Partnership HealthPlan of California
2021 – 2024 Strategic Plan
Message from the CEO

Our last three-year strategic plan referenced the many challenges and opportunities before us, from the potential for a massive shift away from expansion of coverage for low-income members under the Affordable Care Act to our quest to achieve National Committee for Quality Assurance (NCQA) accreditation. I am proud to say that we weathered those storms and have come out even stronger than we were just four years ago. This very strategic plan, however, is being released a year later than originally planned, due to the onset of the COVID-19 pandemic in early 2020. This catastrophic world pandemic has changed how we provide care, communicate, learn, and work, impacting virtually every facet of life. And, for many in our communities, the personal loss has been much greater.

As we emerge from the pandemic, there is hope and opportunity on the horizon. This strategic plan is meant to guide us on that journey, and I remain proud that PHC’s strategic plan is a living, breathing document that is used throughout each year, from our annual goal setting to the ways in which we consider new opportunities for growth and improvement. Joining our three long-term areas of concentration – high-quality health care, operational excellence, and financial stewardship – is a fourth, Community Partnerships, a nod to our organization’s name, calling out the critical role that these partnerships play in the pursuit of health and wellness.

There are many initiatives and ambitious goals that support these four pillars as we launch this strategic plan, including implementation of the ground-breaking California Advancing and Innovating Medi-Cal (CalAIM) waiver, replacing our legacy eligibility and claims system, expanding access to quality behavioral health services, and ensuring our very diverse population experiences respect and the best possible care available as we strive to achieve health equity. These are just a few of our ambitious and challenging goals ahead.

As always, and in particular given the work on this plan during the pandemic, my thanks to our management team and staff, Strategic Planning Committee, Board of Commissioners, and community partners for their steadfast commitment to helping our members, and the communities we serve, be healthy.

Many thanks,

Elizabeth Gibboney, CEO
Partnership HealthPlan of California
The Health Care Environment

The year 2020 was one of tremendous challenge, change, and unpredictability. The development of the Partnership HealthPlan of California (PHC) strategic plan required careful consideration of the external environment, including the implications of the events of the last year and consideration of longer-term trends and factors in the state and federal environment. The following issues were considered during the development of the strategic plan:

- **COVID-19 Impact on Health Status and Access to Care.** PHC members and communities were deeply impacted by the COVID-19 crisis, both directly by the disease and indirectly by its impact on access to care and deferred care for those with existing health conditions. The lingering impact of COVID-19 will continue to color our members’ needs and our response.

- **Health Equity.** While disparities in health outcomes have been prevalent for many years, COVID-19 served to deepen existing disparities in health outcomes for low-income residents, rural residents, and people of color, further limit access to care, and exacerbate the social determinants of health that affect overall health and well-being. Strategies to address these disparities are essential to meeting our goals for quality and access.

- **Care for Complex Populations.** PHC has maintained a commitment to addressing the needs of members with multiple health, behavioral, and social needs. Following a pause due to the COVID-19 crisis, California has relaunched statewide initiatives prioritizing care for complex populations, including CalAIM and mandated provision of Medicare/Medi-Cal Dual-Eligible Special Needs Plans by Medi-Cal managed care plans. PHC is committed to both meeting mandated requirements and leveraging new opportunities to more effectively care for our most complex members.
• **State Initiatives to Streamline Medi-Cal.** The California Department of Health Care Services (DHCS) is pursuing efforts to promote streamlined Medi-Cal delivery and accountability for quality and access, including revising the Medi-Cal managed care contract to include new requirements to ensure accountability for pediatric access and health outcomes.

• **Telehealth Expansion.** The COVID-19 crisis served as a catalyst for health care innovation and adaptation, including the wider adoption and acceptance of telehealth in Medi-Cal. These changes highlight opportunities for PHC to drive and support the expanded use of telehealth and virtual care to ensure patient access and rethink how care is delivered.

• **Increasingly Stable State Budget.** Following budget challenges in 2020, a more optimistic environment is projected for statewide recovery and the state budget. That said, the future remains unpredictable. This extends to some uncertainty about the degree to which Medi-Cal enrollment will grow or shift in the coming years. This reinforces the need for PHC to remain nimble in response to a changing environment.

• **Access to Care and Investment in Health Care Workforce.** Ensuring access to care for members and an adequate health care workforce have been long-standing challenges in our 14 service counties. While the COVID-19 crisis has deepened the challenges in some areas and elevated opportunities in others (e.g. technology), the fundamental contours of these challenges remain unchanged. Strategic efforts in this area must build on prior efforts and lessons, leverage new windows of opportunity, and maintain a commitment to creativity and innovation.
About Partnership HealthPlan of California

PHC began serving Medi-Cal beneficiaries in Solano County in 1994 as a County Organized Health System (aka public plan). A Board of Commissioners comprised of physicians, county officials, hospital leaders, providers, members, and public representatives governs PHC.

PHC FAST FACTS

Over **900** PHC employees work in four regional offices - Fairfield, Santa Rosa, Redding, and Eureka.

PHC provides coverage to over **600,000** individuals living in **14** Northern California counties.

Since the implementation of the Affordable Care Act, PHC enrolled **163,000** new members through the Medi-Cal expansion.

PHC’s diverse membership lives in urban, suburban, rural, and remote areas of the state.

While PHC members speak **26** different languages, the most common languages are English, Spanish, Russian, and Tagalog.
Mission

To help our members, and the communities we serve, be healthy

Vision

To be the most highly regarded managed care plan in California

Values

Partnership HealthPlan of California believes in...

- Fostering strong partnerships with members, providers and community leaders to collectively improve health outcomes
- Focusing on continuous quality improvement in every aspect of the organization and in collaboration with our partners
- Setting a standard of professionalism, integrity and accountability
- Communicating honestly, directly, and respectfully with our members, community partners and staff
- Striving to be innovative and seeking creative solutions
- Being good stewards of our resources while making mission-driven business decisions
- Promoting diversity by accepting, respecting, and valuing individual differences and capitalizing on the diverse backgrounds and experiences of our members, community partners, and staff
- Creating a work environment that provides opportunities for employees to have fun, build relationships, and stay connected across the entire organization

Strategic Planning Process

PHC initiated a collaborative strategic planning process in January 2020 that included input and guidance from the Board of Commissioners, PHC staff, health care provider representatives and health plan members. The draft strategic plan was set aside in April 2020 to respond to the COVID-19 crisis.

In January 2021, the board and staff re-engaged in strategic planning with the goal of developing a strategic plan that adapted to changes in member needs and our external environment while seeing through long-term commitments to health plan excellence and delivery system improvement.
1. Quality, Access, and Equity

Ensuring the highest quality of care, positive health outcomes, and timely access to care for all members remains a defining focus for PHC. The three-year strategic plan articulates a diverse set of goals and strategies that advances core quality performance, acknowledges and addresses member health disparities, creatively promotes expanded access, and leverages new opportunities to care for complex members.

1.1. Achieve the Highest Level of Quality for All Members

In order to deliver quality outcomes for all members, PHC will continue and build on efforts to excel in standard managed care accountability measures, as well as pursue explicit strategies to measure, understand, and address disparities in health outcomes among our members. This includes addressing racial/ethnic, geographic, and other categories of health disparities. In addition, PHC will prioritize specific strategies that ensure preventive care access and outcomes for pediatric members.

1.2. Use Technology and Health Care Workforce Investment to Expand Member Access and Reduce Disparities

Timely access to care remains a central driver of member health outcomes and regional, racial/ethnic, and other health disparities among our membership. To overcome member barriers to care and chronic strains on the health care workforce and capacity in the communities we serve,
PHC will pursue creative strategies that expand member access to care and reduce health disparities. We will promote a continued expansion in the use of technology to expand access to care, including telehealth, eConsult, and other tools available, and pursue initiatives and partnerships that strengthen and grow the health care workforce of our provider partners, including clinical providers, clinical support, and other allied health professionals.

1.3. Become a Leader in the Care for Complex Populations

PHC is committed to becoming a statewide managed care leader in the care for complex populations. Over the next three years, we will leverage the CalAIM Enhanced Care Management (ECM) program in close collaboration with county partners and strategically utilize Community Supports opportunities to strengthen care, improve outcomes and reduce costs for plan members with complex needs. We further recognize the importance of behavioral health access and integration and will seek opportunities to address behavioral health needs through pilots, partnership, and community collaboration.
2. Community Partnership

With service to 14 diverse California counties, developing and maintaining meaningful local understanding, relationships, and partnership is a core element of PHC’s philosophy. As health care and social service providers are challenged to do more to impact health and well-being, the value of strong and strategic local partnerships becomes even more important.

2.1. Strengthen Existing and Establish New Cross-Sector Partnerships to Support CalAIM

CalAIM offers exciting opportunities to improve health outcomes for complex members, including through delivery of non-health care services. Success requires recognition that other service providers bring unique and essential capabilities, and the humility to recognize where PHC should lead and where we should support our partners. In order to successfully implement CalAIM in our diverse geographic communities, PHC will strategically develop and deepen service partnerships and networks with non-health care service providers essential to the implementation of CalAIM’s Enhanced Care Management (ECM) and Community Supports components. Additionally, we will work closely with our local partners to understand and strategically address health disparities, health equity, and the social determinants of health impacting our members in each community.
Local understanding, relationships, and partnership are a central feature of PHC’s philosophy and a distinguishing characteristic of our success.

2.2. Support and Empower the Communities We Serve

Local understanding, relationships, and partnership are a central feature of PHC’s philosophy and a distinguishing characteristic of our success. Over the next three years, PHC will continue to support and empower the communities we serve by convening and facilitating collaboration of health care stakeholders, representing community issues to policymakers, and fostering close communication and coordination with DHCS.

2.3. Maintain Staff Connections to our Member Communities

As the vehicle for our work and ambassadors to our members, it is important that our staff maintain connections to and understanding of our service communities. PHC will continue to foster this connection by providing our employees with opportunities to volunteer in the communities we serve.
3. Operational Excellence

Effective systems and business processes, organizational culture, and attentiveness to staff development and success are foundational to PHC’s ability to improve member health outcomes. PHC established three strategic goals to facilitate continued and enhanced operational excellence.

3.1. Update Internal Systems and Business Processes to Enable Sophisticated and Data-Driven Operations

PHC will continue to build on significant internal system and business process investments that will enable the plan to deliver sophisticated, data-driven, and efficient operations. This includes: implementation of a new claims/eligibility system that enables value-based contracting; expanded, streamlined, and automated reporting capabilities to report data-driven decision-making internally; and the automation of functions wherever value can be demonstrated.

PHC will pursue a diverse strategy to embed health equity into our organizational culture.
3.2. Embed Health Equity into PHC Culture

In alignment with efforts to address disparities in member health outcomes, PHC will pursue a diverse strategy to embed health equity into our organizational culture. This includes utilizing employee trainings and surveys, integrating new tools and resources into staff functions and organizational operations, and providing safe forums for staff to engage on equity concerns and issues.

3.3. Invest in Staff Development and Promote Continuous Improvement

PHC remains committed to supporting the development and advancement of our staff, promoting a culture of continuous improvement, and maintaining a positive and balanced work environment. To meet this goal, PHC will ensure structured education and training opportunities for all staff, invest in the development of the next generation of leadership, and embed continuous quality improvement practices into all levels of the organization, as well as thoughtfully adapt our employment models to promote staff retention, achievement, and balance.
4. Financial Stewardship

To ensure continued viability, PHC has articulated three goals to further strengthen core capabilities and practices, actively monitor and respond to statewide policy discussions, and adapt to shifting demands on and responsibilities for Medi-Cal managed care plans.

4.1. Leverage Data as a Tool to Deliver Value

Timely, accurate, and actionable data is an essential and foundational tool to enable providers, plans, and communities to deliver improved health outcomes and reduced costs. PHC will leverage data as a tool to deliver value by prioritizing our capacity to provide timely and accurate data reports to providers and partners and implementing practices and systems that facilitate accurate and timely provider encounter reporting. PHC will further support and encourage the advancement of Health Information Exchanges (HIE) and local and regional initiatives to promote increased data sharing among partners.
4.2. Ensure Continued Financial Viability in an Uncertain Environment

To maintain financial viability in an environment of unpredictability, PHC must remain diligent, adaptable, and active in our strategic approach. We will actively monitor, manage, and advocate around shifts in Medi-Cal managed care rate-setting, as well as participate in statewide value-based payment discussions that present the potential to expand access and promote quality. Within our own networks, PHC will explore contracting strategies that align incentives with high performance and improved health outcomes and equity.

4.3. Adapt Organizational Capabilities to Meet Changing Health Plan Responsibilities

While exciting and forward-thinking, new statewide initiatives to improve outcomes for complex patients and streamline Medi-Cal, expand health plan program responsibilities, introduce new requirements for health plan capabilities and infrastructure and shift plan business and financial considerations. In order to succeed in a shifting environment, PHC will adapt staffing structure and expertise to meet CalAIM, and other state program/benefit adjustments, as well as implement necessary systems and infrastructure to manage new programs and benefits. Additionally, we will continue to monitor and evaluate geographic expansion opportunities as they arise.

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Acknowledgments

This document is the culmination of input and feedback gathered from members of PHC’s Leadership Team, Strategic Planning Committee, Consumer Advisory Committees, and Board of Commissioners.

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