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Whole Person Care (WPC) Pilot Program Challenges and Successes: January 2017-December 2019

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Introduction

California's Whole Person Care (WPC) Pilot Program implemented under the Section 1115 Medicaid Waiver was designed to coordinate medical, behavioral, and social services to improve the health and well-being of Medicaid beneficiaries with complex needs. This report summarizes key WPC challenges and successes identified by Pilots between January 2017 and December 2019 and highlights new themes that emerged between July 2019–December 2019 (second half of Program Year 4). Data are drawn from bi-annual narrative reports submitted by Pilots in which they were asked to identify major challenges and successes related to identification, engagement, and enrollment of WPC beneficiaries; data sharing; and coordination of care, as well as biggest barriers to overall WPC Pilot program success.

Identification, Engagement, and Enrollment

Exhibit 1 shows the most frequently identified challenges and successes related to identification, engagement, and enrollment of eligible beneficiaries over time and during the second half of Program Year (PY) 4. In general, challenges to identifying and determining eligibility of prospective enrollees were attributed to poor timeliness or accuracy of data needed to support outreach and enrollment efforts. By contrast, challenges to maintaining enrollee engagement after initial enrollment in WPC were often due to the complex needs and/or transient nature of WPC target populations. Despite these challenges, Pilots reported success in enrolling eligible beneficiaries, which generally improved over time as Pilots' staffing capacity and familiarity with WPC program processes increased.

Analyses of trends over time (data not shown) indicated that challenges and successes related to identification, engagement, and enrollment were more prevalent in early reporting periods and drastically decreased by 2019 as LEs began to meet projected enrollment targets. However, difficulty with maintaining enrollee engagement with the program after initial enrollment in WPC persisted over time.

Exhibit 1: Commonly Identified Challenges and Successes in Identifying, Engaging, and Enrolling Prospective Enrollees among WPC Pilots, January 2017-December 2019
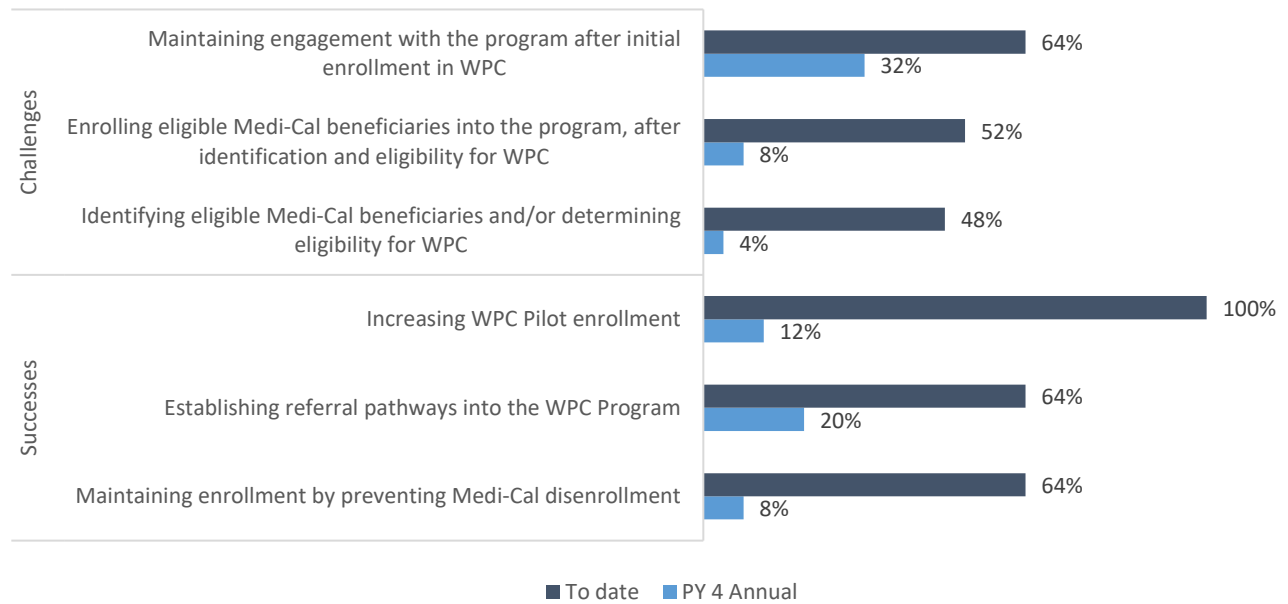
Sources: Program Year 2 Mid-Year, Program Year 2 Annual, Program Year 3 Mid-Year, Program Year 3 Annual, Program Year 4 Mid-Year, and Program Year 4 Annual Narrative Reports (N=25).
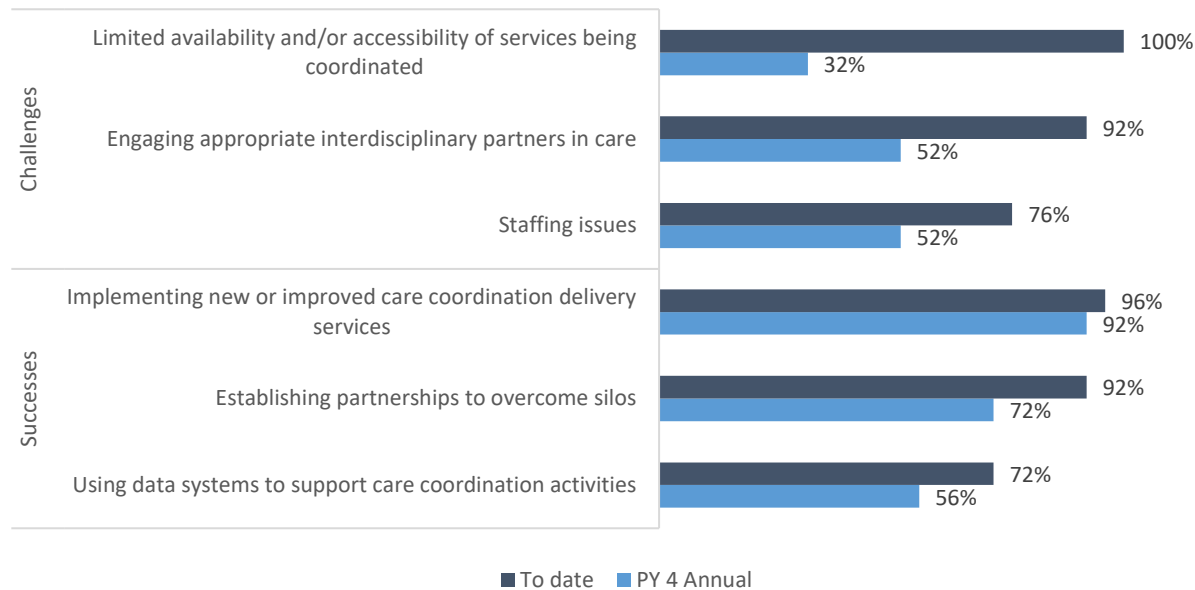Note: "To date" includes any mention over the entire reporting period of January 2017-December 2019; PY4 Annual only includes July-December 2019.

Care Coordination

Exhibit 2 shows the most frequently identified challenges and successes related to care coordination over time and for the second half of PY4. Pilots primarily reported challenges with limited availability and/or accessibility of services being coordinated, particularly housing. Challenges related to partner engagement and staffing also persisted over time. However, early reporting periods typically described staff recruitment and training issues while PY 4 focused more on retention and turnover, particularly among staff concerned about whether WPC activities would be sustained.

Despite these challenges, by PY 4, the majority of Pilots described meeting milestones in developing case management platforms, integrating electronic health records, and utilizing real-time notifications to support care coordination efforts. Pilots also highlighted successes with implementing new or improved care coordination processes (e.g., regular case conferences with interdisciplinary team members to promote shared learning and accountability for care, standardized workflows), establishing partnerships to overcome care silos, and using data systems to support care coordination activities (e.g., sharing relevant enrollee information amongst multiple organizations involved in care). Several Pilots also reported effectively utilizing synergies with existing, complementary programs and initiatives (e.g., Targeted Case Management) to prepare for sustainability of WPC care coordination activities.

Exhibit 2: Commonly Identified Challenges and Successes in Care Coordination among WPC Pilots, January 2017-December 2019

Sources: Program Year 2 Mid-Year, Program Year 2 Annual, Program Year 3 Mid-Year, Program Year 3 Annual, Program Year 4 Mid-Year, and Program Year 4 Annual Narrative Reports (N=25).
Note: "To date" includes any mention over the entire reporting period of January 2017-December 2019; PY4 Annual only includes July-December 2019.

Data Sharing and Reporting

Exhibit 3 summarizes the most frequently identified challenges and successes related to data sharing and reporting over time and for PY 4. Overall, Pilots most frequently identified challenges related to reporting on DHCS-required metrics (e.g., due to inconsistencies in how data were being reported across partner organizations). In PY4, Pilots also emphasized partner and staff hesitation to data integration and/or use of new data systems (e.g., due to beliefs about risks associated with data sharing) and inability to access necessary data for reporting (e.g., due to quality concerns or competing organizational priorities). Challenges related to implementing planned data sharing systems decreased over time, though Pilots continued to identify desired improvements in data sharing capabilities, particularly related to accessibility/usability of data by frontline staff and extracting data for reporting purposes.

Despite these challenges, Pilots reported successes with developing new data sharing tools (e.g., case management platforms, health information exchange); sharing data with diverse WPC partners, particularly managed care organizations and mental health agencies; and use of data to inform outreach and care coordination activities (e.g., high risk notifications when enrollees are admitted to the emergency department). Successes primarily related to increased use and utility of data sharing systems over

time. In particular, Pilots highlighted use of data to inform program decisions and to gain a more comprehensive understanding of enrollee health in real-time (e.g., use of dashboards displaying key metrics).

Exhibit 3: Commonly Identified Challenges and Successes in Data Sharing among WPC Pilots, January 2017-December 2019
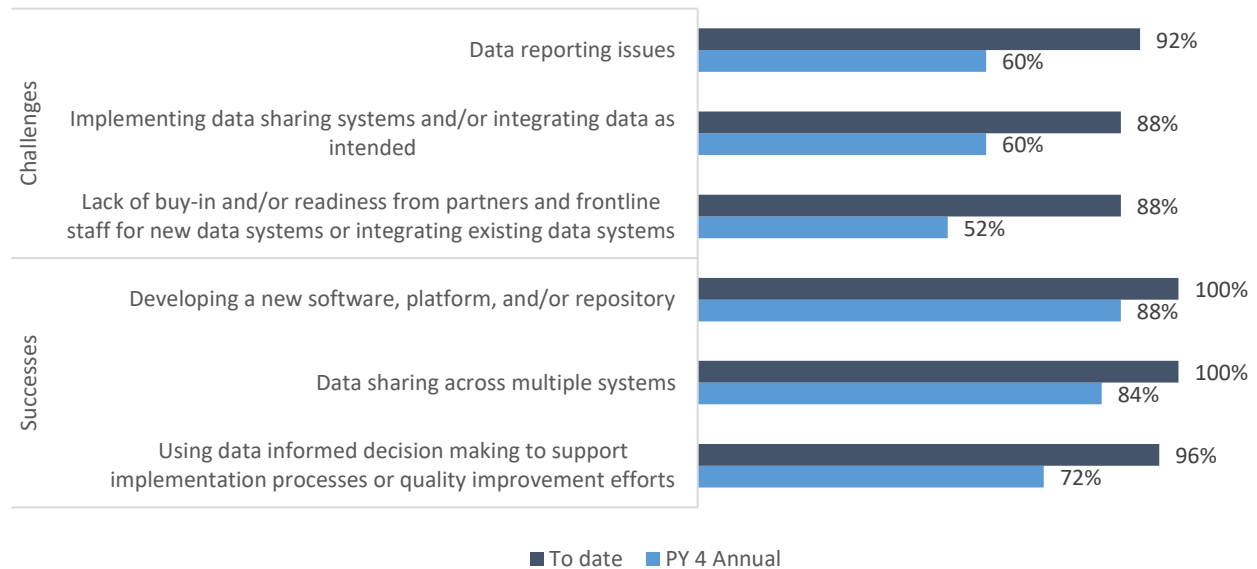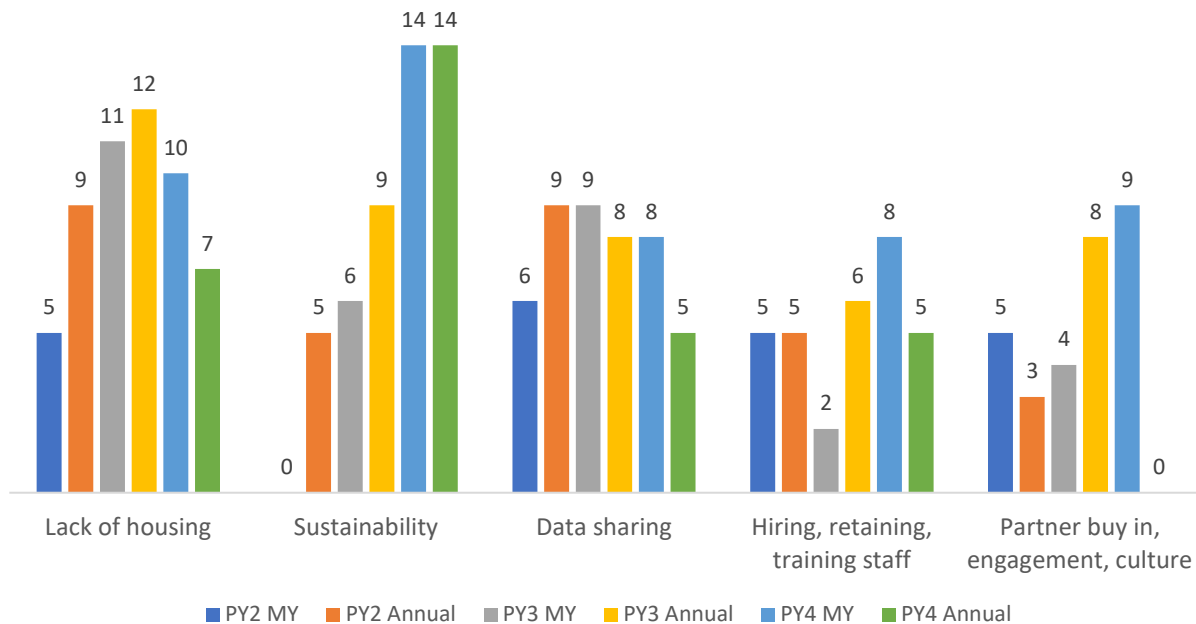

Sources: Program Year 2 Mid-Year, Program Year 2 Annual, Program Year 3 Mid-Year, Program Year 3 Annual, Program Year 4 Mid-Year, and Program Year 4 Annual Narrative Reports (N=25).
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Biggest Barrier to WPC Success

Exhibit 4 summarizes the biggest barriers to WPC success identified by Pilots over time. Across all reporting periods, the biggest barriers to WPC success were insufficient housing inventory; sustainability of WPC; data sharing with partners; staffing challenges related to hiring timelines and retaining staff once hired; and gaining partner buy-in and engagement for care coordination. Analyses of trends suggest that challenges related to sustainability increased over time, while other challenges remained relatively consistent. In PY4, there was an increased emphasis on improving partner reporting and demonstrating program outcomes (6 Pilots), as well as limited capacity of existing services (6 Pilots; data not shown). The majority of Pilots expressed concerns related to the sustainability of the program with uncertainty around funding and ability to maintain key care coordination services into 2021.

Exhibit 4: Biggest Barriers to Whole Person Care Success among WPC Pilots, by Reporting Period, January 2017-December 2019

Sources: Program Year 2 Mid-Year, Program Year 2 Annual, Program Year 3 Mid-Year, Program Year 3 Annual, Program Year 4 Mid-Year, and Program Year 4 Annual Narrative Reports (N=25).

Conclusion

Challenges in WPC varied across Pilots and over time. Overall, Pilots reported addressing identified challenges and highlighted successes with infrastructure development and provision of comprehensive care coordination services. Certain concerns related to staffing, data sharing, partner buy-in, and housing inventory persisted over time but by 2019, Pilots were focused primarily on sustaining program gains and addressing systemic barriers to service provision, particularly around lack of housing.

Overall, Pilots have demonstrated significant strides towards providing comprehensive care coordination and establishing data infrastructure to support it. As Pilots move into 2020, they will need to take concrete steps (e.g., secure funding, find synergies with existing and future programs) to sustain WPC best practices and infrastructure beyond the life of the pilot for continued impact.