**TOP STORIES**

**Study Suggests Safety-Net Hospitals will be Hard Hit by Federal Cuts**

Hospitals could face $1.5 billion shortfall by 2019

A new study predicts California safety-net hospitals could be hit hard by a program that will reduce federal subsidies to hospitals based on the assumption that uncompensated care costs will decline with the arrival of federal healthcare reform.

The study from the **UCLA Center for Health Policy Research** published in the journal *Health Affairs* looked at the impact of pending reductions to disproportionate-share hospital (DSH) payments. The federal government currently distributes $11.5 billion in DSH funds to states each year that are used to subsidize hospitals that care for a high percentage of the uninsured and patients covered through Medicaid.

The study estimates that California receives $1.1 billion in DSH payments per year—which covers about 50% of total uncompensated care costs—and that 98.5% of those funds go to 20 large county and public hospitals. They include LAC + USC Medical Center in Los Angeles, Santa Clara Valley Medical Center, Alameda Health System, San Joaquin General Hospital, and Harbor-UCLA Medical Center. Discharge records show that 18% of patients at those hospitals have no insurance and that 41% are insured through Medi-Cal, which provides hospitals much lower reimbursement rates than private health plans.

“Hospitals that can least afford a cut are the most at risk,” said Dylan Roby, one of the study’s authors and director of the Health Economics and Evaluation Research Program at the UCLA Center for Health Policy Research. “Policymakers should ensure that the impending shift in federal funding does not destabilize institutions that are the backbone of public health in California.”

The study notes that “decreases in uncompensated care costs resulting from the ACA insurance expansion may not match the act’s DSH reductions because of the high number of people who will remain uninsured, low Medicaid reimbursement rates, and medical cost inflation.”

The DSH payment cuts are part of the **Patient Protection and Affordable Care Act**, which assumes there will be fewer uninsured patients for hospitals to treat in the future and a reduced need for subsidies. The DSH payment reductions
TOP STORIES CONTINUED FROM PAGE 1

Study Suggests cont.

are on a sliding scale with cuts increasing each year. Those cuts will start with an 18% reduction in funding in fiscal 2017 and increase to 41% by 2020.

Roby said California’s safety-net hospitals are “already operating on a shoestring” and will find it difficult to absorb any subsidy reductions, particularly if they’re based on projections instead of the reality on the ground. Using a model that takes into account increasing healthcare costs and current DSH cuts proposed under the ACA, the study estimates that “safety-net hospitals in California could face $1.381 to $1.537 billion in residual uncompensated care costs and Medicaid shortfalls in 2019.” It also estimates that 4 million state residents will remain uninsured in 2019.

If DSH funding reductions are implemented as planned, Roby said state and county health officials may have to create new sources of funding to subsidize public hospitals or redistribute existing sources of funding to hospitals that are most in need. The study suggested that “leaders of these hospitals will need to develop strategies that take into account local political environments, financial conditions, geography, and payer mix.”

The California Hospital Association (CHA) has been working to delay the DSH cuts until the true impact of the ACA on the uninsured population can be assessed. “We've been actively lobbying Congress to get the DSH cuts stayed,” said Jan Emerson-Shea, vice president of external affairs for the CHA. —DOUG DESJARDINS

More than 2,600 Cases of Whooping Cough Confirmed in State
Number of cases ahead of pace set in 2010 epidemic

The number of whooping cough cases in the state continues to increase and is on a pace similar to the 2010 whooping cough epidemic that was the worst in 60 years.

The California Department of Public Health (CDPH) received reports of 2,649 cases of pertussis (whooping cough) through May 27. During the month of April alone, the CDPH received reports of more than 800 new cases, making it the busiest month for whooping cough since the 2010 epidemic when 9,120 cases were reported. Though May 31 in 2010, the state had received 1,603 reported cases of whooping cough.

“The number of pertussis cases is likely to continue to increase,” said Ron Chapman, MD, director of the CDPH. New vaccination requirements that went into effect in 2011 could help reduce the severity of this year’s outbreak. The new

FORGING HEALTHCARE’S NEW FINANCIAL FOUNDATION

89% cite clinical care continuum relationships as the top opportunity for their organization.
More than 2,600 cont.

Los Angeles County officials held a ribbon-cutting ceremony on May 28 for the new Martin Luther King Jr. Outpatient Center in Los Angeles. The facility is scheduled to officially open June 17 and will house 70 medical offices, five operating rooms, and an urgent care center that will operate 16 hours a day. The outpatient center is part of the medical campus for Martin Luther King Jr. Community Hospital, a 131-bed acute care hospital scheduled to open in 2015. The hospital will replace King-Drew Hospital, which closed in 2007. A psychiatric urgent care center is scheduled to open on the campus in late 2014.

The trauma center at UCSF Benioff Children's Hospital Oakland has been verified as Level I Pediatric Trauma Center by the American College of Surgeons (ACS). The verification makes Benioff Children's Hospital Oakland one of 44 pediatric Level I Trauma Centers in the United States and one of only four in California. "It's critical that seriously injured children be treated at a trauma center that is geared to their medical needs," said Bertram Lubin, president and CEO of Benioff Children's Hospital Oakland. The ACS Pediatric Level I trauma verification "reaffirms that children needing trauma services will receive the most appropriate and highest quality trauma care available at our trauma center."

El Centro Regional Medical Center CEO David Green announced that he will retire in July. Green has been CEO of El Centro Regional since 2003. "El Centro Regional Medical Center has been a great place to work for me," said Green. "But after 11 years, I think it's time to move on to new challenges."

The spread of the disease may also be fueled by parents who receive a personal belief exemption from the state to not have their children immunized. A study published in the medical journal Pediatrics in October 2013 identified 39 "geographic clusters" in the state where a high percentage of children were not vaccinated prior to the 2010 whooping cough outbreak. It found that those areas were 2.5 times more likely to have higher levels of whooping cough per capita than the state average.

—DOUG DESJARDINS
Green, who is ending a 40-year career in healthcare. “I have enjoyed the past 11 years in the Imperial Valley and I’m grateful to have been a part of this community.” During his tenure, El Centro Regional built a 60-bed addition to the hospital and expanded its network of clinics. El Centro Regional has not yet announced a replacement for Green. Before joining El Centro Regional, Green served as CEO at several Southern California hospitals.

» ValleyCare Health System announced that it has signed a non-binding letter of intent to explore an affiliation with Stanford Hospital & Clinics. In a joint press release, ValleyCare and Stanford said their organizations will conduct due diligence into a potential affiliation. “We are thrilled about the prospect of joining with Stanford’s health system,” said Scott Gregerson, CEO of ValleyCare. “This affiliation has extraordinary potential for our patients, our staff, and our region.” Amir Dan Rubin, president and CEO of Stanford Hospital & Clinics, said the "goal of this affiliation is to support delivery of premier healthcare services to residents in the Tri-Valley region while building upon Stanford’s preeminent academic health system capabilities.” ValleyCare operates Valley Memorial Hospital in Livermore and ValleyCare Medical Center in Pleasanton.

Soda Warning Label Bill Approved by Senate, Moves to Assembly

Bills that would mandate new policies to prevent hospital workplace violence and require beverage manufacturers to put warning labels on soda containers were approved by the state Senate and have moved to the state Assembly.

Senate Bill 1299 was approved by the Senate on May 30 and is now awaiting action in the state Assembly. The bill authored by Sen. Alex Padilla (D-Pacoima) would require hospitals to create workplace violence prevention plans to protect employees and submit the plans to the state Occupational Safety and Health Standards Board for approval. The bill was submitted in the wake of two separate incidents in April in which nurses were stabbed by patients.

“California hospitals need to do more to [ensure] a safe and healing environment for patients, families, visitors, RNs, and other hospital staff,” said California Nurses Association co-president Deborah Burger in a statement. “This bill would be a major advance in requiring uniform standards that put safety as a top priority.” The California Hospital Association said the bill would create a redundant regulation and that hospitals are already required by law to create workplace safety plans.

Senate Bill 1000 was also approved by the Senate in a 21-13 vote and is awaiting action in the Assembly. The bill authored by Sen. Bill Monning (D-Carmel) would require beverage makers to attach warning labels to containers for all beverages with sugar that have more than 75 calories per 12-ounce serving. The bill is designed to warn consumers about the link between consuming sugar-laden beverages and obesity and related diseases such as diabetes.

Supporters of the bill suggest that, in addition to contributing to obesity, liquid sugar in soft drinks can overload the pancreas and shift sugar to the liver, where it can cause fatty liver disease and diabetes. The California Beverage Association opposes the bill and said that “putting warning labels on more than 500 beverages will do nothing to change personal behaviors or teach people about healthy lifestyles.” A recent California Field Poll found that 74% of voters polled support the concept of putting warning labels on sugary drinks.

The state Senate also approved Senate Bill 1446, which would allow small employers with non-grandfathered health insurance plans to renew their existing plan for 2015. The bill was approved by a 35-0 vote and includes an urgency clause that would allow it to go into effect immediately if approved by the Assembly and signed by the governor. —DOUG DESJARDINS

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**EVENTS**


**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](http://www.chcf.org/events/2014/symposium-maternal-june)

**June 25.** Health Impact West. Loews Santa Monica Beach Hotel. A one-day conference for health system information technology executives focused on new healthcare delivery technologies and the impact they are having on healthcare. To register, please visit [http://www.imn.org/conference/Health-Impact-West/Home.html](http://www.imn.org/conference/Health-Impact-West/Home.html)

**July 27-30.** CAHF & QCHF Institute & Summer Conference. Lake Tahoe, California. An educational conference for healthcare professionals sponsored by the Quality Care Health Foundation Institute and the California Association of Health Facilities. To register, please visit [http://www.cahf.org/MeetingsEvents/InstituteSummerConf.aspx](http://www.cahf.org/MeetingsEvents/InstituteSummerConf.aspx)

Get your event listed in Healthfax! E-mail the details to: ddhealth@netzero.net.

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**IN BRIEF CONTINUED FROM PAGE 4**

- **Miller Children’s Hospital Long Beach** has changed its name to Miller Children’s & Women’s Hospital Long Beach. Hospital officials said the name change will better reflect the services available at the hospital, which delivers more than 6,000 babies each year and houses a neonatal intensive care unit in addition to providing pediatric care. “We offer a comprehensive level of care for women,” said Suzie Reinsvold, chief operating officer for Miller Children’s & Women’s Hospital Long Beach, adding that “it is important that our name accurately reflects who we are and the full service we provide to the entire family.” The hospital is part of the MemorialCare Health System.

- The California Department of Public Health (CDPH) reported that California’s teen birth rate hit a record low in 2012. The teen birth rate for 2012 was 25.7 births per 1,000 females aged 15 to 19, an 8% decline from a rate of 28 births per 1,000 reported in 2011. “I am very pleased with the positive strides California is making in reducing teen pregnancy,” said CDPH director Ron Chapman, MD. “By encouraging positive and sensible choices for our young men and women, we can inspire our youth to strive for successful futures.” Teen birth rates among Hispanics were the highest in the state at 38.9 births per 1,000; the lowest rates were among Asian-American teens at 5 births per 1,000. The rates are down from a record high of 70.9 births per 1,000 teens reported in California in 1991.

- **Highland Hospital** has been verified as a Level II Trauma Center by the American College of Surgeons (ACS). Highland, an acute care hospital located in Oakland that is part of the Alameda Health System, underwent an on-site review of its trauma center to earn the recognition. “This a major milestone for the hospital and for Alameda Health System (AHS),” said Gregory Victorino, MD, chief of the AHS trauma division. “We have a long history of providing exceptional trauma care for residents and visitors. The verification by ACS validates our hard work and the efforts of every staff member serving the critically injured in need every day.”

- The California Hospital Association (CHA) said a ballot initiative it’s sponsoring is unlikely to qualify for the November 2014 ballot due to time restraints. The CHA collected more than 1.2 million signatures for the Medi-Cal Funding and Accountability Act of 2014 but a random sampling of signatures by state election officials found a high percentage of duplicate signatures and other problems. In a statement, the CHA said that “based on this information, it is not likely that the ballot measure will qualify by the June 26 election deadline to appear on the Nov. 4, 2014 general election ballot.” The CHA said it expects a full count will yield the 807,615 signatures needed for the measure to qualify for the November 2016 ballot. The measure would ask voters to prohibit the state from using hospital fee funds for anything other than healthcare programs.
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Inland Empire Health Plan (IEHP) is one of the largest not-for-profit health plans in California. We serve over 700,000 members in Riverside and San Bernardino counties in Medi-Cal, Healthy Kids and a Medicare Special Needs Plan. Our success is attributable to our Team who share the IEHP mission to organize the delivery of quality healthcare services to our members. Join our dedicated Team!

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