Creating Local Health Care Solutions
Central California Alliance for Health (the Alliance) is an award-winning regional nonprofit health plan that serves over one-third of the population in Merced, Monterey and Santa Cruz counties. The Alliance connects more than 407,650 Medi-Cal members to providers and programs in an effort to provide accessible, quality health care.

The Alliance makes investments in the communities it serves through the Medi-Cal Capacity Grant Program (MCGP) to strengthen the local health care delivery system for the future and realize the vision of “Healthy People. Healthy Communities.” The Alliance established the MCGP in July 2015 with initial investments focused on increasing the availability, quality and access of health care and supportive resources for Medi-Cal members in the service areas. In 2022, the focus of the MCGP expanded to integrate upstream action emphasizing health and well-being, while also addressing immediate barriers to care for local residents with Medi-Cal.

A Barrier to Quality Health Care: Lack of Primary Care Providers
The current supply of health care clinicians in California, particularly physicians, nurse practitioners (NPs) and physician assistants (PAs) who practice primary care is insufficient to meet the population’s needs.1 To make matters worse, projections indicate a near 18% shortage in primary care clinicians in the Alliance’s service area by 2030.2 The current shortage of primary care providers is expected to most severely impact the Central Coast and Central Valley regions3 that include counties in the Alliance’s service areas.

Factors that contribute to the decrease in primary care clinician supply:

- One third of California’s primary care physicians and nurse practitioners are age 55 or older and nearing retirement.
- Primary care clinicians have the highest rates of burnout-related turnover, which is exacerbated by the COVID-19 pandemic.7
- The 2010 Affordable Care Act (ACA) provided insurance coverage for more people, resulting in an increased demand for care.
- Over 70 million people will be age 65 or older by 2029. Many in this baby boomer population have multiple chronic conditions that require intensive care.

PROJECTED PRIMARY CARE PROVIDER SHORTAGES BY 20306

| State of California | California would need about 4,700 additional primary care clinicians in 2025 and about 4,100 additional primary care clinicians in 2030 to meet demand. |
| Central Coast and Central Valley regions | The region would have an estimated 71 primary care clinicians per 100,000 residents by 2030 compared to a state average of 86 per 100,000 residents. |
Primary Care Plays a Critical Role in Medical Delivery

Primary care has a demonstrated impact on managing health problems before they are serious enough to require hospitalization or emergency services. Patients who regularly see a primary care clinician also have lower health costs than those who do not.\(^4\) NPs and PAs will play an increasingly critical role by filling the gap between physician supply and demand for primary care services. By 2030, NPs and PAs will comprise nearly half of California’s primary care clinicians.\(^5\) Their role will be particularly crucial in rural areas where practices find it difficult to recruit physicians due to them typically seeking positions in higher-paying metropolitan areas.

The Alliance Funds Efforts to Develop the Health Care Workforce

The Alliance has launched short and long-term innovative strategies through its Medi-Cal Capacity Grant Program (MCGP) to increase the number of health care providers. These strategies will help alleviate current and future provider shortages and improve access to timely, high-quality health care services for its members.

Provider Recruitment Program allocated $30 million to support the recruitment of new health care professionals who will serve Medi-Cal members in the Alliance service areas. Provider Recruitment grants allow organizations that serve Medi-Cal members to incentivize new providers to join their practice and relocate to the region by subsidizing recruitment-related costs, with an emphasis on awarding high-need specialty and behavioral health providers. In return, applicants agree to serve Medi-Cal patients for a period of three years. In 2022, the MCGP added a Linguistic Competence Incentive to the Provider Recruitment program to increase culturally and linguistically competent member care. Funding is awarded in addition to the grant award if the identified recruited provider holds native or bilingual (oral) proficiency in Spanish, Hmong or another language used during their employment with the awarded health care organization. Since the program’s launch in October 2015, Provider Recruitment grants have helped recruit 201 new health care providers who are serving Medi-Cal members in the Alliance’s service areas (August 2022).

Workforce Development Investments were awarded in February 2018 to support the development of two new medical education programs. Students serve practicum hours at Alliance-contracted clinics, which primarily serve Medi-Cal members, thereby enabling students to establish relationships with these primary care clinics for future employment.

Master of Science Physician Assistant Program at California State University, Monterey Bay (CSUMB) CSUMB received a $750,000 grant to start the first-of-its-kind Master of Science Physician Assistant program in the California State University system in 2020. The funding supports clinical training equipment for students and the initial two-year salaries of a Clinical Coordinator and Community Partner Coordinator. To date, 58 Physician Assistants have graduated from the program (October 2022).

Master of Science in Nursing Program with a Family Nurse Practitioner (FNP) concentration at California State University at Stanislaus (Stanislaus State) Stanislaus State invested its $161,000 grant to purchase six human simulators for realistic and scenario-based training for FNP students. Started in 2019, it is the only in-person FNP program in California’s Central Valley. To date, 55 Family Nurse Practitioners have graduated from the program (October 2022).

Strengthening Health Care, Now and in the Future

The Alliance continues to explore future opportunities to invest in other medical education programs in the region. Evaluation of the initial Workforce Development Investment program outcomes will inform future Alliance funding in this area. The Alliance’s support in recruiting more providers to its service area has resulted in an immediate increase in access to health care for members. Investing in higher education in medicine in the region encourages students to remain locally after graduation and continue to serve the Medi-Cal population with whom they have worked during their training. The Alliance’s workforce investments will ultimately ensure that Medi-Cal members are able to access high-quality care when, where and how they need it.

For more information about the Medi-Cal Capacity Grant Program, please visit [www.thealliance.health/grants](http://www.thealliance.health/grants)

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\(^{4}\) Coffman, Geyn and Himmerick, “California’s Primary Care Workforce: Current Supply, Characteristics, and Pipeline of Trainees.”

\(^{5}\) Maier, “California Demand for Primary Care Providers to Exceed Supply by 2030.”

\(^{6}\) Ibid.

\(^{7}\) Starfield, Shi and Macinko, “Contribution of Primary Care to Health Systems and Health.”

\(^{8}\) Spetz, Coffman and Geyn, “California’s Primary Care Workforce: Forecasted Supply, Demand, and Pipeline of Trainees, 2016-2030.”

\(^{9}\) Ibid.

\(^{10}\) Sinsky et al. “Health Care Expenditures Attributable to Primary Care Physician Overall and Burnout-Related Turnover: A Cross-Sectional Analysis.”