

— SUBSCRIBER EDITION —

# THE SACRAMENTO BEE

Politics Opinion Obituaries • Personal Finance Food & Drink Bee Curious Equity Lab Home

HEALTH & MEDICINE

## Kaiser behavioral health care on the hot seat after California complaints

BY CATHIE ANDERSON

UPDATED MAY 23, 2022 9:47 AM



In an unexpected move, the California Department of Managed Health Care informed Kaiser Permanente that it will be examining whether the company is providing adequate mental health care services to its 9.4 million California members.

“This non-routine survey is based on complaints received from enrollees, providers, and other stakeholders concerning the plan’s behavioral health operations,” said Amanda Levy, the department’s deputy director of health policy and stakeholder relations.

Levy said regulators would evaluate Kaiser’s internal and external provider networks, timely access to care, processes for intake and follow-up appointments, appointment scheduling processes, levels of care and associated decision-making processes, medical record documentation and retention practices, and monitoring of urgent appointments.

Leaders of Kaiser Permanente issued a statement through Steve Shivinsky, the director of national media relations. In part, he said: “We appreciate the DMHC’s interest and accountability in understanding how we are working to deliver clinically appropriate care to those who rely on us for their mental health services. We welcome the opportunity to review our performance and collaborate on new areas for improvement.”

Kaiser’s mental health clinicians, represented by the National Union of Healthcare Workers, have complained that their clients face weeks-long waits before they can get successive appointments and grueling schedules that leave clinicians little time to write notes or to connect patients to wraparound services.

“We have been pushing Kaiser Permanente to increase staffing and invest more in behavioral health care so that we can actually address the needs of our patients, but Kaiser keeps refusing,” said psychologist Ken Rogers, a leader for the union in the Sacramento region. “Hopefully this investigation will finally force Kaiser to stop denying that it’s failing its behavioral health patients and start working with us to improve its services.”

In a news release issued Thursday, union leaders pointed to past fines and settlement agreements that the health care giant had signed with the Department of Managed Health Care, including one from 2013 when the company agreed to pay \$4 million and to take corrective actions after the agency found it had failed to provide timely access to mental health care.

State records also show that regulators found issues with timely access to behavioral health services and availability of the care during a routine survey in 2016, but by 2019, Kaiser had instituted a corrective action plan that regulators said was working to alleviate the issues.

“We have been pushing Kaiser Permanente to increase staffing and invest more in behavioral health care so that we can actually address the needs of our patients, but Kaiser keeps refusing,” said psychologist Ken Rogers, a leader for the union in the Sacramento region. “Hopefully this investigation will finally force Kaiser to stop denying that it’s failing its behavioral health patients and start working with us to improve its services.”

Regulators cited Kaiser for seven other deficiencies in the 2019 survey, mainly focused on how the company handled consumer complaints and monitored whether they were effectively resolved.

Regulators were conducting a follow-up inspection to determine whether Kaiser had corrected these deficiencies when it announced the non-routine survey to determine whether the company complied with laws requiring timely access to behavioral health care.

### **Sharp increase in Kaiser complaints**

The California Department of Managed Health Care “help center received a 20% increase in behavioral health complaints for Kaiser in 2021 compared to 2020,” wrote Rachel Arrezola, a spokesperson for the department, in response to a Bee inquiry. The department “is committed to ensuring enrollees have appropriate access to behavioral health care when they need it.”

Kaiser’s Shivinsky said: “We believe that a thoughtful, impartial review can help us and other health plans in California address challenges we are all facing. We know that we cannot solve the challenges of the national mental health crisis on our own and look forward to collaboration from across the mental health community.”

Both the company and the union noted that California and the nation as a whole have seen a spike in demand for behavioral health services amid the COVID-19 epidemic.

The nonprofit Mental Health America estimated that more than 2.5 million youth in the U.S. have severe depression, and Black, indigenous and other youth of color are at the greatest risk.

In another key measure of mental health, the Centers for Disease Control and Prevention reported earlier this month that fatal overdoses have soared by 15% in 2021 with over 107,000 Americans dying. This follows upon a 30% increase in such deaths in 2020.

### **New California law requires timely appointments**

Union officials said it's past time that Kaiser got its act together in managing behavioral health services. They warned state officials that the company was woefully unprepared to comply with a new state law that goes into effect July 1 requiring that health plans accommodate mental health therapy appointments within 10 business days unless the treating clinician determines that a longer wait would not be detrimental.

Already, union officials said, a 2020 survey of Kaiser clinicians found that, on a daily basis, 65% of respondents are scheduling their patients for return appointments further into the future than is clinically appropriate.

Shivinsky said Kaiser has been on a multiyear journey to improve the way mental health care is delivered, but like other providers, it has faced challenges amid a national shortage of clinicians in the field. The company has expanded its ability to provide virtual care to patients who want it; embedded mental health professionals in primary care clinics, pediatric settings, and emergency departments; and expanded collaborative care programs for patients who have anxiety and depression diagnoses.

"Despite all these efforts, we continue to face the same challenges others do," Shivinsky said. "We haven't solved the problems facing mental health care, and the pandemic has set us all back."

Arrezola said that consumers should file a grievance with their plan if they are not getting timely access to behavioral care. If they are not satisfied with their health plan's response or have been in their plan's grievance system for longer than 30 days for non-urgent issues, she said, they should contact the DMHC Help Center for assistance at (888) 466-2219 or [www.HealthHelp.ca.gov](http://www.HealthHelp.ca.gov).