ORANGE COUNTY WHOLE PERSON CARE (WPC)

State of Reform Conference
December 5, 2017

health CARE AGENCY

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...

OR

Is referred through the OC Health Care Agency

CHAT-H
Public Health Services Nurse

Behavioral Health Services (BHS) Outreach and Engagement
(or other BHS program)

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

27,320 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

ochealth CARE AGENCY

To learn more, please visit ochealthinfo.com/wpc or email wpc@ochca.com

ochealth CARE AGENCY

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

OC health CARE AGENCY

TARGET POPULATIONS

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

Target Population(s)	PY 2	PY 3	PY 4	PY 5	Total
Homeless	1,100	2,370	2,295	2,295	8,060
Hospitals/Clinics	1,100	2,220	2,220	2,220	7,760
Drop-In/Multi Service	0	150	75	75	300
SMI Homeless	145	366	366	366	1,243
Housing Navigator	0	76	76	76	228
Housing Sustainability	115	230	230	230	805
Outreach & Engagement	30	60	60	60	210
Total	1,245	2,736	2,661	2,661	9,303

OC health CARE AGENCY

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

OC health CARE AGENCY

WPC SERVICES TO ALL POPULATIONS

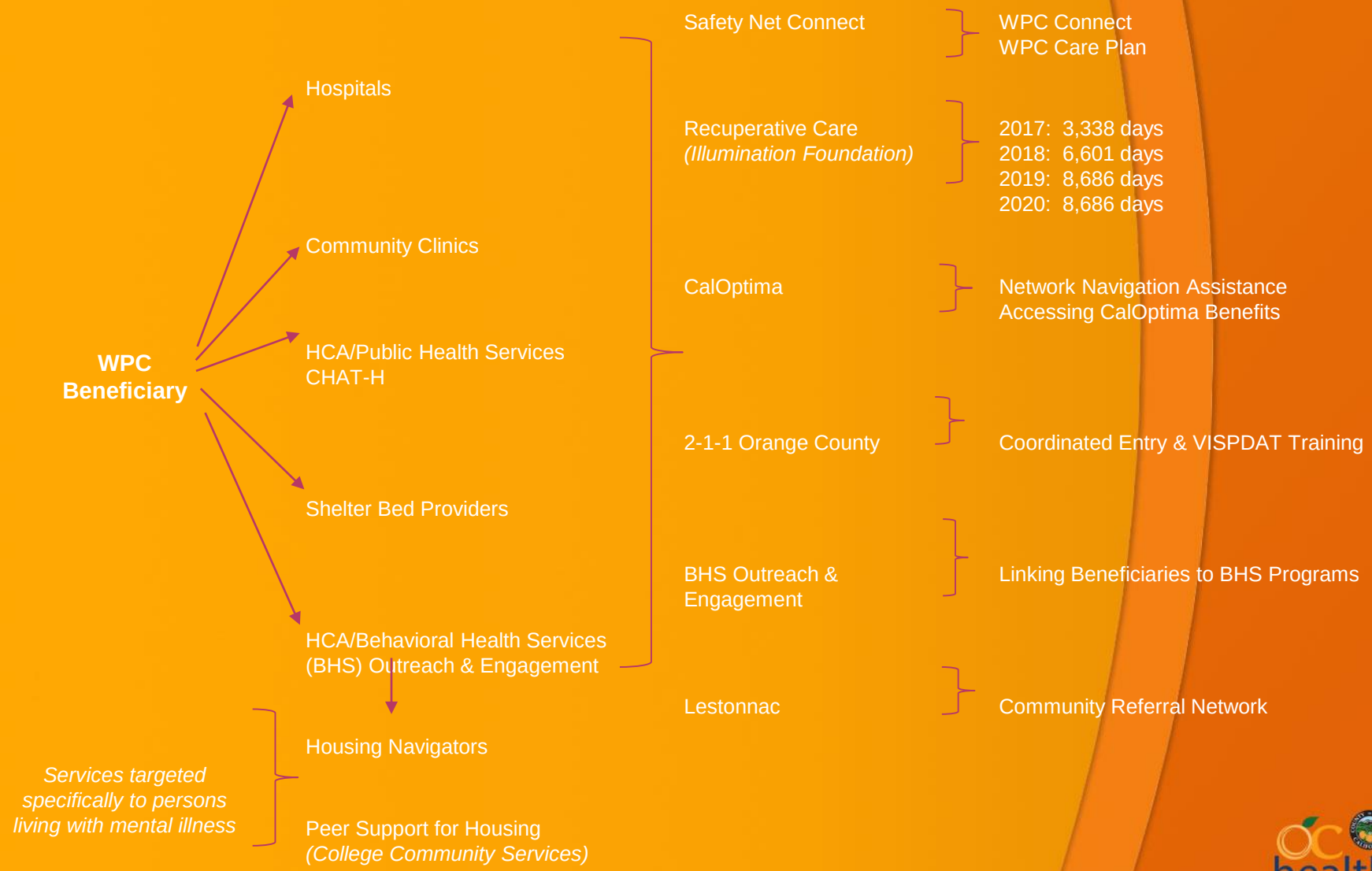
- Emergency Room Notification System
- Community-Based Organization Referral System
- Recuperative/Medical Respite Care
- Hospital and Clinic-Based Care Navigation/Coordination
- Managed Care Personal Services Coordinator (CalOptima)
- Supportive and Linkage Services by Shelter Bed Providers

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

OC health CARE AGENCY

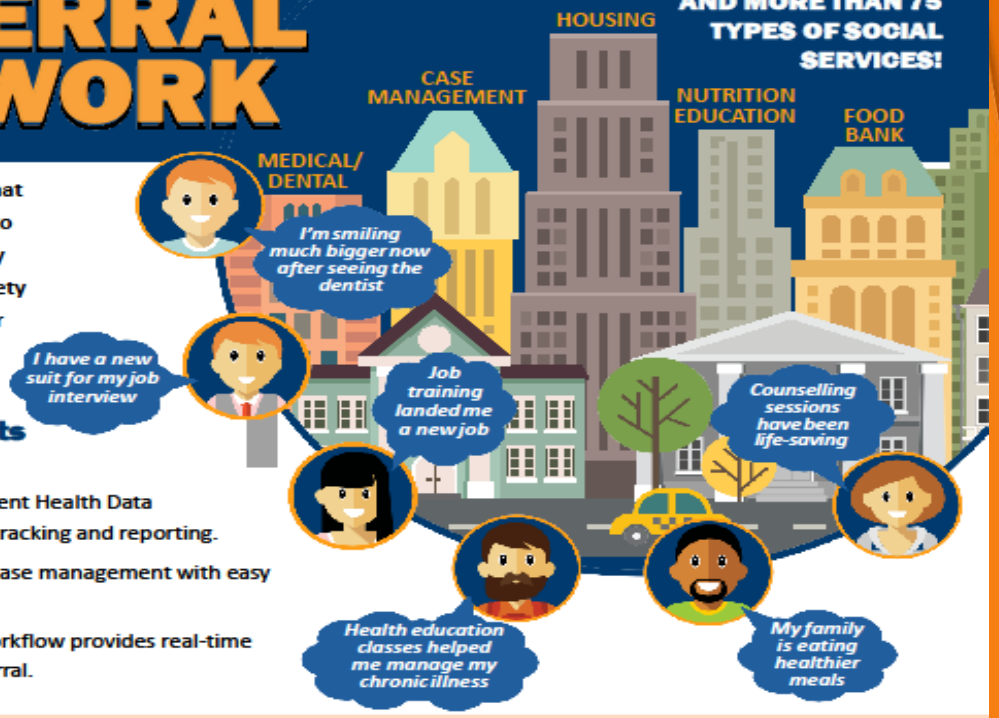
Access Points	Services & Systems



OC health CARE AGENCY

COMMUNITY REFERRAL NETWORK

FACILITATE REFERRALS FOR MEDICAL, DENTAL AND MORE THAN 75 TYPES OF SOCIAL SERVICES!



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 AXEIUM® EHR Community Health built for CHCs ... by CHCs!

Funded in part by Whole Person Care in partnership with: OC health CARE AGENCY

Westminster Free Clinic

OC health CARE AGENCY

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)

OC health CARE AGENCY

QUESTIONS?

Melissa Tober-Beers
Manager, Strategic Projects
mtober@ochca.com
wpc@ochca.com
714-834-5891

OC health CARE AGENCY