Whole Person Care (WPC) is a pilot program within Medi-Cal 2020, California’s Section 1115 Medicaid Waiver. WPC is designed to improve the health of high-risk, high-utilizing patients through the coordinated delivery of physical health, behavioral health, housing support, food stability, and other critical community services.

Who does the program serve?
The Kern County WPC pilot targets the needs of high utilizers of emergency and inpatient services with two or more chronic conditions, with an emphasis on those who are homeless or at risk of becoming homeless, and those recently released from jail.

What health care and social service organizations are participating?
Fourteen partner organizations are participating in Kern County’s WPC pilot project including:

- **Community Connection for Child Care (CCCC):** Provider of child care and development
- **Golden Empire Gleaners:** Local food bank
- **Health Net Community Solutions:** Medi-Cal managed care plan
- **Housing Authority of Kern County (HA):** County housing authority and provider of affordable housing in Kern County
- **Kern County Aging & Adult Services (AAS):** County advocate for older adults and disabled individuals
- **Kern County Department of Human Services:** County safety net program provider
- **Kern County Employers’ Training Resource (ETR):** County workforce training provider
- **Kern County Homeless Collaborative:** Community-based organization with a network of nonprofit service providers
- **Kern County Mental Health (KCMH):** County mental health provider
- **Kern County Probation:** County probation department
- **Kern County Public Health (KCPH):** County public health organization
- **Kern County Sherriff’s Office:** County detention facility provider
- **Kern Health Systems:** Medi-Cal managed care plan
- **Kern Medical:** County public health care system and lead entity

What services are included?
WPC enrollees in Kern County receive a standard set of services by Kern Medical, including intensive care coordination and personalized care plans, wellness/lifestyle education and health coaching, regular mental health screenings, access to telephone visits, and medication management. Those who are experiencing or at risk of homelessness also have access to additional services, such as tenant screenings and housing assessments, assistance with the application process, and help resolving disputes.

Lead Entity: Kern Medical

Estimated Total Population: 2,000 individuals over the pilot period

Budget: $15.7 million in annual federal funds, matched by an equal amount of local funding provided by Kern Medical
with landlords or neighbors. A different set of additional services is available to enrollees returning to the community post-incarceration, including an enhanced level of care coordination for the first 90 days, support identifying and applying for assistance programs, and life skills transition classes geared towards reducing recidivism.

**How are participants enrolled?**

WPC utilizes two different methods of enrolling patients. For patients who are being released from jail, potential enrollees receive an immediate wellness check at an on-site clinic established at the jail facility. Enrollment specialists collaborate with the Sherriff’s office to identify potential enrollees for WPC and assist with Medi-Cal paperwork.

For all other clients, enrollment specialists receive referrals from Medi-Cal managed care plans for beneficiaries with two or more chronic conditions, and perform outreach to arrange appointments with the WPC Patient-Centered Medical Home (WPC PCMH).

**How is data being shared?**

Kern County is deploying a software platform that collects and houses electronic medical record data, as well as data related to social determinants of health (such as education level, employment status, and social services support needs). The platform allows for bi-directional data sharing across partnering organizations, as well as data analytics capabilities, allowing partners to meet all the needs of their patients.

> “Whole Person Care gives us the chance to change the lives of the individuals we see in our inpatient beds and emergency rooms over and over, by walking them through personalized care plans, giving them the help they need to learn about and manage their conditions, and linking them to services that can give them the life skills and social supports they need to stay healthy.”

— Tyler Whitezell  
**Vice President, Administrative Services**  
**Kern Medical**

Learn more at [caph.org/wpc](http://caph.org/wpc)