



North Central Accountable
Community of Health

Clarifying the WPCC Structure

Whole Person Care Collaborative Meeting 12/4/2017

PRESENTATION GOALS

- Revisiting health transformation context
- A look back at WPCC evolution
- Where we are now
- A proposed structure as we move forward

2014 – Context Healthier WASHINGTON

- Jan - **State Health Care Innovation Plan** (SHCIP) developed, under Round 1 State Innovation Models (SIM) federal funding
- Jun - **Legislation** supports healthcare transformation efforts
 - E2SHB 2572: Concerning the effectiveness of health care purchasing and transforming the health care delivery system
 - 2SSB 6312: Concerning state purchasing of mental health and chemical dependency treatment services.
- Jul - **SIM Round 2** proposal (\$93M) submitted, to support implementation of the innovation plan over 4 years beginning in 2015
- Aug - **Community forums** organized in our region to review and discuss the State's health improvement initiative

2015 – Context

State Innovation Model (SIM) funding secured (\$64M)

Catalyzed many changes in 2015 and 2016, including:

- Formation of ACHs across WA (NCACH officially designated in Jan 2016)
- Formation of CHIs in our region
- Regional health initiatives
 - Care transformation workgroup
 - Population health workgroup
- Payment redesign
- Regional Community Health Needs Assessment (released end of 2016)

2016 – Context

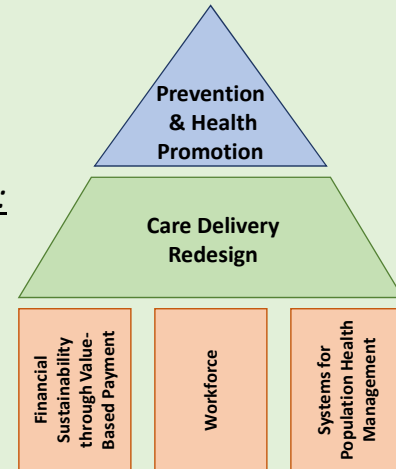
- Primary care organizations are invited to participate in a *Whole Person Medical Home Model* (planning for of a region wide Patient-Centered Medical Home model)
- Creation of a Primary Care Transformation Collaborative which evolved into the Whole Person Care Collaborative
- Setting the stage to assess readiness for Whole Person Care (Qualis assessments)

2017 – Context

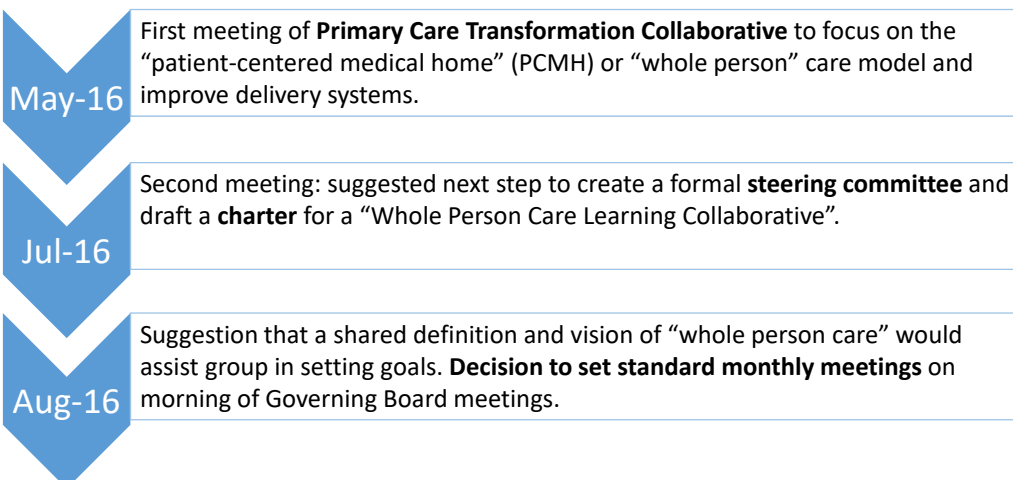
Medicaid Demonstration (aka 1115 Waiver)

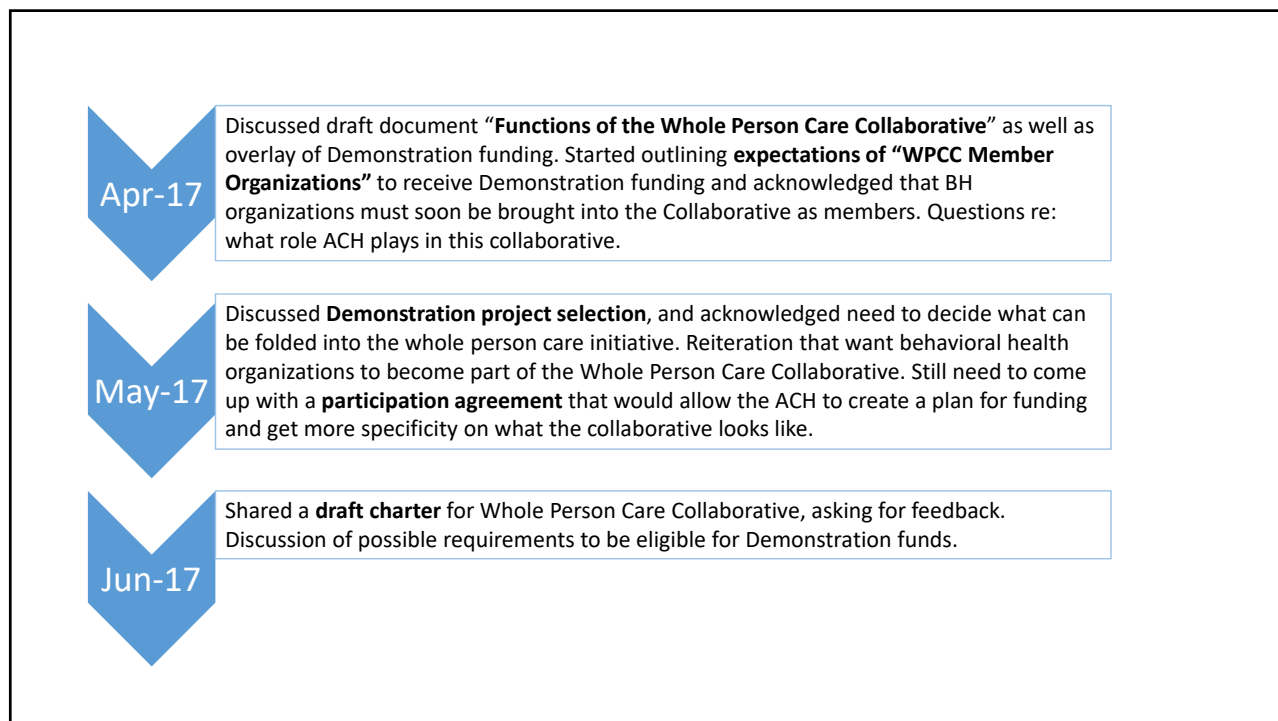
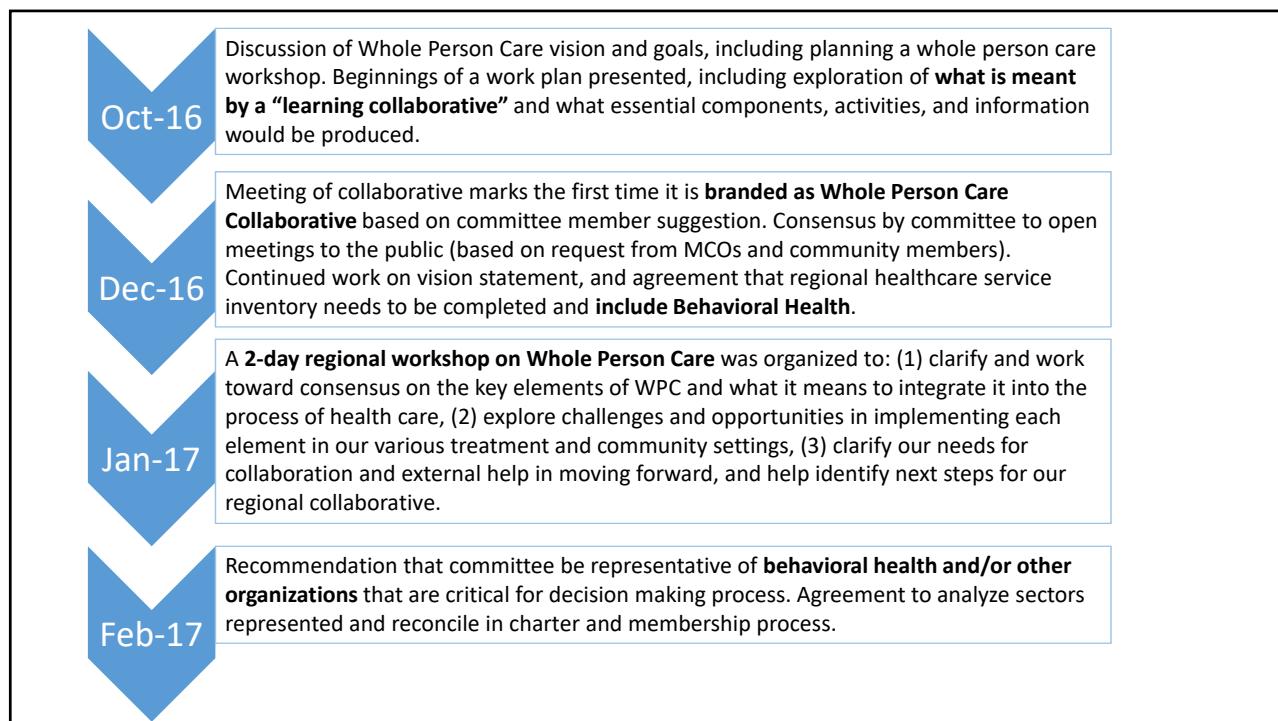
Catalyzed more changes which are still evolving:

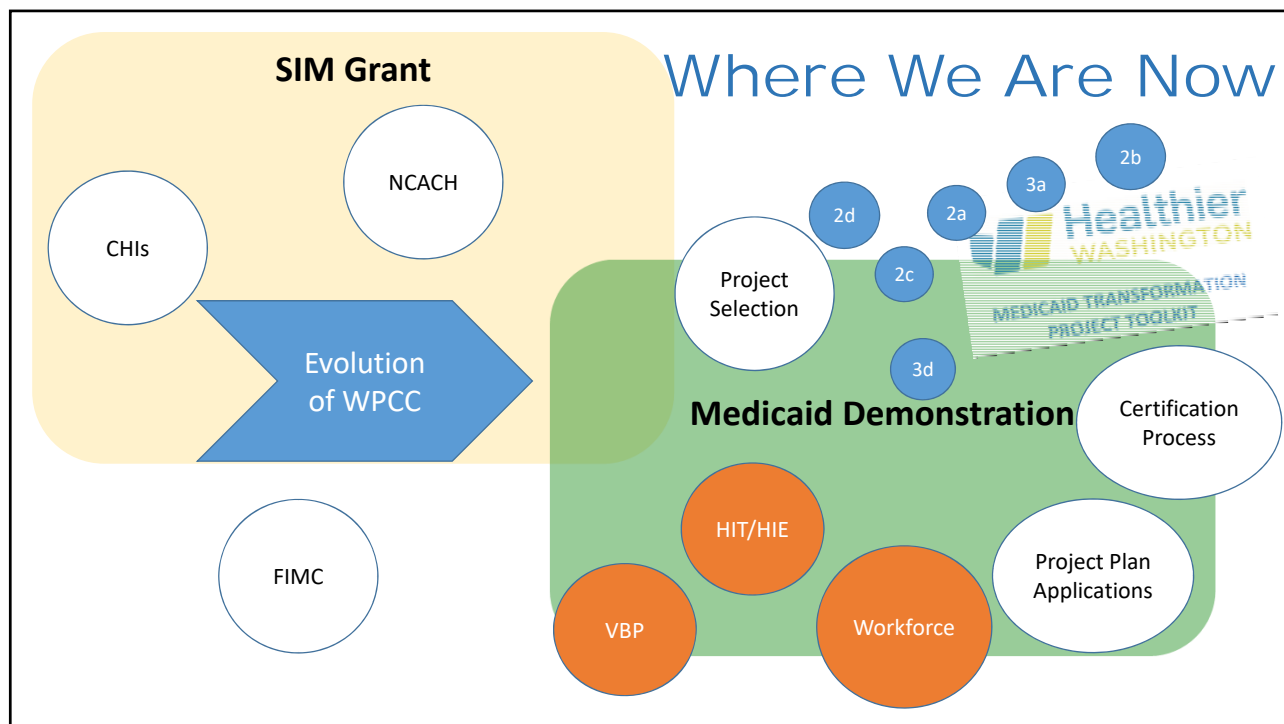
- Demonstration project selection
- Staffing of NCACH
- Certification 1 and 2 processes
- Preliminary project plan applications



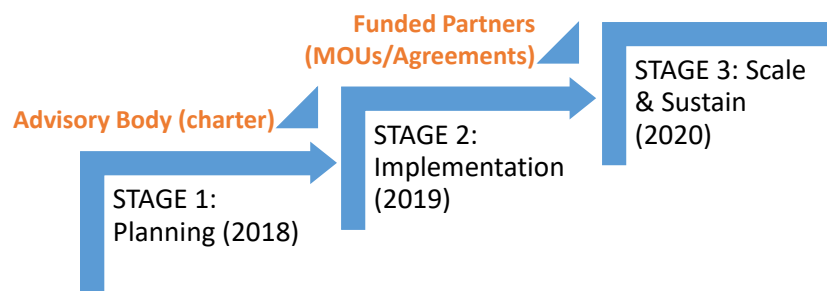
WPCC Evolution







Demonstration Project Stages

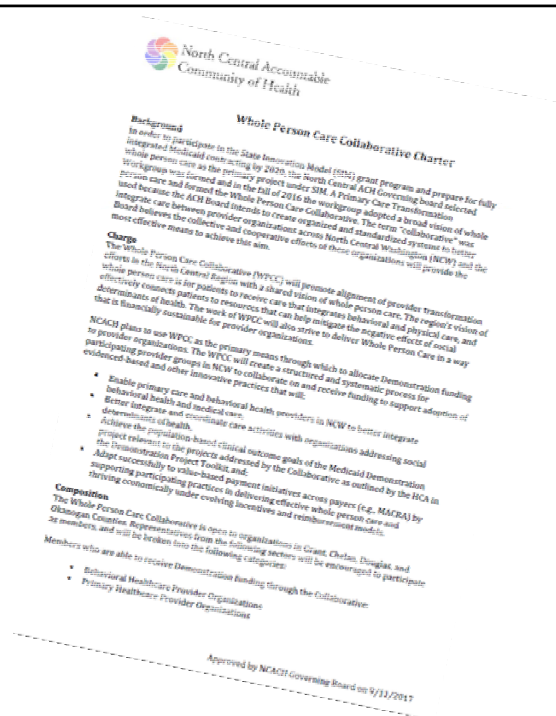


PLANNING QUESTIONS

- What's our selected evidence-based approach?
- What's our target population?
- Where do we begin and how do we scale?
- Who are implementation partners?
- What is recommended funding process?

Current WPCC Charter

- Language not clear on how WPCC dovetails with Demonstration. Who is guiding project planning and implementation processes (e.g. scoring, funding mechanism)?
- CBOs are missing from the picture
- Delineates funding eligibility, without having the full picture of what implementation will look like
- Member obligations - language linked to role of funded partners
- Roles and responsibilities - language linked to advisory role
- Do you sign the membership agreement if you want to be a member but are not eligible for funding?



Issues to reconcile

- What is the Whole Person Care Collaborative? A Steering Committee? A learning collaborative?
- Who is helping guide the planning and implementation processes of Demonstration projects linked to the WPCC?
- Who is a member? Who gets funding? Are those one and the same?
- What about partners who are invested in whole person care but are not primary and behavioral health providers?
- Where do social service organizations fit in, given our vision of whole person care? (social determinants of health)
- How do the Medicaid Demonstration projects fit into WPCC?
- How does WPCC fit into other project workgroups?



Proposed Structure

- Build on Whole Person Care and PCMH framework initiated through SIM Grant
- Take the lead on two Medicaid Demonstration Projects
 - 2a: Bi-Directional Integration of Physical and Behavioral Health through Care Transformation
 - 3d: Chronic Disease Prevention and Control

