

Transforming Healthcare Delivery in the Midst of a Pandemic



2020 Annual Conference

Health Reimagined

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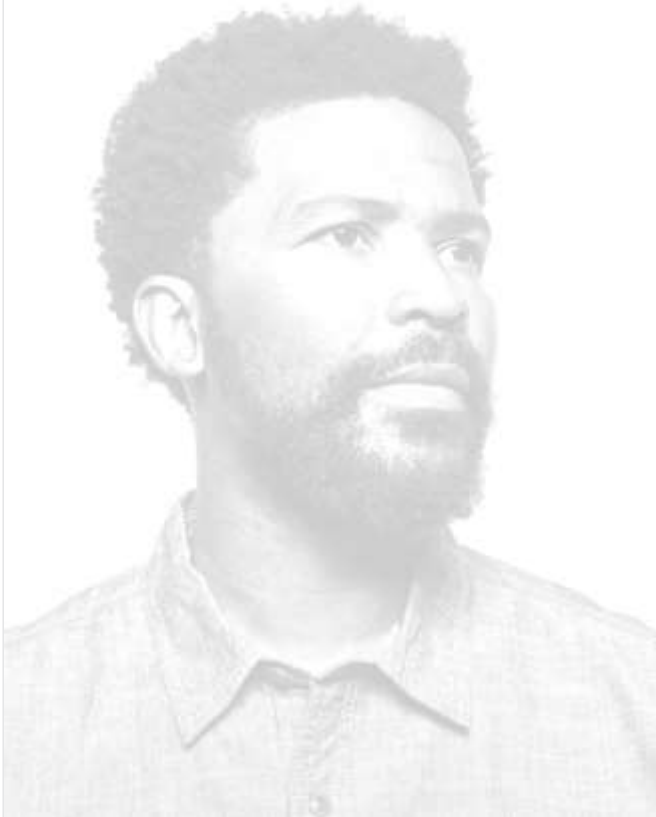
Healthcare and Community Health Transformation



The need for transformation

Today's healthcare system is overwhelmed by:

- Unsustainable cost
- Patient & provider dissatisfaction
- The need to improve & incentivize health outcomes
- Individuals & employers spending more on healthcare each year
- Inequities



Blue Shield of California's solution is
Health Reimagined.

Philosophy and 2020 goals

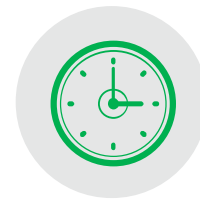
Relentlessly pursue fundamental changes in how healthcare is delivered to achieve the quintuple aim



1. Improve whole population health
2. Enhance patient care, experience & empowerment
3. Improve provider wellbeing
4. Reduce cost of health care
5. Increase health equity

Payment models at-a-glance

The current health system is steeped in financial waste and often results in a poor member and provider experience. We are changing that through our innovative approach to reimbursing and incentivizing primary care and specialty care providers.



Benefits Achieved

Revenue and support to spend time required to conduct shared decision-making, holistic health screenings, and collaborate on wellness and treatment plan options

Flexibility and resources for providers to deliver services to patients as they see best

Pay for value added payments to support coordinated care and accountability for patient-centered outcomes

Financial incentive to the treating provider for exceeding specific care quality measures

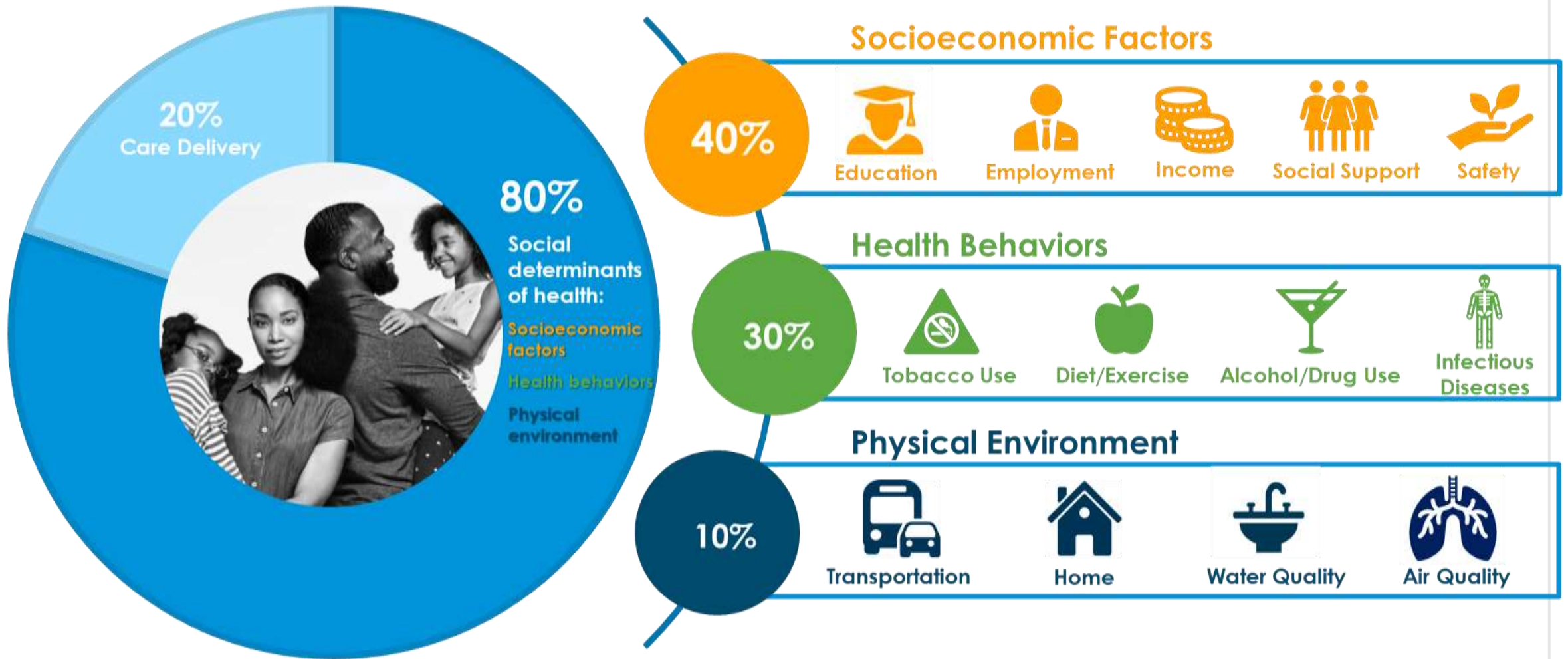
Eliminates time and money wasted on unnecessary or duplicative services that do not improve health

Ensures value & viability of enhanced reimbursement structures with minimal administrative burden

High-quality, lower-cost care creates an exceptional member and provider experience

Ultimately achieves optimal health and well-being for all Californians

Impact of social determinants of health



CHAs Connect the Patient, Practice, and Community

CHAs develop a holistic understanding of patients' health and social needs, help them navigate the medical system, and provide referrals and connections to community resources to address social determinants of health.

The Role of the CHA



Extra Support

The CHA's role is to listen and be present for the patient.

- Patients are thankful for the extra help.
- Even support with small tasks can mean a lot to the patient.



Knowledge and Experience

CHAs bring their knowledge, personal experiences, and background in community and social work

- Shared experiences create trust and empathy
- CHAs apply creative solutions to support challenging cases
- CHAs contribute to community resource building to improve patient referrals.



Respond to Current Events

COVID-19 created new needs among providers and patients that may present new opportunities for support by CHAs.

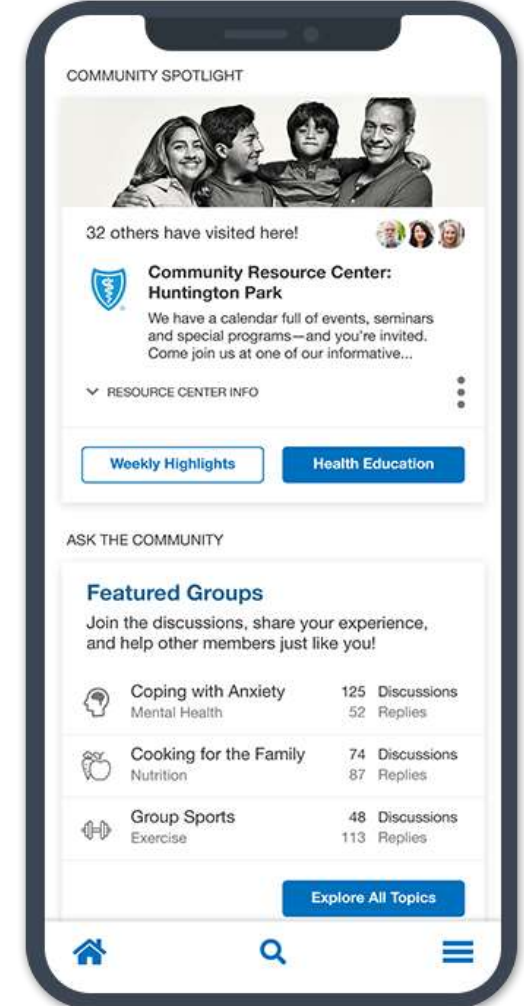
- CHAs have adapted their communication approaches with patients and are actively outreaching to organizations to find resources during COVID-19.

Community Health Advocates in Action

- ✓ **CHAs forge relationships with community organizations including local food banks**
- ✓ **CHAs encourage patients to attend classes, such as nutrition classes held at the provider practice, learning nutrition skills around diabetes management**
- ✓ **CHAs are enabled with high-tech, high-touch tools to improve integration and connectivity**

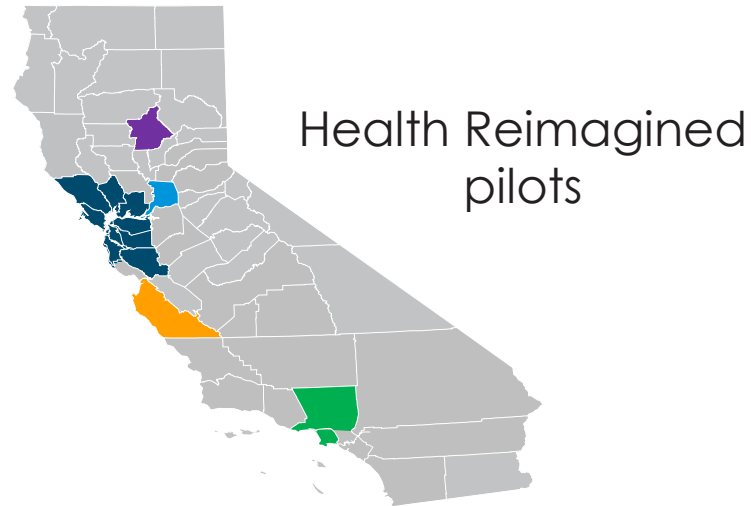
Holistic health platform

To optimize whole-person health and address unmet social needs, we are building a viable, integrated holistic health platform that enables community health advocates with data insights and information to understand local assets, needs and gaps to health and new financial mechanisms to pay for health and well-being.



Innovation goes local

We're partnering with employers and communities, focusing on what's right for each local health ecosystem.



BUTTE

- Virtual care
- Virtual assistant
- Virtual consults
- Community health advocates
- Innovative primary care payment model

SACRAMENTO

- 6 payment models
- Community health advocates
- Free transportation
- Shared decision-making
- Virtual care
- Virtual assistant

LOS ANGELES

- 3 payment models
- Community health advocates
- Shared decision-making
- Virtual care
- Community health solutions

MONTEREY

- Altais operates primary health clinic
- Community health advocates
- Innovative primary care payment model

BAY AREA

- Altais: Brown & Toland Physicians

Early feedback validating our initial solutions

2,092+

Referrals made for 907 patients seen by 14 community health advocates at 9 practice sites in Sacramento, Monterey, Butte

28

Community health advocates throughout the state, **plus** 22 more trained through Blue Shield bootcamp

824

Reports created on our Neighborhood Health Dashboard to assess social determinants of health by ZIP code since September. This publically available resource also earned us 1st place for the DHCS' Innovation award for 2020

3,664+

Virtual visits conducted across 9 providers at 3 practice sites in Butte and Sacramento counties

93%

Patients who completed and would recommend the shared decision-making birth planning module

94%

Members responding positively to their experience with real-time claims

COVID-19 relief efforts

Blue Shield is providing relief to communities across California during the pandemic, including:

1. Virtual health services
2. New funding programs to help alleviate the financial burden of the pandemic for our providers
3. \$350K from Blue Shield of California Promise Health Plan to support Medi-Cal members & providers during the crisis
4. 3,500 personal protective equipment (PPEs), such as face masks, gowns and sanitizers to seven clinics that primarily serve Blue Shield Promise Health Plan Medi-Cal beneficiaries in the Los Angeles area
5. \$100,000 in grants from Blue Shield Promise Health Plan to distribute food this summer to support the health needs of thousands of individuals and families in Los Angeles and San Diego counties
6. Development of a new digital tool with San Francisco-based company GYANT to help hospitals triage the influx of patients seeking advice on COVID-19 or other medical care
7. Bank of America provided Blue Shield of California a \$50 million line of credit to provide support to healthcare providers and hospitals dealing with economic pressures of the COVID-19 pandemic
8. Blue Shield of California Foundation provided \$6.8 million in grants to communities affected by the COVID-19
9. Blue Shield leaders have played critical roles with state officials, academics, and business leaders in helping the state expand its testing capabilities, which is an essential element to end safer-at-home policy



Health Reimagined Sacramento Pilot: Collaborative Partnership

Health Industry Collaboration Effort, December 2, 2020

Amir Sweha, MD

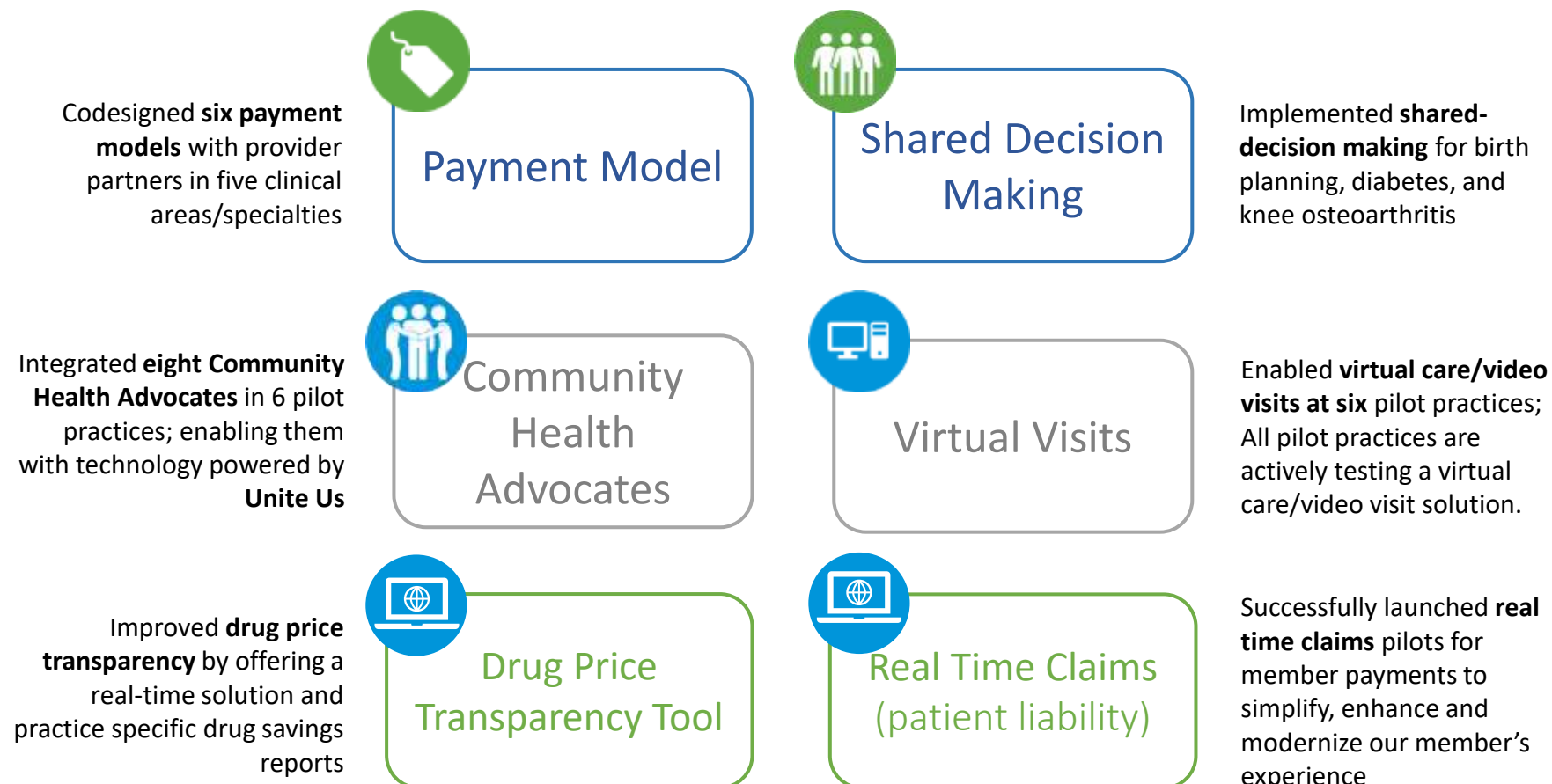
Chief Medical Officer

Hill Physicians is the Largest Network of Independent Doctors in Northern California



- ✓ Independent Physician Organization (IPA) founded in **1984**
- ✓ **4,800+** primary care physicians and specialists across 11 counties
- ✓ **600+** PriMed employees providing support to physician network and members
- ✓ **14** health plan partners
- ✓ **380,000+** members from Commercial HMO, PPO, Medicare Advantage, Medi-Cal, Full Risk plans

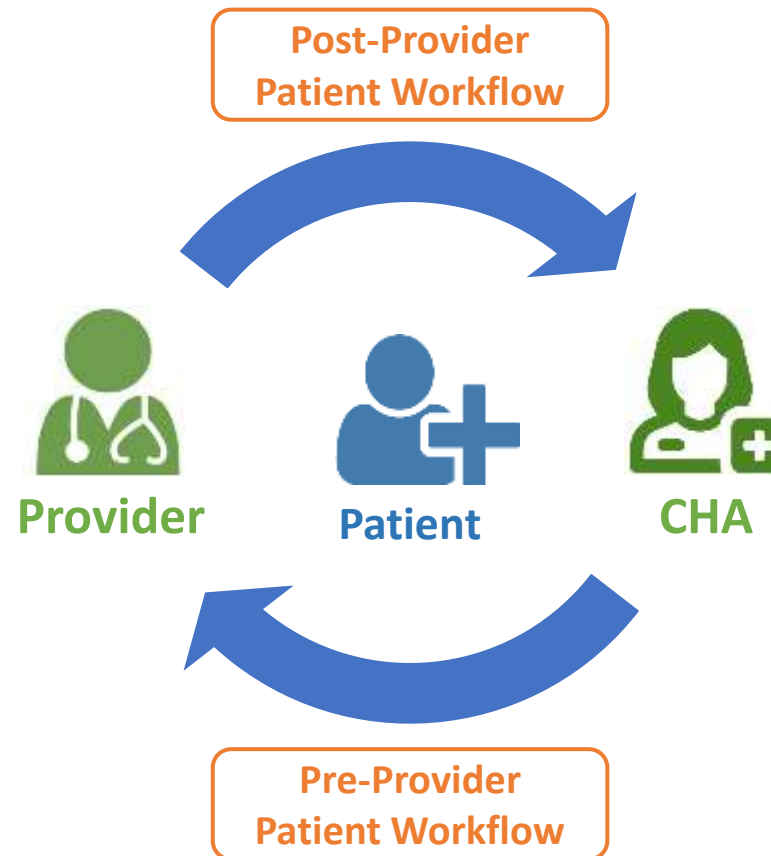
Sacramento Pilot Accomplishments



Our Vision for CHA Program: Improve Patient Outcomes by Addressing Clinical *and* Social Needs

Program Overview

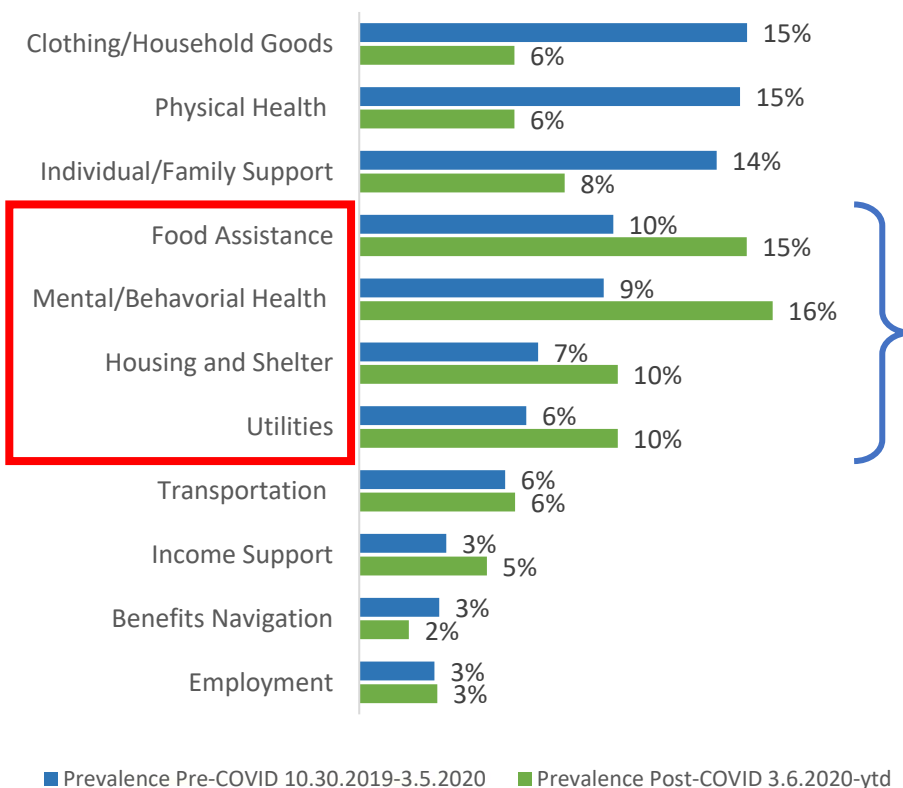
- 1** Community health advocates (CHAs) embedded **in-clinic** to address social needs for **all patients**
- 2** Coverage is provided across seven **independent practices**: 4 primary care and pediatrics, 3 specialty care
- 3** CHA works with clinic staff to 1) **screen** for social needs, 2) **connect** to community organizations and 3) **follow-up** to ensure needs are met



Pandemic Impact on CHA Program: COVID

Caused Significant Social Needs Shifts

Social Needs Categories Addressed through the CHA Program Before and During the COVID-19 Pandemic



Examples of CHA Support in Key Areas of COVID Impact

- **Food Assistance:** connect patients to food lockers, free meal delivery; consistent need seen across *all* practices
- **Behavioral Health:** counseling and supportive services; acute need for adolescents and families in *pediatrics*
- **Housing & Shelter:** place patients in temporary and permanent housing; largest need in *primary care*
- **Utilities:** secure access to utilities for patients with medical equipment; common issue in *pulmonology*

Pilot Practice's Response to Health Reimagined

"Helping us to embrace the total patient."

"Has really transformed our practice."

Summit Orthopedic Specialists

The Community Health Advocate is helpful to the practice in addressing patients' non-clinical needs ... "a time saver."

Dr. Kramer

"It's been a very fulfilling experience. Before [we had WiserCare], the birth plan was more focused on logistics, but not on the patient's feelings -- the care plan really allows us to dive into the feelings of the patient. Sometimes it brings up fears and pre-conceived notions about the process or fears from previous pregnancy and creates an opportunity to discuss with the patient. The patient becomes more open."

Capital Ob-Gyn

"[having a CHA] has opened up a whole new path. We were unaware of the depth of social needs some of our patients have."

Would be difficult for the practice to fund a CHA because often the "yields are not reimbursable, but I think he saves money in the long run ... Our CHA goes out to find the patients in most need."

Associated Family Physicians



Community Resource Center

Francisco Oaxaca

Chief, Communications & Community Relations

L.A. Care Health Plan

Susan Fleischman, MD

Chief Medical Officer

Blue Shield of California Promise Health Plan

Health Industry Collaboration Effort, December 2, 2020

Agenda

1 Community Resource Centers Partnership

2 Blue Shield Promise Telehealth Learnings

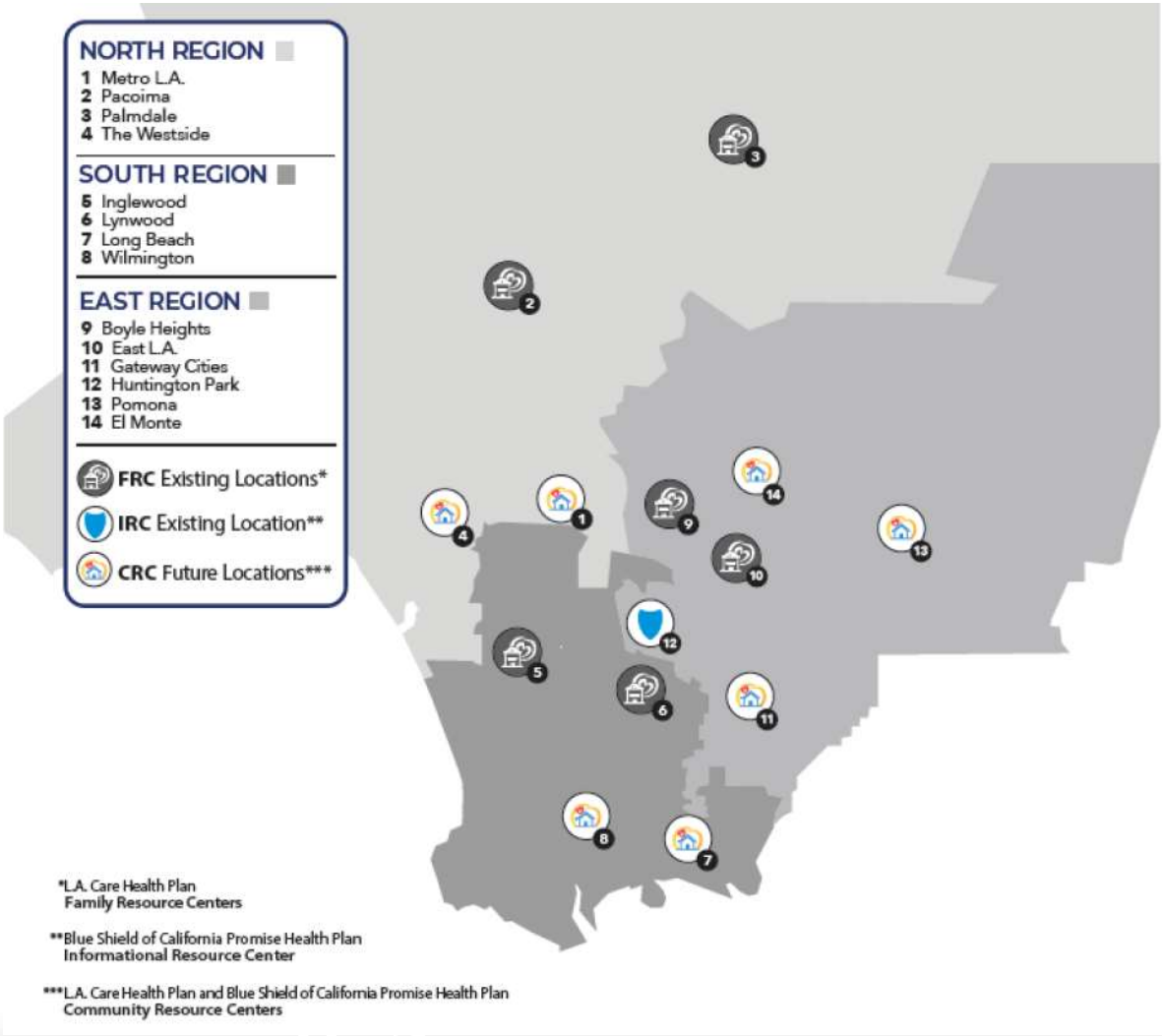
3 Q & A

4 Conclusion of Presentation

Community Resource Centers (CRC) Partnership Overview

- L.A. Care and Blue Shield Promise partnering to open 14 co-branded Community Resource Centers (CRCs) by end of 2021 in Los Angeles County
- Joint investment of nearly \$150M over five years to open and operate the centers
- Open to whole community, not just health plan members
- Function as one-stop shops for plan members, focusing on member engagement, navigation, care management, provider partnerships and retention
- Serve as a community hub that integrates technology and innovation to build active, healthy and informed communities

CRC Locations Planned



CRCs Update: Launch, Closure, Reopening

- Five CRCs launched as of November 2020 with additional 9 planned for 2021
- Current sites include: East LA, Lynwood, Metro LA, Palmdale, Pomona
- CRCs were closed to the public in March because of pandemic
- CRCs reopened October 1, 2020 to the public on appointment-only basis
 - Appointments available via online, telephone or walk-up
 - Required local and statewide COVID guidance implemented, including social distancing
 - Piloting limited hours M-W-F from 9 am to 5 pm

CRCs Programming

Services at Reopened CRCs

Service & Description	Eligibility	Virtual	In-person*
Customer Care: Assistance with health plan member services	Members	X	X
Care Planning: Assistance with developing care plan to achieve target health outcome	Members	X	
Telehealth: High-speed Wi-Fi connection in private consultation room for telehealth visits	Members	X	X
High Speed Wi-Fi: No-cost Wi-Fi connection to improve community access to telehealth	All	X	X
Community Resource Linkage: Assistance with connection to available resources	All	X	
Enrollment Assistance: Application assistance for Medi-Cal and public health programs	All	X	X
Virtual Classes: On-demand health classes via CRC YouTube Channel	All	X	
Pop-Up Events: Drive-thru or walk-up events (e.g. food pantry, flu shot)	All		X

*Contingent on state and local public health guidance with appropriate precautions in place.

Telehealth Access at CRCs

Background

- Demand for telehealth has increased by over 30% since pandemic in March
- Robust mobile data plan remains a barrier to telehealth access for low-income communities
- CRCs piloting telehealth access at each site

Piloting Telehealth Access

- Members have access to Telehealth Suite at CRCs
 - Suite includes equipment (e.g. monitor, video camera, laptop, mic, etc.) for members to access telehealth platform used by both L.A. Care and Blue Shield Promise
 - Technical assistance provided by staff at CRCs
- General public provided access to secured, high-speed Wi-Fi connection in private consultation room to access telehealth services using their own mobile devices
- Interest from some provider partners to leverage CRCs as telehealth access points for patients

From CRCs to Health Plan: Blue Shield Promise Telehealth Learnings

Telehealth Learnings Overview

- Demand for telehealth has risen sharply since March among Blue Shield Promise members
- Trend suggests that the demand for telehealth will remain high during pandemic
- Telehealth has become significant mode, but it hasn't entirely replaced all face-to-face visits
- Engagement of members and providers about telehealth access is important success factor
- We now have some preliminary insights into strengths and limitations of telehealth

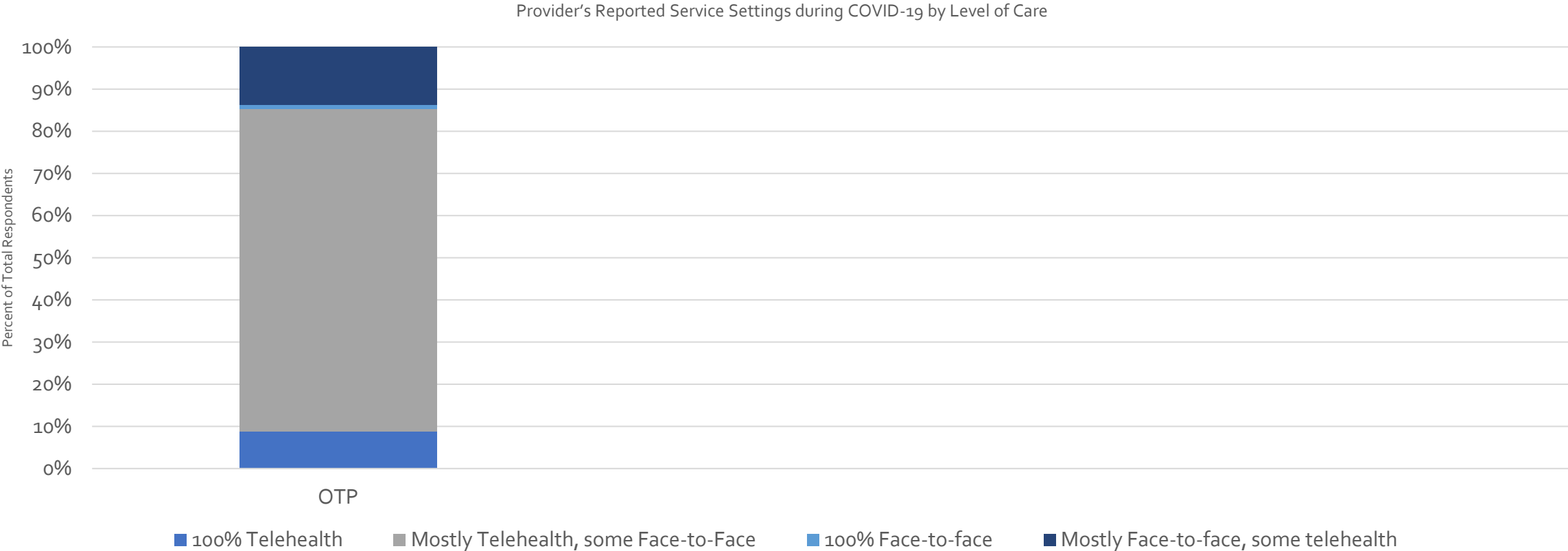
Member Engagement

Member Website	Information about how to access telehealth services is posted on our website
Newsletter	Shared information about how to access telehealth services in the Cal MediConnect and Promise Medicare third quarter newsletter
Customer Care Inbound Calls	During inbound calls agents promote to members they have the option to use Telehealth Services.
High Risk COVID-19 Outbound Calls	Agents share information regarding telehealth services during member outbound calls
Community Resource Centers	Offer free Wi-Fi for telehealth appointments at CRCs – located in Pomona, Lynwood, East L.A., Palmdale, Metro LA

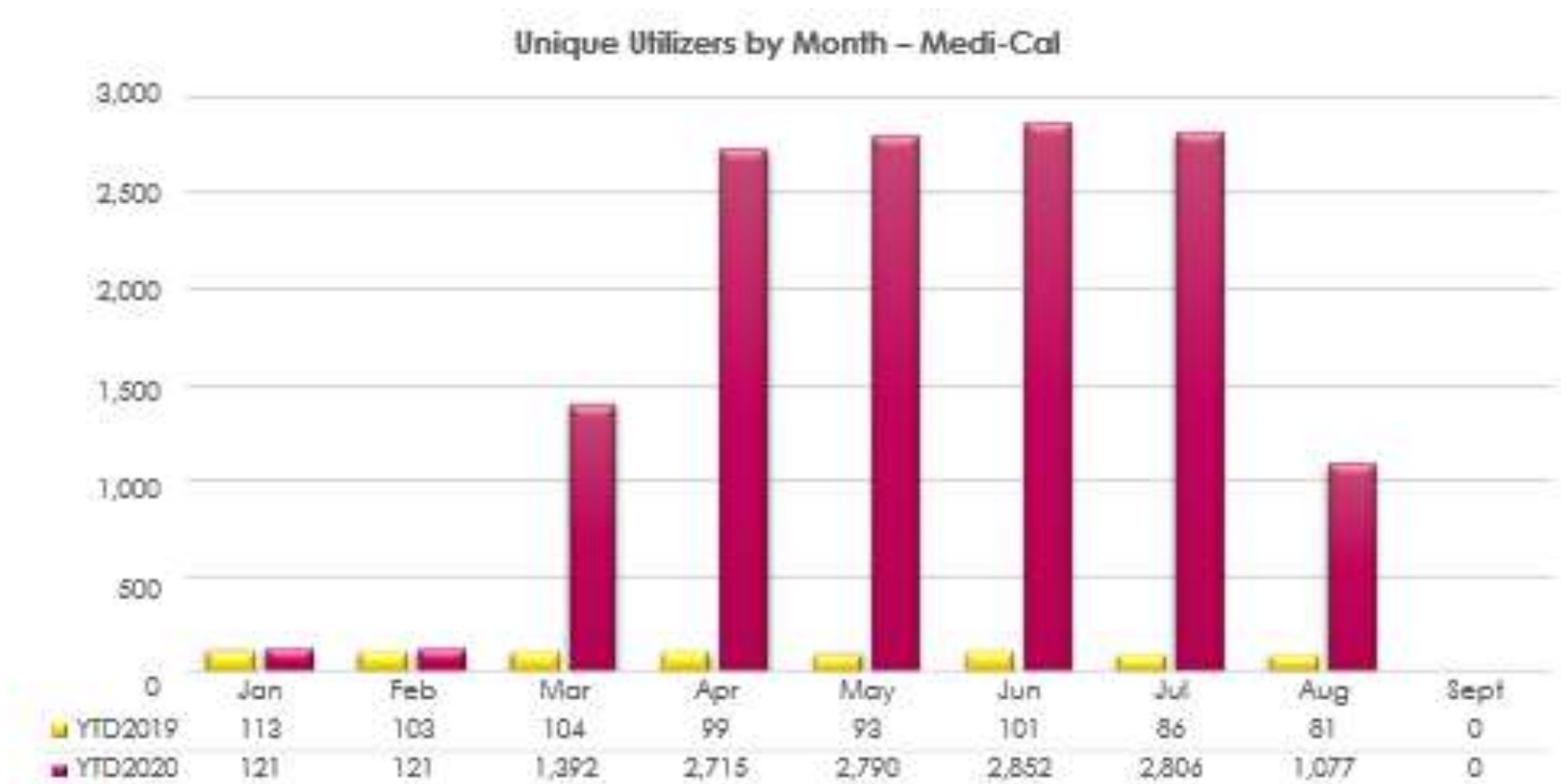


Provider Telehealth Use Survey

Nationally, Beacon seeing providers delivering services via telehealth and some face-to face.



COVID Telehealth Update – Unique Utilizers



Members and Providers Adapted Quickly

Medi-Cal

	% of Outpatient Sessions via Telehealth YTD 2019	% of Outpatient Sessions via Telehealth YTD 2020
Jan	3.97%	4.00%
Feb	3.60%	3.98%
Mar	3.63%	32.22%
Apr	3.72%	76.70%
May	3.36%	79.73%
Jun	4.32%	78.34%

Promise Medicare – Telehealth benefit added in March 2020

	% of Outpatient Sessions via Telehealth YTD 2019	% of Outpatient Sessions via Telehealth YTD 2020
Jan	0.00%	0.26%
Feb	0.00%	0.00%
Mar	0.16%	21.31%
Apr	0.31%	68.58%
May	0.00%	60.71%
Jun	0.63%	69.42%

CMC - Telehealth benefit added in March 2020

	% of Outpatient Sessions via Telehealth YTD 2019	% of Outpatient Sessions via Telehealth YTD 2020
Jan	0.00%	0.64%
Feb	0.00%	1.33%
Mar	0.49%	19.74%
Apr	0.00%	53.21%
May	0.00%	58.96%
Jun	0.00%	66.94%

Key Learnings

Providers like about Telehealth:

- Telehealth now accounts for almost **80%** of mental health visits
- While previously not in the top five, Generalized Anxiety Disorder is now the most common diagnosis
- Easier for parents and for people who work to access care
- Clients feel more comfortable being expressive (crying or being loud) because they aren't worried about disturbing others in office
- Can easily work with clients that are sick or those with mobility issues
- Fewer no shows, adherence to treatment improved significantly

Telehealth Challenges

- Difficult to engage younger children
- Difficulty being open and honest during session with other family members around
- Technology is challenging for some clients
- Challenges if member has special needs (i.e. hard of hearing, need interpreter) or have very acute symptomology