



California Association of
Public Hospitals and Health Systems



CWDA



Providing Whole-Person Care to Medicaid High-Utilizers in California: Opportunities for County-Based Pilots in California's 1115 Medicaid Waiver Renewal

A New Opportunity for California

The recent expansion of health care coverage to low-income Californians through the Affordable Care Act has provided unprecedented opportunities both for access to coverage and for enhanced collaboration among providers of historically siloed services to Medi-Cal eligible clients. At the same time, many California counties are taking on increased responsibilities for the provision of services that touch many of our most vulnerable Medi-Cal eligible residents, including those needing behavioral health, social services supports, and those involved with the criminal justice system. Within this context, there is a new opportunity to advance local efforts to improve the health outcomes of some of our most vulnerable populations, to use resources more effectively through a coordinated and more holistic approach across sectors, and to better align services for low-income populations.

Meaningful local collaboration is already happening today. For example, efforts are now underway to coordinate the delivery of mental health and substance use benefits between Medi-Cal Plans, Specialty Mental Health Plans, and county systems. Other local efforts are focused on enrolling vulnerable populations, such as individuals who are being released from county jails, into Medi-Cal coverage and linking them to a health home. To develop systematic approaches that link service delivery across separate systems of care, focus systems on improving health outcomes while using resources more effectively, and take current local efforts to scale, a programmatic and financing structure for Whole-Person Care is needed. The absence of a systematic Whole-Person Care approach today results in poorer health outcomes for many low-income residents, continued utilization of high-cost services (e.g. emergency room, hospitalization, and incarceration), and a less efficient use of Medicaid funds and other critical resources. **With the upcoming renewal of California's 1115 Medicaid waiver, California can build upon and expand current county efforts to test a systematic framework for Whole-Person Care and align payment incentives to ensure effectively coordinated care across multiple local agencies for the highest need patients.**

Whole Person Care Working Definition

The coordination of health, behavioral health and social services in a patient-centered manner with the goals of improved health and well-being for individual and family outcomes and more efficient and effective use of resources.

Vision and Framework

Our vision is for counties and local agencies to provide Whole-Person Care as described in the definition for the highest need patients – their “high users of multiple systems” that have historically been served by county systems – through collaborative leadership and systematic coordination with other public and private entities identified by the county. County agencies will identify these clients with shared data, coordinate their care in real time, and evaluate individual and population progress. Clients will have an individualized care plan and a single accountable, trusted care manager that supports them getting them needed services. Financial flexibility will permit providers across partnering sectors to do what is right for the client and will align incentives for providers to collaborate. These components describe a framework for providing Whole-Person Care.



Whole-Person Care County Pilots in California’s 1115 Medicaid Waiver Renewal

As a centerpiece of California’s 1115 Medicaid waiver renewal demonstrating payment reform and delivery system transformation, California should propose authority for development of County Whole-Person Care Pilots that incorporate the Whole-Person Care framework described above. These pilots would test innovative care coordination and collaboration strategies for the targeted Medi-Cal populations, and would allow participating counties additional flexibility in how they allocate resources to best address the issues contributing to the target population’s health conditions and current utilization of services across sectors. A key component envisioned to be authorized through the waiver is the ability to use waiver funds for services not traditionally covered in the Medicaid program, such as targeted housing assistance. While counties would have flexibility to test approaches for identifying the target population and range of services and supports provided, all participating counties would be measured against a uniform set of identified outcomes focused on overall improvements in health, well-being, and efficiency.