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CALIFORNIA EDITION

Kaiser Permanente Commits \$63M to Support Contact Tracing in California

A public-private partnership will deploy hundreds of workers in clinical settings to help slow the spread

Kaiser Permanente, a nonprofit, integrated health care system, is committing \$63 million to support California's contact-tracing work in order to reduce the number of Californians who contract COVID-19.

This support, in the form of charitable grant funding to the Public Health Institute, will create agile community health teams hired from within communities that have been disproportionately affected by COVID-19 to support the critical work of local public health departments. The support teams will be embedded in clinical settings to rapidly respond to COVID-19 hot spots and support ongoing contact-tracing efforts while ensuring high levels of privacy and security. This funding will also connect Californians in self-imposed isolation and quarantine with supportive services to assist with food, housing, childcare, and other needs.

The work is being undertaken in collaboration with Gov. Gavin Newsom's administration, with the aim of reducing the number of Californians who contract COVID-19. The effort will add up to 500 people in clinical settings to support the state's contact-tracing effort, which will help facilitate safe reopening for businesses and schools. Futuro Health, a nonprofit founded by Kaiser Permanente and SEIU-United Healthcare Workers West, will coordinate with the Public Health Institute to guide these new hires into allied health careers.

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SCAN Health Plan Leverages AI Based Predictive Models to Improve Identification of High-Risk Members

First phase of project aims to predict preventable hospitalizations

SCAN Health Plan®, a not-for-profit Medicare Advantage health plan, has announced the first phase launch of artificial intelligence (AI) based predictive models designed to improve health outcomes and inform benefit and service design. This implementation will improve SCAN's ability to identify high-needs members and provide tailored interventions to help avoid or reduce hospitalizations.

As a part of the first phase implementation, SCAN and KenSci, a system of intelligence for healthcare, have launched explainable AI models for healthcare, enabling SCAN to identify members at risk of Hospitalization for Potentially Preventable Complications* (HPC) as well as those eligible for Nursing Facility Level of Care (NFLOC).

The platform provides SCAN with insights, proactively identifying members potentially at risk for specific disease states allowing for early interventions. In addition, SCAN is using machine learning (ML) techniques that are routine across consumer applications but new to healthcare in helping identify gaps in care to improve the management of chronic conditions.

**HPC measure is based on National Committee for Quality Assurance (NCQA) HEDIS® technical specifications. For more details, please visit [ncqa.org](https://www.ncqa.org)*

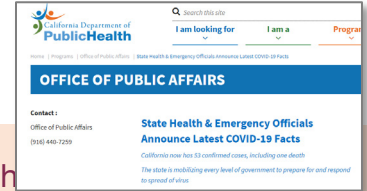
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COVID-19 in California By The Numbers

(Source: CDPH – Data is as of the dates indicated)



August 11th	August 4th	July 21st	July 7th	June 23rd	May 26th	April 28th	March 31st	
586,056	524,722	400,769	277,774	190,222	98,980	46,500	8,155	Positive cases
61,334	58,172	64,261	54,857	33,207	14,923	11,104	5,620	New cases past week
9.6%	9.3%	8.6%	8.2%	7.6%	5.2%	2.7%	1.1%	% Age 0-17 cases*
60.4%	60.5%	60.3%	58.6%	55.8%	51.6%	48.7%	50.9%	% Age 18-49 cases*
19.1%	19.2%	19.4%	20.2%	21.5%	23.9%	26.2%	26.2%	% Age 50-64 cases*
10.9%	11.0%	11.6%	13.0%	15.0%	19.3%	22.4%	21.7%	% Age 65+ cases*
5,442	6,184	7,091	5,989	4,095	3,114	3,495	1,855	Confirmed Hospitalizations
31.2%	29.6%	28.3%	29.1%	31.0%	35.2%	33.9%	41.7%	Confirmed % ICU
1,205	1,368	1,590	1,510	1,304	1,430	1,516	3,168	Suspected Hospitalizations
10,648	9,703	7,755	6,448	5,632	3,884	1,887	171	Deaths
945	1,185	668	468	424	448	533	118	New Deaths Past Week

* excludes unknown age case

Additional COVID-19 Numbers

California: New York Times COVID-19 Database as of August 11, 2020

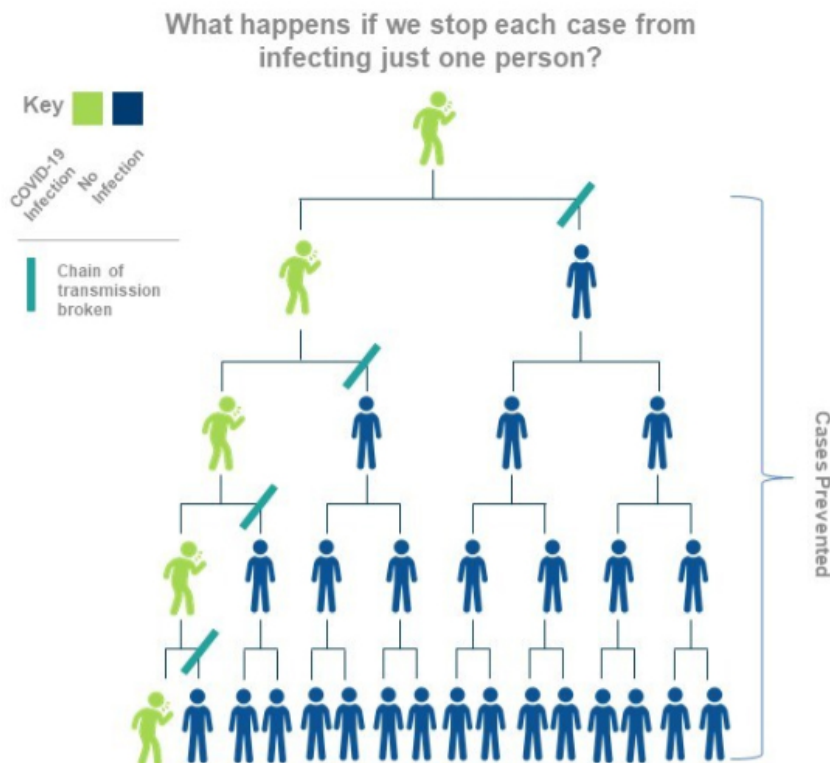
- 586,422 total cases
- 10,654 deaths
- Los Angeles County: 211,808 cases and 5,057 deaths
- Riverside: 43,376 cases and 824 deaths
- Orange County: 41,578 cases and 734 deaths
- San Bernardino County: 37,367 cases and 549 deaths
- San Diego County: 33,220 cases and 602 deaths
- Top Five Counties: 63% of cases and 73% of deaths. These counties comprise 54% of the state population.

●● News Bullets ●●

- California Department of Public Health Director Sonia Angell quit abruptly amid COVID-19 reporting discrepancies
- California’s Department of Health Care Services Must Reimburse In-House Medical Care, Says State Appeals Court
- Canyon Ridge Hospital is expanding its mental health facility for adults
- Kaiser's net income more than doubles to \$4.5B in Q2
- Molina Healthcare Announces “The MolinaCares Accord,” With a \$150 Million Initial Funding Commitment

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Kaiser Permanente Commits \$63M to Support Contact Tracing in California...continued



Preventing just one COVID-19 infection now can lead to big reductions of cases over time.

By creating culturally competent teams that can rapidly be deployed to address communities' specific conditions, Kaiser Permanente and the Public Health Institute aim to bridge that gap.

Kaiser Permanente is partnering closely with health leaders across the state to determine where to begin these efforts, based on several factors, including the burden of COVID-19 disease, adequate testing capacity, and where communities are in need or challenged by disparities. Black and Latinx communities have borne the disproportionate impact of COVID-19.

Kaiser Permanente serves approximately one-quarter of California's 39.5 million residents, with 9.2 million members in the state. Since the beginning of the pandemic, the organization has also invested in household prevention efforts to keep family members from infecting each other, implemented strict precautions in its hospitals and medical offices to protect employees and patients, and has partnered with the state on a number of efforts including its COVID-19 Testing Task Force.

These targeted funds are part of a recent, broader cash infusion in California's COVID-19 response infrastructure. In addition to the state's allocation of \$150 million in supplemental funding to support contact tracing in local jurisdictions, a group of philanthropic partners have committed \$18 million of a planned \$25 million fund targeted to support California residents who have been disproportionately impacted by COVID-19, along with community-based organizations. This pooled fund will also be implemented by the Public Health Institute.

"Kaiser Permanente's support will allow us to initiate a rapid response network that can slow the spread of COVID-19. With teams based right within a clinic, we can offer support to people from the moment they realize they may have been exposed," Mary Pittman, DrPH, president and CEO of PHI, said in a statement. "And because we are focusing on hiring from within the community, they'll be getting information and resources from people they trust, in the language they are most comfortable speaking."

"We must reduce the spread of COVID-19 and care for the communities that are being hit hardest by the virus," added Kaiser Permanente Chairman and CEO Greg A. Adams. "The recent increase of cases in California demonstrates the importance of being able to accurately track the virus and respond when and where it begins to surge in order to save lives. We are committed to helping the state deploy a robust contact-tracing strategy that will help Californians safely regain their livelihoods."

For more information, visit <http://www.kaiserpermanente.org>.

Preventing just one COVID-19 infection now can lead to big reductions of cases over time. For example, if each infected person transmits the disease to just two people, the size of the outbreak grows exponentially, with the potential for an additional 30 people to be infected by a four-step chain of transmission. In contrast, more than two dozen additional infections would be prevented if contact tracing succeeds in stopping each person from infecting just one other person.

However, getting to that point has been hampered by limitations on resources to scale up needed infrastructure and a robust workforce.

SCAN Health Plan Leverages AI Based Predictive Models to Improve Identification of High-Risk Members ...continued

In a statement, Josh Goode, SCAN chief information officer, said, "At SCAN our goal is to support our members at every stage of their journey and utilizing advanced technology, such as AI, enables us to do so on a much more proactive basis. As our members' needs evolve, the KenSci platform allows us to better interpret the needs behind the data so that we can respond with programs and services to help keep them healthy and independent."

"The volume and veracity of data opens up immense possibilities for healthcare organizations to transform the way they support their plan members," added Samir Manjure, co-founder & CEO, KenSci. "We are excited to work with SCAN and appreciate their expertise in developing these tools to meet the needs of seniors. Together, there is tremendous opportunity to impact the health of older adults."

"Data is a critical asset in modern healthcare and harnessing it appropriately provides invaluable insight," Moon Leung, SCAN senior vice president and chief informatics officer, concluded. "By leveraging KenSci's AI expertise, we believe we can utilize our data to improve health outcomes and quality of life for many of our members."

SCAN Health Plan serves more than 220,000 members in California. To learn more, visit scanhealthplan.com.

\$1B Medicare Advantage Company Alignment Healthcare Expands its Award-Winning "Senior First" Model to New Markets in California, Two Other States

Alignment Healthcare, a mission-based Medicare Advantage insurance company founded in 2013, today announced that its award-winning Medicare Advantage plans will expand into several new markets across California, Nevada and North Carolina starting in 2021, reaching more than 5.9 million¹ people eligible for Medicare, pending regulatory approval. The company also announced that it will expand its plan portfolio, including the debut of a signature virtual health plan.

Medicare's annual enrollment period begins Oct. 15, 2020.

In addition to its growing footprint, Alignment will announce several new plan options for seniors in October, pending approval — most notably a signature virtual health plan to provide seniors a safe, convenient and personalized virtual care option, alongside HMO dual-eligible special needs and HMO point-of-service plans. In select plans, Alignment will also introduce innovative new benefits for eligible members — such as pet sitting — that continue its commitment to addressing social determinants of health such as food instability, loneliness and lack of transportation that directly affect health outcomes. Last year, Alignment extended its ACCESS On-Demand Concierge program to include companion care as well as a partnership with Uber Health for non-emergency medical transportation to assist seniors who may be facing these everyday social challenges.

In recent years, Alignment has emerged in the competitive Medicare Advantage market, to showcase sustained financial growth of 40 percent year-over-year growth for the past five years. The company is doing well by doing good, providing coverage and service that have led to exceptional quality ratings, including an NPS score of 65 — nearly double that of the category² — and an overall 4.5- out of 5-star rating in 2020 from the Centers for Medicare and Medicaid Services³ for its Alignment Health Plan.

In a statement, John Kao, founder and CEO of Alignment Healthcare commented, "Lack of care coordination and lack of personalized care threaten the health of seniors in our country every day — Alignment has succeeded because we solve these critical gaps for our growing member base nationwide with our concierge-like care and service model and our powerful data engine. We've leaned heavily on these long-held differentiators — along with our serving heart culture — to provide seniors the care they deserve, especially now during the pandemic. We are well-equipped to expand this successful model to more seniors in the year ahead."

"The COVID-19 pandemic revealed just how critical Alignment's data-driven approach to senior care is in delivering a high-touch, personalized experience to our members — one that proactively identifies their needs and risk status, and empowers us to fill in key gaps in their care — regardless of where they are," added Dawn Maroney, president of consumer and markets, Alignment Healthcare. "Just as important as our geographic expansion is the work we put into expanding our plan options to cater to clinical and social needs of seniors during the pandemic and beyond."

Alignment Healthcare, headquartered in Orange, California, offers health plan options to California residents through Alignment Health Plan, and partners with select health plans in North Carolina. For more information, please visit www.alignmenthealthcare.com.

1 5.9 million as of July 2020, <https://www.cms.gov/research-statistics-data-and-systems/statistics-trends-and-reports/mcradvpartdenroldata-ma-state-county/ma-state-county-penetration-2020-07>

2 Deft Research, 2019 Medicare Member Experience Study

3 Every year, Medicare evaluates plans based on a 5-star rating system.

Aetna Health of California, Inc. Enrollment and Utilization Table as of 6/30/2020

QUARTERLY STATEMENT AS OF June 30, 2020 - Aetna Health of California Inc.

ENROLLMENT AND UTILIZATION TABLE

	1	2	3	4	5	6	7	8	9	10	11	12	13
Source of Enroll	Total Enrollees At End of Previous Period	Additions During Period	Terminations During Period	Total Enrollees at End of Period	Grandfathered Enrollees (also included in Column 5)	Cumulative Enrollee Months for Period	Total Member Ambulatory Encounters for Period - Physicians	Total Member Ambulatory Encounters for Period - Non-Physicians	Total Member Ambulatory Encounters for Period	Total Patient Days Incurred	Annualized Hospital Days/1000	Average Length of Stay	
1. Large Group Co	181,754	9,633	10,545	180,842	995	542,092	30,204	16,089	46,293	1,479	33	3.99	
2. Medicare Risk	8,410	0	322	8,088		24,507	8,958	3,026	11,984	668	327	7.42	
3. Medicare Suppl	0			0					0		0		
4. Medi-Cal Risk	0			0					0		0		
5. Individual	0			0					0		0		
6. Point of Service	0			0					0		0		
7. Point of Service	0			0					0		0		
8. Point of Service	38	2	20	20		64	0	0	0	0	0	0.00	
9. Small Group Co	20,687	1,482	1,322	20,847		61,672	1,700	1,101	2,801	89	17	3.18	
10. Healthy Families				0					0		0		
11. AIM				0					0		0		
12. Medicare Cost				0					0		0		
13. ASO				0		N/A	N/A	N/A	0	N/A	N/A	N/A	
14. PPO Individual				0					0		0		
15. PPO Small Group				0					0		0		
16. PPO Large Group				0					0		0		
17. Aggregate Contracted from Other Plans	0	0	0	0	0	0	0	0	0	0	N/A	N/A	
18. Aggregate Other Source of Enrollment	0	0	0	0	0	0	0	0	0	0	N/A	N/A	
19. Total Members	210,889	11,117	12,209	209,797	995	628,335	40,862	20,216	61,078	2,236	N/A	N/A	

Source: Quarterly Statement 6/30/2020 Aetna Health of California, Inc., Enrollment and Utilization Table



The Hospital of the Future

COVID-19 and Hospital Transformation

Wednesday - 9/2/20 - 1pm Eastern

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