LOMA LINDA UNIVERSITY
MEDICAL CENTER

January 14, 2013

Mr. Peter V. Lee
Executive Director
Covered California
560 J Street, Suite 290
Sacramento, California 95814

Subject: Covered California Bridge Plan: Continuity of Care & Affordability

Dear Mr. Lee:

On behalf of Loma Linda University Health we appreciate the opportunity to provide comments on the January 10, 2013 Covered California Bridge Plan: Continuity of Care & Affordability Board Recommendation Brief.

As you may know, Loma Linda University Health is a faith-based, not-for-profit, academic medical center in the Inland Empire region of Southern California. Our health system includes Loma Linda University Medical Center (LLUMC) and Children's Hospital, LLUMC – East Campus, Behavioral Medicine Center, Heart and Surgical Hospital, LLUMC-Murrieta and physician clinics. LLUMC is the only Level 1 trauma Center in the San Bernardino, Riverside, Inyo, and Mono counties, which covers over 40,000 square miles in Southern California. Loma Linda University Health System includes the only children's hospital in the region. Loma Linda University Medical Center sees over 30,000 inpatients and about 500,000 outpatient visits a year and is one of the largest private acute care Med-Cal providers in the state. It also serves as the primary teaching facility for Loma Linda University School of Medicine and conducts significant educational and research activities.

Our medical center has a long-standing and fundamental commitment to the provision of affordable high quality medical care to low income patients. Therefore, we are supportive of Covered California's interest in encouraging continuity of care for those who have coverage and maintaining community safety net programs for those who do not have coverage. Based on our review of the Brief we offer the following five observations, which we hope will be of benefit to Covered California as it builds and refines its bridge strategy over the long and short terms:

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- As an academic medical center, LLUMC must shoulder additional costs for training physicians, nurses and other health care professionals. Unfortunately, we do not see any consideration for those additional costs in the Plan.

- Based on our experience, uninsured patients who do not enroll in a plan will continue to seek care and when they do, the question of retroactive eligibility becomes an issue. In our review of the Brief, we did not see any provision that would allow an otherwise eligible uninsured patient to become retroactively eligible for plan enrollment.

- Our experience also teaches us that patients who have catastrophic events may not have coverage, and we did not see any provision for that coverage in the Plan.

- When some providers feel that reimbursement rates for certain diagnoses or procedures are too low, it can be an inducement for them to transfer a patient to another hospital. We would urge Covered California to include a provision in the Plan which discourages such transfer scenarios.

- While we understand that federally authorized health care programs contain certain restrictions regarding the provision of care to undocumented patients; we do not see any provisions in the plan, which would govern how limited Medi-Cal benefits will be administered. We would recommend that Covered California add appropriate clarification to the Bridge Plan.

We thank you in advance for considering our observations and recommendations and we look forward to working closely with Covered California as it pursues its vision to improve the health of all Californians by assuring their access to affordable, high quality care. Should you have questions, please contact me at 909-558-7570.

Sincerely,

Richard Hart, MD, DrPH
President, Loma Linda University Health