



VENTURA COUNTY
HEALTH CARE AGENCY

CLINIC-BASED COMPLEX CARE MANAGEMENT: BRINGING WHOLE PERSON CARE TO OUR CLINICS

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Board of Supervisors
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Whole Person Care and the Transition to CalAIM



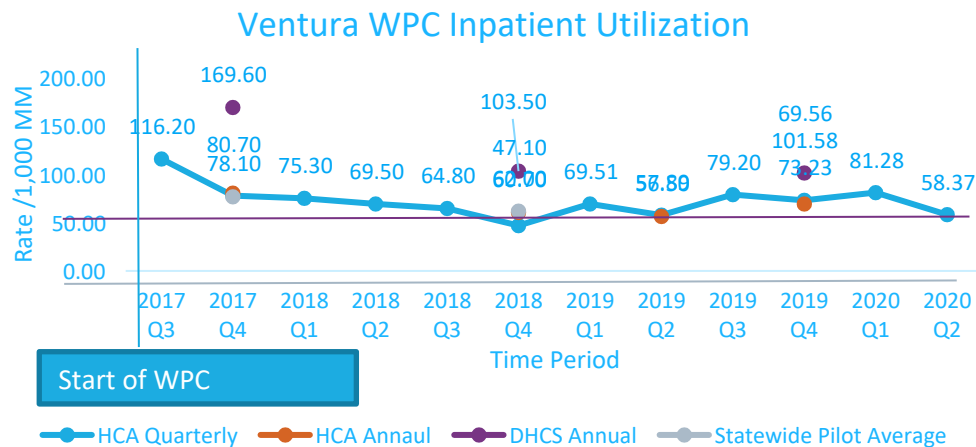
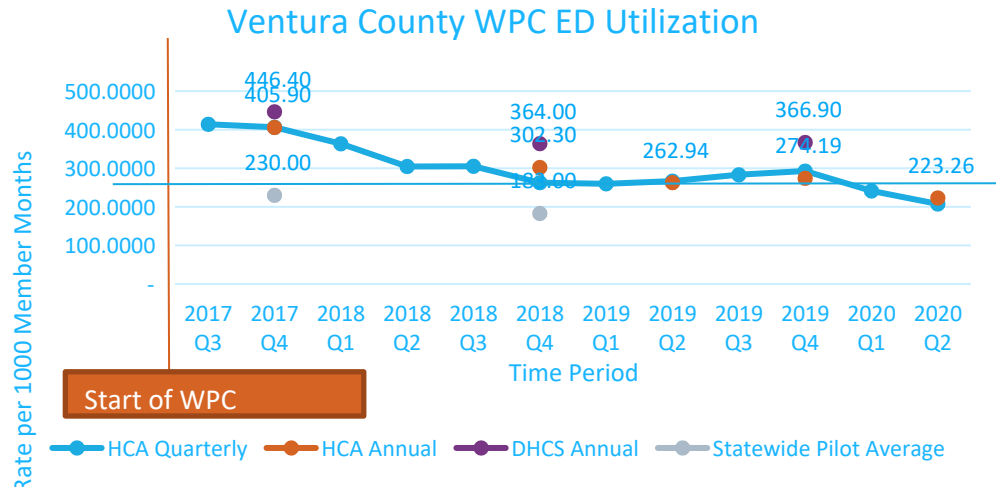
WPC

- Coordinates health, behavioral health, and social services for adult Medi-Cal patients with the most complex care needs
- Ventura County pilot focuses on frequent utilizers of emergency department and hospital services and persons experiencing homelessness
- Pilot ends 12/31/2021

CalAIM

- Builds on successes of WPC pilots
- Provides coordinated care for patients with the most complex needs including:
 - Persons experiencing homelessness
 - Children with complex medical conditions
 - Children and adults with behavioral health and substance use disorders
 - Justice-involved
 - Aging with long-term care needs
- Focus on social determinants of health and reducing disparities
- Phased launch beginning January 2022
- Implemented through Medi-Cal Managed Care Plans as a standard benefit of Medi-Cal

WPC Outcomes



- 49.9% cumulative reduction in emergency department utilization
- 49.8% cumulative reduction in inpatient utilization
- 37.6% reduction in all cause readmissions
- 12.7% improvement in diabetes treatment
- 218.5% improvement in hypertension treatment
- 64.6% reduction in repeat inpatient psychiatric admissions
- 22.9% increase in screening assessments for substance use disorders (SUDs) and 35.6% increase in access to SUD treatment
- 492% increase in suicide risk assessments complete
- WPC metrics for SUD and follow-up after hospitalization for mental health exceed national HEDIS rates across all payor types

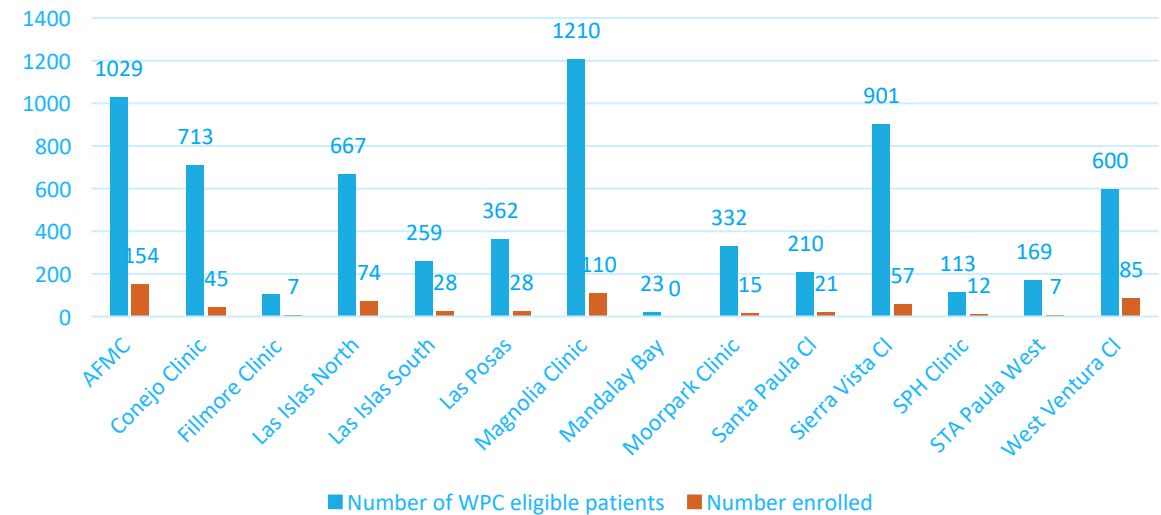
Why bring Whole Person Care to our clinics?

- Localizes health care and care management for patients in one medical home
- Greater communication and coordination between primary care providers and care management teams
- Increases support to providers in caring for our most vulnerable patients

Of 9,045 WPC-eligible individuals:

- 72% are assigned to our clinics
- 49% were seen in our clinics in the last FY

WPC eligible and enrolled patients by clinic



The 5 clinics with the highest number of WPC-eligible individuals are:

1. Academic Family Medicine Center (AFMC)
2. Conejo
3. Las Islas
4. Magnolia
5. Sierra Vista

Clinic-based WPC Teams

	AFMC	Conejo	Magnolia	Las Islas	Sierra Vista	Total
RN	1	1	1	1	1	5
LVN	2	1	2	2	1	8
Community Health Worker (CHW)	5	4	5	5	4	23
Housing Manager						1
Total staff	8	6	8	8	6	37
Total patients	300	200	300	300	200	1300

- WPC Housing Manager to coordinate housing services for WPC decentralized and clinic-based teams: caseload approximately 1:100, 50% time in the field.
- CHW: caseload approximately 1:50, 80% time in the field.
- RN/LVN: caseload approximately 1:100, 50% time in the field.
- Clinic-based teams will also be out in the field addressing the needs of all eligible members of Gold Coast Health Plan.

Funding Source for Salary Costs

Category	Program Year 6, Calendar Year 2021 Budget	Additional Salary Costs
PMPM Bundle	\$4,283,230.94	\$ 2,963,552
PY6 Budget Total:	\$25,988,994.55	

- At the proposed case load thresholds, staffing positions are revenue neutral and fully funded by the WPC per member per month (PMPM) reimbursement rate for care coordination, field care coordination, and field engagement.
- Costs shown are annual salary costs against the WPC Calendar Year 2021 budget.
- Following WPC, salary costs will be covered by CalAIM, which is budgeted at comparable levels to WPC.