



On June 4, 2018, the Board approved the reorganization of H&SS with the goal of integrating services across divisions and assisting clients in navigating available programs. This contract provides for the technical services to build an electronic case management system that integrates with various data sources to assist clients with rapid enrollment and management of their needs. The total contract amount of \$782,000 will be funded with \$330,900 Whole Person Care (WPC) State grant funding, \$371,000 in one-time State Homeless Mentally Ill Outreach and Treatment (HMIOT) funding, and \$80,100 No Place Like Home (NPLH) MHSA State funding. The costs associated with preparing the agenda item are nominal and absorbed by the department's FY2019/20 Adopted Budget. There is no additional financial impact to the County General Fund.

### **DISCUSSION:**

On October 25, 2016, the Board accepted the WPC grant as part of Medi-Cal 2020, California's five-year Section 1115 Medicaid waiver to transform the way Medi-Cal provides services by improving quality of care, access, and efficiency. WPC specifically focuses on changing the fragmented and expensive health care system to a more comprehensive health care delivery model assessing the whole person with an integrated care management approach. In Solano County this has included clients that are experiencing housing, mental health, substance abuse, and/or chronic disease issues.

On September 11, 2018, the Board approved the Homeless Mentally Ill Outreach and Treatment (HMIOT) grant to provide services for individuals with serious mental illness and who are homeless or at risk of becoming homeless. On January 22, 2019, the Board approved the submission of the No Place Like Home (NPLH) grant, to acquire, design, construct, rehabilitate, or preserve permanent supportive housing for adults with mental illness or children with severe emotional disorders and their families. Both the HMIOT and NPLH grants will support this contract.

On November 6, 2018, the Board adopted a resolution, authorized by Assembly Bill (AB) 1421 and effective January 1, 2019, authorizing H&SS to operate as an integrated and comprehensive County Health and Human Services agency. This integration initiates the process of addressing "siloes" funding sources by allowing funding to follow clients based on need; however, additional work is required to achieve client focused integration.

On May 21, 2019, H&SS participated with the Board of Supervisors in a workshop (Attachment B - May 21 Presentation) that focused on three areas: (1) national and State trends and changes in health and social services delivery; (2) results of an internal assessment of strengths and vulnerabilities within H&SS; and (3) how H&SS proposes to improve health and social services delivery over the next 3-5 years. As discussed during the workshop, implementation of the proposed reorganization will create a client/population-centric focus for H&SS and integrate programs and activities to generate a more streamlined client experience. Part of the initial implementation is a pilot program of navigation teams and a navigation kiosk system to target and assist clients utilizing multiple programs.

Ongoing, comprehensive and effective navigation services will be provided so that clients can both readily identify and engage in all of the services for which they are eligible and have their services coordinated to the extent feasible. For clients seeking only one or a few H&SS services, the navigation system will assist them with rapid enrollment and management of their needs. For individuals and families eligible for multiple H&SS services, and for clients with complex needs or who are experiencing difficulties in accessing services, more intensive navigation services will be provided by teams skilled in case management. In these situations, clients will be assisted with enrollment processes, coordination of service delivery and ongoing follow-up as needed. The intent of the focused case management and navigation for higher need population of clients is to have improved and more efficient overall access to care resulting in successful outcomes, earlier intervention to address clients' needs and prevention of the need for more intensive services.

The case management information system that H&SS has used for WPC cannot accommodate connections to

additional H&SS systems. Additionally, there are multiple manual processes that prevent efficient care coordination. This contract is to institutionalize care coordination practices that were learned during the WPC pilot and to train staff on using the system. The proposed electronic case management system will provide the necessary technology enhancement to provide the navigation services and service integration. The contract leverages on Hawaii Department of Health's RFP which had a similar scope of work. The Department of Information Technology (DoIT) was involved with the development of this contract to address the case management upgrade for the Whole Person Care program and the broader integration program.

This case management upgrade will include an integration of case notes and program outcomes for clients with a serious mental illness (SMI), who have substance abuse issues, who are homeless or at-risk-of-homelessness, or who have multiple chronic diseases. Program participants will have the option to share their eligibility, program outcomes, and other information if they sign a release of information. The system will follow best practices to keep participants' data private, including Federal Risk and Authorization Management Program (FedRAMP), Health Insurance Portability and Accountability Act (HIPAA) and other related regulations.

The goal for this initial phase is to allow access of information on program participants receiving primary care, behavioral health and/or housing services, and share case notes in a single, virtual location.

**ALTERNATIVES:**

The Board may choose not to approve the contract with RSM. This is not recommended because it would prevent H&SS from leveraging already-awarded grant dollars to sustain the goals of Whole Person Care and integration of services.

**OTHER AGENCY INVOLVEMENT:**

DoIT was involved with the development of this contract and concurs with the recommendation.

**CAO RECOMMENDATION:**

**APPROVE DEPARTMENTAL RECOMMENDATION**