Financial Problems Force Palm Drive Hospital to Close
Rural hospital one of many small facilities deep in debt

Despite eleventh-hour efforts to keep it open, Palm Drive Hospital became the first California hospital to close in 2014 and could be a bellwether for future hospital closures.

The 37-bed hospital located in Sebastopol shut down on April 28 after years of financial problems. “It’s a very sad day. This is a wonderful hospital,” said Palm Drive CEO Thomas Harlan, who came out of retirement in 2012 to help the hospital restructure.

In a statement posted on its website, Palm Drive officials said they were “sadened that we will be unavailable to meet inpatient and emergency healthcare needs in the future” but that “it is our intent to develop new outpatient services and more information on those services will be available in the coming months.”

Some physicians and members of the Palm Hospital Healthcare District floated proposals to keep the hospital open at an emergency meeting on April 23. They included creating a scaled-down version of the hospital that would include several inpatient beds and an emergency department to serve Sebastopol, a town of 7,500 residents located in Sonoma County about 50 miles north of San Francisco.

In the end, board members said the hospital had no money left to fund operations and had to close. In mid-April, it acquired a $450,000 loan from Sonoma County to fund operations through the end of the month. Palm Drive recently filed for Chapter 9 bankruptcy protection.

Palm Drive had been searching for a larger partner to merge with. In 2011, it entered into discussions with Adventist Health about a potential merger or affiliation but the two sides were unable to reach an agreement. Adventist formed an affiliation with nearby St. Helena Hospital in 2008 that helped make the 25-bed hospital more financially secure after years of debt problems.

Other small hospitals in the state are having problems that could force them to close as well. Doctors Medical Center in San Pablo is waiting on the results of a mail-in ballot that asked healthcare district voters to approve a parcel tax of 14

« CONTINUED ON PAGE 2 »
Financial Problems cont.

Anthem Blue Cross led all insurers with nearly one-third of the 1.395 million state residents who signed up for insurance during the six-month open enrollment period on Covered California. Anthem enrolled 425,058 new members for a 30% market share, edging out Blue Shield of California, which had 381,457 enrollees for a 27% share. Health Net of California had the third-largest share with 19% and Kaiser Permanente finished fourth with a 17% market share. Anthem, Health Net, Blue Shield, and Kaiser combined for 94% of the market for new enrollees during open enrollment, which ended March 31.

Seven other insurers selling plans on the exchange accounted for the remaining 6% of new enrollees, led by L.A. Care Health Plan with a 3% share of the total market and Molina Healthcare with about 1%.

The Assembly Committee on Health approved a bill that would create more residency slots for primary care physicians in underserved areas of the state. Assembly Bill 2458 authored by Susan Bonilla (D-Concord) would add approximately 300 new residency slots in California for medical school graduates who need to complete three years of primary care residency. “We have a shortage of primary care physicians in 74% of our counties,” said Bonilla. “In order to train physicians, we need more residency slots.” Bonilla said the program, which would cost $25 million in its first year and nearly $3 million per year after its rollout, is needed to

State Distributes $75 Million for Mental Health Crisis Beds

Grants are first round of funding in effort to add 2,000 beds

The state awarded 28 counties a total of $75 million in grants to create programs for mental health crisis services as part of a new effort formed this year.

The grants were awarded by the California Health Facilities Financing Authority to finance new programs that will add 827 residential mental health crisis stabilization beds in the state along with hundreds of staff members for mobile support teams. The programs are part of the Investment in Mental Health Wellness Act of 2013, a bill approved last year to address a shortage of mental health crisis beds and other psychiatric services in the state.

“These programs will save lives, help keep mental health patients out of jails and hospital emergency rooms, and prevent needless suffering,” said state trea-
help California attract and retain more primary care physicians. AB 2458 will be considered next by the Assembly Committee on Appropriations.

Sophia Chang, MD, has been appointed vice president of programs at the California HealthCare Foundation (CHCF). In her position, Chang will lead program and grant-making efforts for CHCF. "Sophia brings with her a deep understanding of philanthropy, the medical system, and CHCF itself," said CHCF president Sandra Hernandez. "She needs no ramp-up time to help drive the foundation forward in these exceptional times." Chang most recently served as director of the Better Chronic Disease Care program at CHCF. Prior to joining CHCF, Chang served as director of the Veterans Health Administration’s Center for Quality Management and Public Health and as director of the HIV/AIDS Program for the Henry J. Kaiser Family Foundation.

The Senate Health Committee tabled a bill that would have added two seats to the Covered California board of directors and required that the seats be reserved for health information technology experts or specialists in marketing. Senate Bill 972 authored by Norma Torres (D-Pomona) was drafted in response to technical problems that forced the Covered California website to shut down several times during open enrollment and to shortfalls in signing up Latino residents. Opponents of the bill said the health exchange does not need a larger board, which currently has five directors.

State Sen. Darrell Steinberg (D-Sacramento) who authored the Investment in Mental Health Wellness Act of 2013, said the state needs more mental health crisis beds and other services to address overcrowding in emergency departments and state mental hospitals.

"More crisis residential beds and mental health crisis teams can make a difference between recovery and the downward spiral into severe mental illness," said Steinberg. He added that the state’s prison system and hospital emergency departments are "full of people who end up there because they were arrested or hospitalized during a mental health crisis and had nowhere else to go."

A report released in April by the Treatment Advocacy Center and the National Sheriffs’ Association found that 88% of 4,652 beds located in four state psychiatric hospitals are occupied by mentally ill people who are prison inmates, leaving other patients with few options for inpatient care. An analysis of Senate Bill 82, which created the Mental Health Wellness Act, found that 20% of people with mental health disorders visit an emergency department at least once a year and that 70% of people taken to emergency departments for psychiatric evaluation could be transferred to residential crisis care beds for care. —DOUG DESJARDINS

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Study Finds Ambulance Transfer Delays Increased 30% in Los Angeles
Hospital overcrowding cited as key problem

Several state agencies are working on a plan to better coordinate emergency care in Los Angeles following a report that showed ambulances were delayed more than 36,000 hours last year waiting to admit patients into emergency departments.

The report, prepared by Gregory Reynar, assistant chief of the EMS division for the Los Angeles Fire Department, presented to the Los Angeles Fire Commission in April found the delays were attributed primarily to overcrowding and a shortage of open beds in the ED. Ambulance crews are allotted 20 minutes to drop off patients at hospitals and leave the facility; any time beyond 20 minutes is considered a delay.

The report noted that ambulance crews in 2013 "documented their inability to transfer patient care due to no open emergency department beds for a combined 36,627 hours, which represents a 30% increase in time spent in hospital EDs for this reason compared to the previous year."

While the delays increased significantly in 2013, they are not something new. The report noted the department "has made efforts to reduce the impact of hospital offload delays with various levels of success for at least 10 years." During the past few years, emergency officials have been working to reduce those delays with the Hospital Association of Southern California, the California Hospital Association, and the California Emergency Medical Services Authority.

"It's not a problem in every community or at every hospital [in the state], but for a variety of reasons, it's been a problem for the Los Angeles area," said BJ Bartleson, vice president of nursing and clinical services for the California Hospital Association. "And it's not just about the ED," she added. "It's about how hospitals discharge patients, whether they have behavioral health staff, and a number of other reasons."

When hospitals don't have behavioral health departments, patients who arrive in EDs with mental health issues are confined to an ED bed until they can be released or transferred to a treatment facility, a process that often takes hours. Another issue in some areas is a lack of alternative care resources. "If there are no urgent care centers nearby, people who don't really need to be there end up in the emergency department," said Bartleson.

A task force of hospital and emergency service executives is compiling a list of best practice guidelines that will be part of a new resource tool kit for reducing wait times for ambulances. Bartleson said the tool kit will be distributed to hospitals and emergency service agencies within the next month. —DOUG DESJARDINS
**IN BRIEF CONTINUED FROM PAGE 4**

**Consumer Watchdog**, which is sponsoring the ballot measure, said that “insurers are spending tens of millions of policyholder dollars” in a campaign to defeat the measure that will be on the November 2014 ballot.

› L.A. Care Health Plan CEO Howard Kahn received the first ever Safety Net Hero award created by the Saint John's Well Child and Family Center. The award, from Los Angeles-based Saint John's recognizes individuals who help increase access to care for low-income and undervsed residents in Los Angeles County. “Howard's visionary leadership and steadfast commitment to the underserved has made L.A. Care a champion for safety-net providers and the communities they serve,” said Louise McCarthy, president and CEO of the Community Clinic Association of Los Angeles County. “It is an honor to partner with L.A. Care as we work toward our common mission to provide high-quality, affordable healthcare for those who need it most.” L.A. Care is a public health plan with more than one million members in Los Angeles County.

› The California Hospital Association (CHA) submitted 1.3 million signatures to state election officials last week for a ballot initiative that would restrict how hospital tax fees are used. The signatures were gathered to qualify the Medi-Cal Funding and Accountability Act of 2014 as a ballot measure for November 2014. The CHA and other groups supporting the initiative need at least 805,000 valid signatures of state voters to qualify the initiative. The hospital tax is a self-taxing mechanism that allows the state to receive matching federal funds to help subsidize safety-net hospitals and healthcare programs for low-income children. If approved, the ballot measure would prevent the state from using those funds for anything other than healthcare. In recent years, the state has channeled some hospital tax fees into its reserve fund. “The Act protects taxpayers and patients by prohibiting funds from being diverted to purposes that are not healthcare related,” said Donald Kearns, MD, acting president and chief medical officer for Rady Children's Hospital in San Diego, which supports the ballot measure.

› A new report from the Bay Area Council suggests that expanding the role of nurse practitioners in California would increase access to care in rural communities and generate significant cost savings. “Giving nurse practitioners the ability to provide primary healthcare is the least expensive, most effective way to provide Californians with the healthcare they’re seeking,” said Micah Weinberg, an analyst for the Bay Area Council Economic Institute. “California is the most populous state and has been a leader in the implementation of healthcare reform but the state ranks 23rd in the number of primary care physicians per resident.” The study suggests that state officials should consider expanding the scope of service for nurse practitioners to fill gaps in access to care in areas with a shortage of primary care physicians.

**EVENTS**

May 7. National Readmission Prevention Collaborative. Anaheim Expo Center. An educational and networking conference for physicians and hospital executives focused on best practices for reducing hospital readmissions. For more information or to register, please visit http://www.national-readmissionprevention.com

May 20. California Hospital Association Consent Law Seminar. Hilton Sacramento Arden West. One-day seminar focused on simple and complex consent law situations and emerging issues that can impact patient care and consent law. For more information or to register, please visit http://www.calhospital.org/consent-law


June 19-20. Using Data to Improve Maternity Care in California. Sacramento Convention Center. A two-day conference focused on improving health outcomes for pregnant women and newborns who are enrolled in the state’s Medi-Cal program. Sponsored by the California HealthCare Foundation. To register, please visit http://www.chcf.org/events/2014/symposium-maternal-june

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Qualifications: Master’s Degree in Business or Health Administration or other related field preferred. Minimum 6 years contracting or related health care experience required. Prior management experience preferred.

Please send resumes to Claudia Mares cmares@chla.usc.edu or call 323-361-7693

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The Manager, Contracts and Insurance is responsible for negotiating, managing and evaluating contractual relationships with health plans, medical groups / IPA’s hospitals/health care systems, government programs and other payors, as assigned. Serves as back up to Director for Centers of Excellence transplant programs contracting. Analyze cost and utilization data to develop pricing packages for hospital programs. Review, process, and analyze contract language for operational impact and ensure compliance with Joint Commission and other regulatory agencies. Manages Contract Specialists, assists Director and Associate Vice President in the development and implementation of department operational goals and on various special initiatives.

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