

Los Angeles City Health Commission

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Outline

- Hospital Association of Southern CA
- Fast facts on behavioral health
- What does demand and access look like?
- Top diagnosis
- Barriers, impacts and opportunities
- Questions

Hospital Association of Southern California (HASC)

- Founded in 1923
- Membership: hospitals / hospital systems
 - Non-profit
 - Investor
 - Public
 - Academic
- 181 hospitals in six counties
- Advocacy
- Seminars and workshops

Mission Statement

“To lead, represent and serve hospitals, and their related organizations, working collaboratively with our members and other stakeholders to improve health and health care in the communities we serve.”



Fast Facts

Fast Facts: Nationally

- 1 in 5 adults experience mental illness
- 1 in 25 adults live with serious mental illness
- ½ Chronic mental illness begins by age 14
- ¾ Chronic mental illness begins by age 24

Source: National Alliance on Mental Illness

Fast Fact: ED Visits

- **Affordable Care Act – Year One (2011)**
 - 10.9M Emergency Department visits (statewide)
 - 2.7M Emergency Department visits (L.A. County)
- **Affordable Care Act – Year 7 (2018)**
 - 14.6M Emergency Department visits (statewide)
 - 622.4K Behavioral Health ED Visits & Admits
 - 3.78M Emergency Department visits (L.A. County)
 - 171.7K Behavioral Health ED Visits & Admits

Source: OSHPD





What does demand and access look like?

Population Comparison

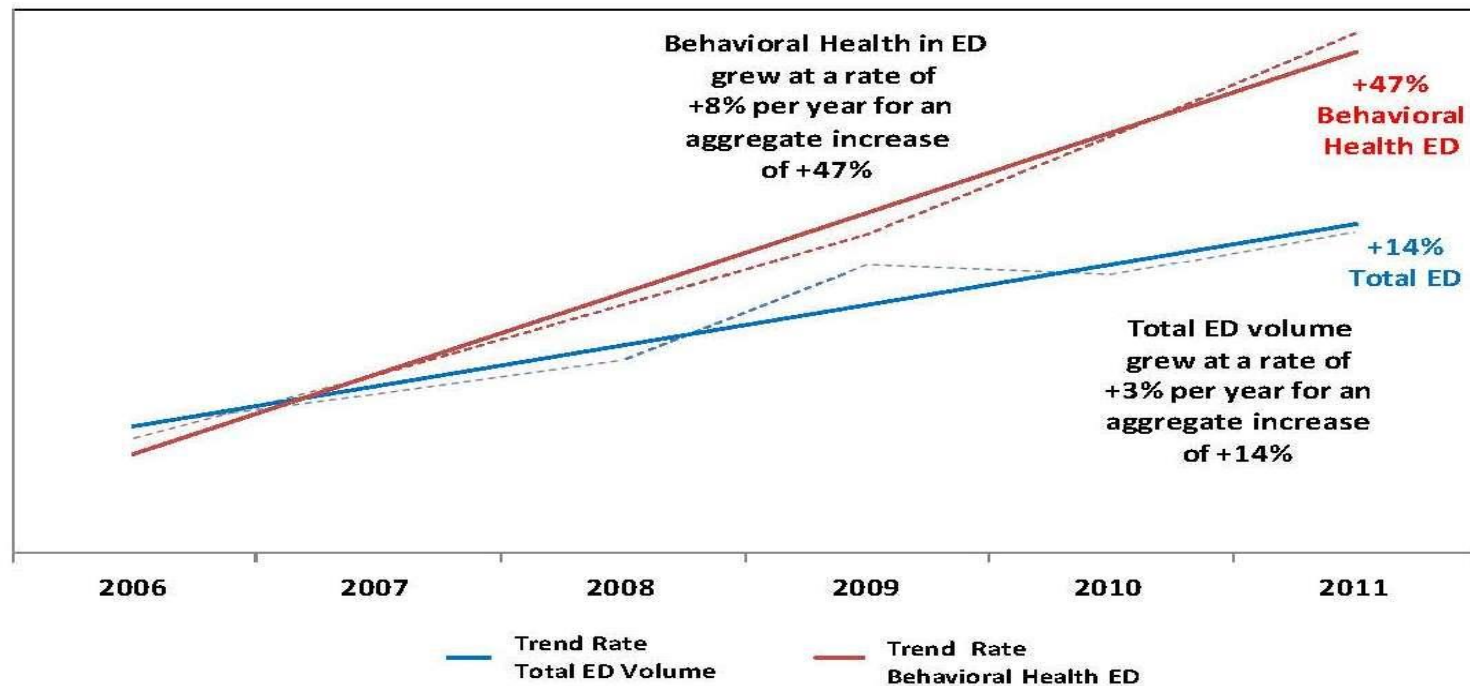
- Nation: 325,719,178
 - 1 psych bed for every 4,383 people
- 49 States: 286,182,525 (CA excluded)
 - 1 psych bed for every 4,238 people
- California: 39,536,653
 - 1 psych bed for every 5,834 people

Experts estimate need for a (minimum) 1 public psychiatric bed for every 2000 people with serious psychiatric disorders.*

Source: * Torrey, E.F., Entsminger, K., Geller, J., Stanley, H. and Jaffe, D.J. (2008). *"The Shortage of Public Hospital Beds for Mentally Ill Persons."*

Behavioral Health Demand

Behavioral Health ED visits grew at a greater rate than rate of total ED volume



Source: Stratason analysis of OSHPD ED Volume; Trend Rate adjusted for population growth

Behavioral Health Access

96 hospitals in Los Angeles County

- 35 Lanterman Petris-Short designated hospitals
(General Acute and Acute Psychiatric facilities)
- Inpatient Bed Capacity: 2,328
 - Bed Shortfall: 5,082

5 mental health urgent care centers & 1 crisis stabilization unit
(2 additional mental health centers under development)

Contributing Factors

- Growing population
 - homelessness
- Prison realignment
- Poor outpatient access and case management
- Low reimbursement
- Workforce shortage

Top Diagnosis

Behavioral Health: Top Principal Diagnosis

	2015	2016	2017	2018
Alcohol Related	35,622	36,378	36,722	36,193
Anxiety Disorder	35,863	36,297	35,648	35,715
Schizophrenia & Other Psychotic Disorders	33,360	29,086	32,334	37,766
Mood Disorder	29,204	25,623	26,840	29,095
Substance Abuse	16,810	19,252	19,613	20,800

Source: OSHPD



Barriers, Impacts & Opportunities

Barriers

Federal level

Institutions for Mental Disease (IMD) Exclusion

- Impacts free-standing hospitals, nursing facilities, or other institutions > 16 beds
- Prohibits federal Medicaid reimbursement for any person over 21 and under age 65
- No prohibition against local county funding to reimburse

Barriers

State level

Lanterman Petris-Short Act (5150, 5151 and 5152)

- Written in 1960s
- Intent to end inappropriate lifetime commitment of people with mental illness and establish the right to due process in the commitment process
- Reduce state institutional expense
- Subject to differing county interpretation

Barriers

Local level

Insufficient: housing / bridge housing / shelter

- Insufficient access to supportive services (meals, shower, clothing, transportation)
- Need for enhanced community case management
- Lack of primary care and mental health outpatient services

Impacts

- Emergency Department crowding
 - Increased 5150 holds
 - Shortage of community primary care providers
 - Difficulty w/ placement and arrangement for follow-up care
 - Lack of physical plant space, etc.
- Ambulance Patient Offload Time
- Ambulance Diversion (ED saturation)



Opportunities

- Tele-Health / Tele-Psychiatry
- Mental health field triage teams
- Expand mental health urgent care centers
- CA Department Health Care Services guidance on counties' responsibility to reimburse (Feb. 2018)



Opportunities

- Department of Mental Health: “Addressing the Shortage of Mental Health Hospital Beds” report
- Expand scope of practice for specified emergency personnel those activities necessary to assess and transport (Alternate Patient Destination)
- CalAim Waiver (2021-2025)
 - Offers states flexibility in how they operate Medicaid program
 - Seeks to make program less complex and more flexible
 - www.dhcs.ca.gov/calaim

Questions?