovery support services.

# Goal 4: Expand and strengthen care coordination to appropriately address members' needs

PHC's Health Services Department will shift its infrastructure from a "program centric" to a "patient centric" focus, using a single software platform for both utilization management and care coordination. Members requiring services will be assigned to a specific care unit and will receive assistance throughout the continuum of program services from specific designated staff.

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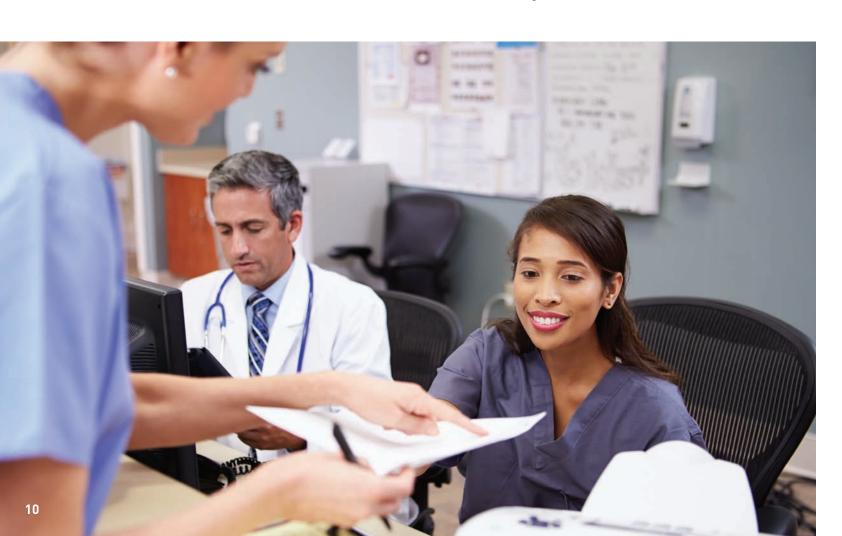


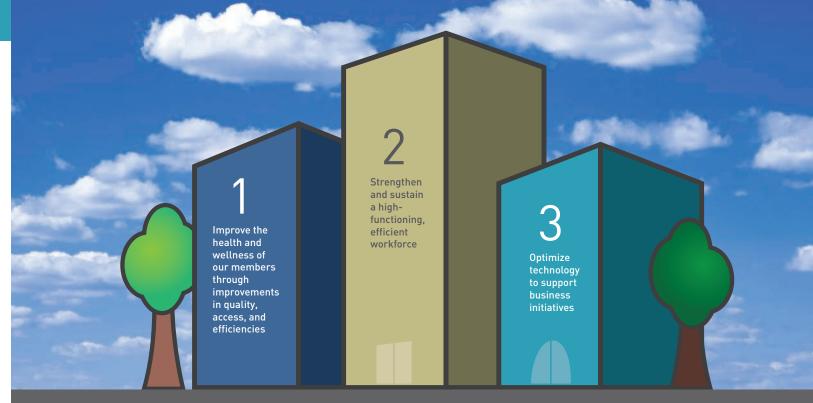
### **Operational Excellence**

PHC is committed to improving efficiencies to support members accessing the right level of care when they need it. Operational excellence requires an intentional focus on strengthening core components of the organization's infrastructure – IT, communications, workforce, and data analytics. Across every aspect of the organization, PHC meets the expectations of stakeholders while maintaining the highest level of security and privacy for members, staff, and providers. PHC will strengthen the organization's infrastructure by achieving three interrelated goals.

### Goal 1: Improve the health and wellness of our members through improvements in quality, access, and efficiencies

PHC is committed to exploring, testing and scaling new and different ways to provide more efficient care. Investments in **IT infrastructure** will allow for improved quality, access, and efficiencies across PHC's entire network. For example, PHC will expand **telehealth**, **e-consult**, **tele-interpretation**, **and specialty hubs** where appropriate. In addition, PHC will support and participate in community-based Health Information Exchanges.





# THREE GOALS FOR OPERATIONAL EXCELLENCE

# Goal 2: Strengthen and sustain a high-functioning, efficient workforce

The high-performing workforce at PHC has been identified as a key strength of the organization. To maintain the success of the organization, PHC will continue to **invest** in its workforce and nurture a workplace culture where innovation and continued improvement are valued. Strategies to advance this goal will include providing competitive salaries, offering company-sponsored programs centered on employee health and wellness, and a robust training and development program. In addition, PHC's leadership will ensure clinical staff are working at their highest level of licensure and skill set.

# Goal 3: Optimize technology to support business initiatives

PHC will continue to **focus on technology that improves quality and efficiency, improves data access, and reporting and analytics.** Additionally, ensure data and systems are secure to supports current and new programs offered to members and communities.

The availability of quality data and information is vital to improving the health and wellness of our members. PHC is committed to providing quality data, reporting, and analytics to our providers and members using dashboards, online reporting tools, and provider and member portals to access and view data.

To maintain the success of the organization, PHC will continue to invest in its workplace culture where innovation and continued improvement are valued.



# **Financial Stewardship**

PHC is known for sound business management practices and responsible stewardship of public resources. The organization proactively manages challenges and leverages new opportunities in the ever-changing health care environment. Three goals are intended to advance the organization's mission while maintaining fiscal prudence.

# Goal 1: Partner with local, state, and federal leaders to advocate for health care system efficiencies and value-based purchasing

PHC values the trusted relationships established across all levels of the health care system; these relationships allow for information sharing and coalition building aimed at protecting local managed care plans and coverage initiatives. Moving forward, PHC will continue to deepen existing relationships with government officials and foster new ones so that there is a strong, unified voice advocating for the sustainability of the Medi-Cal program.

# Goal 2: Improve infrastructure needed to make data-driven financial decisions

It can be difficult to determine the value of programs, however with improved infrastructure to support rigorous program evaluation, PHC will strengthen the ability to measure health outcomes and engage in deeper financial analyses.

### **Goal 3: Enhance responsible business practices**

PHC remains committed to business practices that appropriately use taxpayer dollars to support the provision of health care with low administrative overhead. PHC will look for new opportunities to gain efficiencies (for the organization as well as for providers) and will be transparent about resource allocation decisions. Strategies may include optimizing use of technology, increasing automation, continuing transparency in reporting of operational and financial metrics, and sharing best practices related to business management processes with partners in the health care sector.







# **Acknowledgments**

This document is the culmination of input and feedback gathered from members of PHC's Leadership Team, Strategic Planning Committee, Consumer Advisory Committees, and Board of Commissioners.

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