

Accessible, Affordable, Equitable, High Quality, Universal

## Virtual Commission Meeting June 12, 2020

## **Virtual Meeting Protocols**



- This meeting is being recorded.
- Commissioners are "panelists."
  - You have the ability to mute and unmute and the option to be on video.
  - Please mute yourselves when you are not speaking.
  - Please use the chat feature to indicate that you would like to speak.
  - When the facilitator calls your name, please unmute to speak and then mute again.
- Members of the public are "attendees."
  - You can listen to and view the meeting.
  - Please use the Q&A feature to provide written public comment.
  - This will be a part of the public record.

#### Welcome and Introductions

Mark Ghaly, MD, Commission Chair Alice Hm Chen, MD, MPH, Deputy Secretary, CHHSA

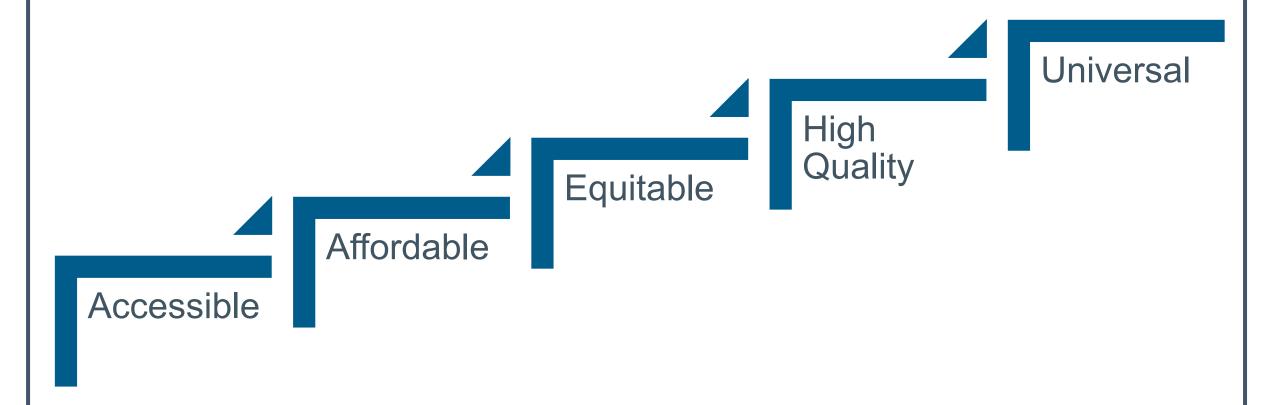
## **Commission Purpose**



To provide the Governor and the Legislature with options and recommendations to advance progress toward achieving a health care delivery system in California that provides coverage and access through a unified financing system, including, but not limited to, a single-payer financing system, for all Californians.

## **Commission Principles**









- Advisory role to the Governor and Legislature
- Commissioners selected for expertise
- Commissioners provide valuable input into policy options, help raise issues and explore implications in order to assist policy makers in making informed decisions
- Commissioners take advisory votes on potential recommendations to include in the Commission's reports
- The Commission and Commissioners do not have decisionmaking authority for the State

## Overview: Environmental Analysis Report

Marian Mulkey, MPP, MPH
Mulkey Consulting



#### **Context**

#### The COVID-19 pandemic and economic downturn:

- Shifted timeline and format of Commission meetings
- Led consulting team to revise the environmental analysis, emphasizing themes related to system resiliency and equity
- Informed decisions about Commission work plan



#### **Presentation Goals**

- Provide synopsis of interviews with Commissioners
- Provide update on Commission's first deliverable, "An Environmental Analysis of Health Care Delivery, Coverage and Financing in California"



#### **Commissioner Interview Process**

- Every commissioner was interviewed by a pair of consulting team members in March or April
- Commissioners weighed in on Commission priorities and process
- Commissioners shared their views on essential groundwork to move the state toward unified financing
- The consulting team consolidated findings, identifying common themes and areas of divergence among Commissioners



## **Commissioner Interview Findings**

- Rather than focusing exclusively on one "big leap," most Commissioners encouraged some form of "bold preparatory" steps on the path to unified financing
- Views varied regarding types and sequence of preparatory steps, for example:
  - Within state-sponsored programs (Medi-Cal, Covered California, CalPERS): Align purchasing, quality reporting, provider payments
  - Within job-based coverage: Address affordability and make benefits more consistent
  - Begin with a sub-population



## **Environmental Analysis Content**

- Section 1: The Current State describes demographics and coverage, health care delivery and financing, and early observations on the impact of the COVID-19 pandemic
- Section 2: Steps to Prepare to Transition to Unified Financing addresses considerations influencing California's path and different steps the state might pursue
- Section 3: Coverage Expansion Options briefly describes incremental policy proposals that might move the state closer to universal coverage

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## **Environmental Analysis Process**

- Consulting team drew heavily on existing research and resources
- California Health and Human Services Agency staff reviewed earlier versions and provided feedback
- COVID-19 pandemic has changed the landscape; early insights have been added but implications continue to unfold
- Input received by June 16 from Commissioners and the public will inform final refinements to the report, which is due to the Legislature and Governor Newsom on July 1



#### For Commissioners to Consider

Within the context of the COVID-19 pandemic, what preparatory steps toward unified financing do you feel are most crucial or most opportune?

# Commission Work Plan and Advisory Focus Groups

Andrew B. Bindman, MD
Professor of Medicine
Philip R. Lee Institute for Health Policy Studies
University of California San Francisco



#### **Presentation Goals**

- Provide rationale for the advisory focus groups
- Provide a description of the focus group process
- Describe how Commission will benefit from this process

### **Background**



- The COVID-19 pandemic has revealed gaping holes and inequities in California's health care system.
- Fragmented financing has resulted in millions of newly unemployed individuals losing health care coverage at a time of great need.
- Many health care providers are struggling to address the rapid shift in service demand while hemorrhaging financial resources because their business models depend on a steady flow of fee-for-service payments.
- This moment affords a unique opportunity to consider ways to make California's health care system more resilient to external threats while pursuing the values of accessibility, affordability, equity, high quality, and universality.



### Purpose of Advisory Focus Groups

- Employers and health care providers are key stakeholders that have historically had an interest in preserving the multi-payer system.
- To gather an updated assessment of how challenges associated with COVID-19 have altered employers' and providers' interest and willingness to work with public leaders to build a more accessible, affordable, equitable, high quality, universal and resilient health care system in the state.



#### **Process**

- Two separate advisory focus groups with representatives from the employer and provider communities
- Each group includes approximately a dozen representatives
- Three virtual meetings for each group completed by the end of July
- Discussion summarized without personal attribution and communicated back to Commission at a public meeting in August

## **Example Focus Group Questions**



- What would you want to know about how unified financing would work, both initially and over time, to feel comfortable that it could work well for you and your organization?
- How would the risks and rewards of a new unified financing approach balance out for you?
- What assurances, what kind of a new civil contract would need to be in place for you to support – or at least not oppose – such an arrangement?



## **Focus Group Selection Criteria**

- Experience and knowledge of California health care finance and delivery
- Diversity across group sectors and geographic region
- Manageable group size

## Provider Advisory Focus Group Participants



- California Medical Association: Dustin Corcoran and Terry Hill
- Primary Care Safety-Net Provider: Hector Flores
- CAP-G/America's Physician Groups: Bill Barcellona
- California Primary Care Association: Carmela Castellano-Garcia
- Permanente Medical Group: Richard Isaacs
- California Hospital Association: Carmella Coyle
- University of California: Carrie Byington
- California Association of Public Hospitals: Erica Murray
- Cedars-Sinai Hospital: Thomas Priselac
- Thought Leaders: Mark Smith, Hal Luft

## **Employer Advisory Focus Group Participants**



- California Association of Non Profits: Jan Masaoka
- California Chamber of Commerce: Allan Zaremberg
- California Forward: Micah Weinberg
- California Retailers Association: Rachel Michelin
- California Restaurant Association: Jot Condie
- Small Business Majority: John Arensmeyer
- Los Angeles Chamber of Commerce: Maria Salinas
- Pacific Business Group on Health: Bill Kramer
- Silicon Valley Leadership Group: Carl Guardino
- San Diego Electrical Health and Welfare Trust: Ken Stuart
- Carpenter Funds: Bill Feyling
- Thought Leader: Barbara Wachsman



#### For Commissioners to Consider

Within the context of the COVID-19 pandemic, what issues and concerns are you most interested in hearing about from the employer and provider focus groups?