ORANGE COUNTY
WHOLE PERSON CARE
(WPC)

State of Reform Conference
December 5, 2017
WHOLE PERSON CARE

What is It?
Whole Person Care (WPC) is the coordination of physical, behavioral health, and social services in a patient centered approach with the goals of improved health and well-being through more efficient and effective uses for Medi-Cal beneficiaries struggling with homelessness.

When a WPC beneficiary enters an Orange County, CA...

CHAI-H Public Health Services Nurse
Behavioral Health Services (BHS) Outreach and Engagement (or other BHS program)

OR

Smelter Bed (Phase 1)
Community Clinic
Hospital

WPC Connect

Electronic system is notified and the beneficiary’s care plan is created. The system will have the capacity to share data from the care plan bi-directionally with CalOptima for ease of access by medical case management staff.

Beneficiary is connected to wrap-around, applicable programs and services that may include:

1. Recuperative Care (24/7/365)
   - Phase 1: 12,612 bed days
   - Phase 2: 14,708 bed days
   - Total bed days through year 2020

2. One-on-One CalOptima personal care coordinator

3. Coordinated Entry into permanent supportive housing

4. Linkage to mental health and/or substance use disorder treatment

5. Community Referral Network

To learn more, please visit ochcahealthinfo.com/wpc or email wpc@ochca.com
COLLABORATIVE PARTNERS

- CalOptima
- OC Health Care Agency: Behavioral Health Services (BHS) & Public Health’s Comprehensive Assessment Team – Homeless (CHAT-H)
- OC Community Resources (housing)
- 2-1-1 Orange County (coordinated entry training/VISPDAT)
- Illumination Foundation (recuperative care)
- Safety Net Connect (WPC Connect & WPC Care Plan)
- Shelter Providers: Mercy House and Midnight Mission
- College Community Services (housing sustainability)
- St. Jeanne De Lestonnac (community referral network)
- Mission Hospital (South County housing pool)
- Community Clinics: Share Our Selves, Buena Park, Hurtt Family Medical, Serve the People, Korean Community Services, Livingstone, Families Together, North Orange County Regional, and Southland Integrated Services
- Hospitals: St Jude, St. Joseph, Hoag, UCI, Saddleback Memorial, and Orange Coast Memorial
TARGET POPULATIONS

- Persons who are homeless
- Persons who are homeless and living with serious mental illness (SMI)

<table>
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<tr>
<th>Target Population(s)</th>
<th>PY 2</th>
<th>PY 3</th>
<th>PY 4</th>
<th>PY 5</th>
<th>Total</th>
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<tr>
<td>Homeless</td>
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<td>Hospitals/Clinics</td>
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<td>SMI Homeless</td>
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<td>2,736</td>
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WPC OBJECTIVES

- Reduce inappropriate or unnecessary ER visits/inpatient utilization
- Meet needs in real-time: social, medical and behavioral
- Increase readiness for Coordinated Entry process
- Improve/increase success in housing placement
WPC SERVICES TO ALL POPULATIONS

- Emergency Room Notification System
- Community-Based Organization Referral System
- Recuperative/Medical Respite Care
- Hospital and Clinic-Based Care Navigation/Coordination
- Managed Care Personal Services Coordinator (CalOptima)
- Supportive and Linkage Services by Shelter Bed Providers
ADDITIONAL WPC SERVICES TO THE HOMELESS AND SMI POPULATIONS

- Dedicated resource(s) to seek out and secure housing opportunities
- Housing sustainability services, including peer support
- Additional Outreach & Engagement staff to work with WPC Providers in linking beneficiaries to BHS services
WPC Beneficiary

Access Points:
- Hospitals
- Community Clinics
- HCA/Public Health Services
- CHAT-H
- Shelter Bed Providers
- HCA/Behavioral Health Services (BHS) Outreach & Engagement
- Housing Navigators
- Peer Support for Housing (College Community Services)

Services & Systems:
- Safety Net Connect
- Recuperative Care (Illumination Foundation)
- CalOptima
- 2-1-1 Orange County
- BHS Outreach & Engagement
- Lestonnac

Network Navigation Assistance
- Accessing CalOptima Benefits
- Coordinated Entry & VISPDAT Training
- Linking Beneficiaries to BHS Programs
- Community Referral Network

Grounded in Evidence: WPC was designed to support the full continuum of care and prevention for all residents of Orange County. The 2020 WPC Annual Report provides evidence of WPC’s impact:

- 2017: 3,338 days
- 2018: 6,601 days
- 2019: 8,686 days
- 2020: 8,686 days

Services targeted specifically to persons living with mental illness.
COMMUNITY REFERRAL NETWORK

An easy-to-use tool that allows organizations to quickly and accurately refer clients for a variety of services in a matter of seconds.

System Benefits Include:
- Comprehensive Client Health Data Management, for tracking and reporting.
- Improved referral case management with easy user interface.
- Fully integrated workflow provides real-time status of each referral.

OUR MISSION IS TO BRIDGE SERVICE GAPS, CREATE A STRONGER NETWORK OF SERVICES, AND ACHIEVE A HEALTHY, EMPOWERED COMMUNITY. OUR NETWORK WILL CREATE AWARENESS OF UNDERUTILIZED SERVICES THAT ARE AVAILABLE TO UNDERSERVED POPULATIONS.

The program is FREE thanks to contributions from:
Kaiser Permanente  St. Joseph Health System  Orange County Community Foundation  United Healthcare
The County of Orange  Coalition of Orange County Community Health Centers  Tides Foundation

Powered by
AXEIMUM® EHR Community Health - built for CHCs ... by CHCs!

Funded in part by Whole Person Care in partnership with:
PERFORMANCE MEASURES

- Decrease number of ED visits
- Decrease hospital days
- Percentage of recuperative care admissions linked to CalOptima Case Manager
- Increase in PCP visits
- Increase in appropriate medication utilization
- Improve diabetes management
- Increase in completed assessments for Coordinated Entry
- Increase in persons referred to supportive housing who actually receive supportive housing
- Suicide Risk Assessment for SMI clients
- Decrease in psychiatric hospitalizations and psychiatric emergencies (SMI)
- Decrease number of days homeless (SMI)
- Increase number of days in independent living or permanent supportive housing (SMI)
QUESTIONS?

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