

FACT SHEET: Did Kaiser Boost Its Mental Health Staff by 45%?

In a press release issued September 16, 2015, Kaiser Permanente claims to have boosted its staff of California mental health clinicians by 45% between 2011 and 2015. Kaiser officials cite this figure in responding to the various regulatory sanctions (including a \$4 million fine levied by the Department of Managed Health Care), class-action lawsuits, and press surrounding the suicides of Kaiser members while undergoing excessive wait times for care.

Kaiser's claim is both inaccurate and misleading.

First, Kaiser's 45% figure is contradicted by its own internal workforce data. According to these records, the number of full-time equivalent (FTE) mental health clinicians grew by less than half of what Kaiser claims in its press release. (See Table 1 below.)

Secondly, Kaiser fails to disclose that during this same time period, Kaiser's statewide membership grew by 20.6% (1,358,519 members). Furthermore, a substantial portion of this population (more than 100,000) are Medi-Cal enrollees who were formerly treated in county-operated facilities and who typically have more acute mental health conditions requiring more intensive services. Beginning on January 1, 2014, these Medi-Cal enrollees began receiving outpatient psychiatric services from Kaiser under rules referred to as the "Medi-Cal carve-in." (See Table 2 below.)

Table 1. Kaiser's Mental Health Workforce: Sept. 2011 – Sept. 2015 (in FTEs) ¹							
Region	Sept. 2011	Sept. 2015	Difference	% Difference			
Northern California	986.1	1,151.7	165.6	16.8%			
Southern California	970.5	1,233.0	262.5	27.0%			
TOTAL	1,956.6	2,384.7	428.1	21.9%			

Source: Kaiser Permanente

Table 2. Kaiser's Enrollment Growth: January 2011 – July 2015 ²						
	January 1, 2011	July 1, 2015	Difference	% Difference		
Total Enrollees	6,579,230	7,937,749	1,358,519	20.6%		

Source: California Department of Managed Health Care

The bottom line: Kaiser has failed to fix the severe understaffing problems for which it was fined \$4 million by state investigators. Instead, Kaiser's staffing increases since 2011 have barely kept pace with its membership growth and have failed to address the long-standing staffing deficits that deprive patients of access to timely and appropriate care.

¹ "Mental health workforce" includes Psychologists, Licensed Clinical Social Workers, Marriage & Family Therapists, and other therapists represented by NUHW. On a monthly or bi-monthly basis, Kaiser prepares and delivers to NUHW a spreadsheet containing the names, classifications, work hours, and other information of each of the clinicians who comprise this workforce. The figures in Table 1 were computed using data supplied by Kaiser.

² Kaiser's enrollment figures are available on the DMHC's website at http://wpso.dmhc.ca.gov/flash/. Table 2 accounts for the number of Medi-Cal enrollees who became eligible for outpatient mental health services delivered by Kaiser on January 1, 2014 by utilizing enrollment figures for "Medi-Cal risk" enrollees published by the DMHC.