
The Specialty Care Safety Net Initiative

Linking University of California Specialists with Safety Net Clinics

What is the Specialty Care Safety Net Initiative?

The SCSNI is a collaborative effort between University of California (UC) medical school specialty departments and safety net clinics in California. The initiative will establish a collaborative environment in which efforts can be made to discover policy, statutory and practice pattern barriers that prevent wide-spread adoption and sustainability of telehealth programs. Identifying and removing these barriers is essential to the long-term sustainability of telehealth projects that provide service to safety net patients.

Why this initiative?

Private and public clinics provide a “safety net” for patients seeking primary care. There is no designated safety net for specialty care. Patients needing specialty consults are often left to navigate an uncoordinated array of specialty providers, many of whom do not serve Medi-Cal or uninsured patients. Use of telehealth technologies can facilitate access to timely, cost-effective access to medical specialists. Safety net clinics indicate the highest areas of unmet need for specialty consultations for their patients include dermatology, psychiatry, orthopedics, endocrinology, neurology, and hepatology. These specialties are ideal for the use of telehealth technologies.

The University of California’s five Schools of Medicine offer one of the greatest concentrations of medical specialists in the world. Linking safety net patients with UC-based specialists is one approach to addressing the unmet health care needs of California’s underserved populations.

While some telemedicine programs are financially self-sustaining, the majority of projects depend on grant support to maintain operations. Work needs to be done on alignment of incentives, reimbursement, and business planning to develop sustainable models of care. This initiative offers that opportunity.

How is the initiative funded?

The California HealthCare Foundation awarded CCCH with \$3.5 million to facilitate UC system and safety net clinic participation in the initiative. The CCCH will:

1. Purchase specialty clinic time from the UC medical schools. Specialty telemedicine clinics will be reserved for the initiative’s safety net clinic participants, allowing access to care for patients regardless of insurance eligibility.
2. Contract with a technology consultant to provide support for each participating site to include: technology assessment; telemedicine technology training; patient presentation training; and high level ongoing technical support and user training throughout the duration of the project.
3. Provide limited financial support for participating safety net clinics.

What is the initiative's approach?

Through a CCCH supported "laboratory" UC specialists will provide specialty consultation services to primary care providers in SCSNI-participating safety net clinics. The laboratory environment will:

1. Provide access to specialty services for safety net patients via telemedicine and telehealth technologies. Specialties to be offered in this project comprise those services identified by safety net clinics as "high need" and include:
 - a. Dermatology (Pediatric and Adult)
 - b. Endocrinology (Pediatric and Adult)
 - c. Hepatology (Adult)
 - d. Neurology (Pediatric and Adult)
 - e. Orthopedics (Non-Operative, Pediatric and Adult)
 - f. Psychiatry (Pediatric and Adult)
2. Provide education services (through physician assisted patient consults and continuing medical education presentation) to the safety net providers.
3. Determine new and innovative ways in which to utilize telemedicine/telehealth and health information technologies to improve the quality, safety and efficiency of specialty care.
4. Determine what, if any, policies or regulations prohibit wide spread adoption of telemedicine in the University of California and the safety net clinic environments.

What are the goals of the initiative?

At the end of the project, the goal is to provide an action/advocacy agenda of policy, regulatory, statutory and/or care delivery model changes that will increase the financial sustainability of providing telehealth services to safety net patients. The long-term goal is to identify a sustainable mechanism by which UC medical school faculty and other providers can offer specialty consultations to safety net patients.

What is the timing for the initiative?

The clinical portion of the initiative will begin in February 2010 and run for 18 to 24 months, ending in February 2012. Start-up and planning milestones include:

Identify UC campuses and specialty services – October 2009

Phase 1* Clinic Site Implementation:

Clinic sites to be recommended by UC Campuses – October 2009

Clinic sites to be selected by CCCH – November 2009

Clinic site training – January 2010

Project Launch! Services begin at UC campuses and clinics – February 2010

Phase 2** Clinic Site Implementation:

RFP released by CCCH – October 2009

Proposals due to CCCH from safety net clinics – December 2009

Clinic sites to be selected by CCCH – April 2010

Clinic site training – June through August 2010

Project Launch! Services begin immediately following training – June - August 2010

Last day of clinical services via SCSNI – February 28, 2012

* During Phase 1 (operational date of Feb 2010) 10 clinic sites that are currently engaged in telehealth activities will be selected to participate in the SCSNI. Each UC participant campus will nominate three clinics for participation in Phase 1 of the SCSNI. Campuses were asked to nominate clinics that are experienced telehealth providers, have a significant need for the telehealth services provided by the project, and are eligible CTN participants. *(For a listing of eligible CTN participant sites, please visit: <http://www.ucdmc.ucdavis.edu/ctn/RFPdocuments2009-02.html> Appendix C and Appendix C-A)*

** During Phase 2 (operational date of June 2010) an additional 30 to 35 clinic sites will be included in the SCSNI. Up to half of these sites will be selected via nomination by UC campuses and at least half will be selected through a procurement process administered by CCCH. Selection criteria for Phase 2 clinics sites will be sites that are eligible CTN participants, have a significant need for the telehealth services provided by the project, and are either experienced telehealth providers, or possess a strong interest and expressed desire to participate in the project.

All of the SCSNI clinic sites will have access to each of the UC specialty sites participating in the SCSNI.

For more information:

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