The California Health Care Safety Net Institute (SNI) is the 501(c)(3) partner of the California Association of Public Hospitals and Health Systems (CAPH). Since 1999, SNI has supported public health care systems to improve care by designing and implementing technical assistance programs, facilitating peer learning, identifying and sharing successful practices, and making connections for our member health care systems with other critical partners and resources.

This year, SNI is proud to celebrate two decades of programs and activities that provided the groundwork for public health care systems’ clinical and delivery system transformation, specifically the shift towards value-based care and population health. SNI’s 20th anniversary reflects a longstanding commitment to clinical excellence, innovation, and high-quality care, in partnership with safety net systems across the state.

CALIFORNIA’S PUBLIC HEALTH CARE SYSTEMS

Together, CAPH/SNI represents California’s 21 public health care systems, which include county-affiliated systems and the five University of California academic medical centers. California’s public health care systems form the core of the state’s health care safety net, providing a comprehensive range of health care services, including primary care, outpatient specialty care, emergency and inpatient services, rehabilitative services, and in some instances, long-term care.

They offer life-saving trauma, burn, and disaster-response services, provided by expert medical staff, and perform critical services for low-income and vulnerable populations, with extremely limited resources.

These systems operate in 15 counties where more than 80% of Californians live. They provide 35% of all hospital care to Medi-Cal beneficiaries and 40% of hospital care to the remaining uninsured in the communities they serve, despite accounting for just 6% of hospitals in the state.

THE ROLE OF SNI

SNI supports California’s public health care systems by informing and shaping policy, providing performance measurement and reporting expertise, and accelerating and supporting decision-making and learning, within and across member systems.
INFORMING AND SHAPING POLICY

Effective policy is grounded in evidence-based practice and the realities of ‘on-the-ground’ implementation. Through work with member health care systems, SNI has developed a deep understanding of implementation challenges and successes, and draws on that knowledge to inform the policy and advocacy work of CAPH and other partners.

These efforts are most evident in the Medi-Cal 2020 waiver – a five-year set of programs that shifts the focus of care provided to patients of California's public health care systems away from hospital-based and inpatient settings and towards outpatient, preventive, primary, and specialty care settings.

SNI worked hand in hand with CAPH and the California Department of Health Care Services (DHCS) as the proposal for the Medi-Cal 2020 waiver was developed, and continues to work with DHCS to refine and clarify the waiver's reporting structure and requirements. In doing so, SNI regularly convenes expert clinical and informatics advisory committees from across California’s public health care systems to provide input on setting benchmarks, reporting requirements, and clinical guidelines.

PERFORMANCE MEASUREMENT AND REPORTING EXPERTISE

All successful performance improvement efforts are built on a strong data collection platform. Analytic capabilities are necessary to track and improve patient outcomes, as well as to succeed in a value-based care environment where payment is increasingly tied to performance.

SNI plays a key role in helping guide California's public health care systems in developing infrastructures that will allow them to support and sustain robust data collection and analytics for the Medi-Cal 2020 waiver programs and beyond.

For example, PRIME (Public Hospital Redesign and Incentives in Medi-Cal), one of the flagship programs of the Medi-Cal 2020 waiver, is a pay-for-performance quality improvement program with eighteen possible projects, focusing on improvements in ambulatory care, high-risk populations, and efforts to improve patient care and efficiency. To help California's public health care systems meet PRIME’s extensive reporting requirements, SNI fields questions from members, partners with national experts like the National Committee for Quality Assurance (NCQA) to streamline reporting, and works with the State to develop, refine, and regularly publish a 1,000+ page metric specification manual and reporting guide.

SNI also analyzes system-level data collected through the Medi-Cal 2020 waiver’s programs to identify trends and bright spots, create opportunities to share successes and best practices, and enable members to see their performance compared to their peers.

ACCELERATING AND SUPPORTING DECISION-MAKING AND LEARNING WITHIN AND ACROSS MEMBER SYSTEMS

Each of California's public health care systems has its own unique set of circumstances, challenges, strengths, and opportunities. This information is extremely valuable, particularly for other systems on a similar journey of delivery system transformation.

To facilitate the learning process, SNI regularly brings together members by hosting workshops, webinars, and in-person convenings to share best practices and lessons learned.

SNI also facilitates peer learning groups on specific waiver programs, such as PRIME and the Global Payment Program (GPP), or more foundational capacities like data analytics and ambulatory care.

Building foundational capabilities:

CARE DELIVERY SUPPORT

Ambulatory care delivery is the foundation of a high-performing integrated health system. SNI’s care delivery support focuses on strengthening core building blocks across the delivery spectrum, including patient empanelment, team-based care, behavioral health integration, and addressing the social determinants of health through a series of workshops, peer group meetings, and webinars. SNI also identifies and shares clinical and operational practices that support successful performance for PRIME and Quality Improvement Program (QIP) metrics, such as improving depression or colorectal cancer screening rates.
DATA ANALYTICS CAPACITY
Building sound data analytics is key to successful and sustainable transformation efforts. SNI supports systems through its data analytics capacity portfolio, which emphasizes key areas such as strategy, governance, validity, and literacy. These efforts provide leaders with access to experts, webinars, and curated resources. SNI also assists members in improving the quality of their patient encounter and claims data, and the exchange of that data in partnership with health plans.

VALUE-BASED STRATEGIES
Catalyzed by current Alternate Payment Methodology (APM) requirements and mounting interest in value-based payment programs, SNI is supporting systems to advance their capacity to succeed in these new arrangements by creating venues for cross-disciplinary leaders from member systems to share progress and problem solve. Via in-person meetings, the program explores critical topics, including organizational readiness self-assessments, total cost of care data, cost accounting systems, cost-savings opportunities, progress in shared savings arrangements with health plans, and risk stratification.

2019 Key Programs and Activities
Supporting success in waiver and state-wide programs:

GLOBAL PAYMENT PROGRAM
The Medi-Cal 2020 waiver’s Global Payment Program provides incentives for California’s public health care systems to deliver care for the remaining uninsured in more innovative and effective ways, including tech-based visits, group classes, and electronic referral and consultation with specialists. SNI supports California’s public health care systems in tracking and reporting these services through technical assistance for encounter data reporting, standardized coding for non-traditional services, and publication of a reporting guide. SNI also provides opportunities for GFP leads to share successful practices in reporting and program implementation.

PRIME
PRIME, part of the Medi-Cal 2020 waiver, is a pay-for-performance delivery system transformation program. SNI provides hands-on support to PRIME managers and leaders by publishing in-depth reporting guides and manuals, offering one-on-one targeted technical assistance, and hosting a series of webinars, workshops, and conference calls to address reporting questions. In addition to technical support, SNI identifies and shares successful operational and clinical practices for the six required PRIME projects as part of its care delivery work.

WHOLE PERSON CARE
Whole Person Care (WPC) is a first-of-its-kind waiver initiative aimed at improving the health of high-risk, high-utilizing patients through the coordinated delivery of services from across the community, including physical health, behavioral health, housing support, food stability, social services, and others. SNI collaborates closely with the State and other key partners to support successful WPC implementation. This involves tracking challenges in program implementation, identifying promising solutions, and spreading those lessons across pilots through direct technical assistance and partnership with the DHCS learning collaborative.

QUALITY INCENTIVE PROGRAM
The Quality Incentive Program is a pay-for-performance program for California’s public health care systems that converts funding from previously existing supplemental payments into a value-based structure, designed to bring systems into compliance with the federal Medicaid Managed Care Rule. Systems must report on at least 20 measures from across four domains: primary care, specialty care, inpatient care, and resource utilization. SNI collaborates closely with the State and NCQA to develop the reporting infrastructure for QIP and provides improvement support through its care delivery work.

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• California Health Care Foundation
• Kaiser Permanente Community Benefit, Northern and Southern California Regions

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