Together We Can Build a Healthy California for All
Mark Ghaly, MD, MPH

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Who We Are

At the California Health and Human Services Agency our Departments and Offices provide programmatic resources through the delivery of both short-term and long-term public benefits, including nutrition assistance, child care, health care coverage, housing support, employment support, child support services, child welfare, and many more.

“Together we must work with counties, cities, and communities to make California a healthy, vibrant, and inclusive place to live, play, work, and learn.”

12 Departments  ●  5 Offices  ●  34,000 Employees  ●  $163 Billion Budget
Our Strategic Priorities & Guiding Principles

**Build a Healthy California for All**
- Adopt a Culture of Collaboration & Innovation

**Integrate Health and Human Services**
- Focus on Measurable Outcomes & Value Generation
- Use Data to Drive Action

**Improve the Lives of California’s Most Vulnerable**
- See the Whole Person
- Put the Person back in Person-Centered
## Focus on Children

<table>
<thead>
<tr>
<th>Program</th>
<th>Children</th>
<th>Adults</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medi-Cal</td>
<td>64.0</td>
<td>36.0</td>
</tr>
<tr>
<td>CalWORKs</td>
<td>25.4</td>
<td>74.6</td>
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<tr>
<td>CalFresh</td>
<td>53.5</td>
<td>46.5</td>
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<tr>
<td>Child Welfare</td>
<td>58.4</td>
<td>41.6</td>
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<tr>
<td>Developmental</td>
<td>43.6</td>
<td>56.5</td>
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<tr>
<td>WIC</td>
<td>26.8</td>
<td>73.2</td>
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<tr>
<td>FPACT</td>
<td>95.4</td>
<td>4.6</td>
</tr>
<tr>
<td>IHSS</td>
<td>93.4</td>
<td>6.6</td>
</tr>
</tbody>
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*Note: (N=15,519,833) for Medi-Cal, (N=1,508,745) for CalWORKs, (N=5,600,217) for CalFresh, (N=315,319) for Child Welfare, (N=383,137) for Developmental, (N=1,871,167) for WIC, (N=1,723,277) for FPACT, (N=629,103) for IHSS.*
The Affordable Care Act is working in California

California’s uninsured rate dropped nearly 60% since 2013, from 17.2 percent to 7.2 percent.

Subsidies and Reinstating Mandate helped increased new enrollment in Covered California by over 40% vs last year.

Source: California Health Care Foundation Health Care Almanac, 2018.
Shift to Value-Based Care Delivery – Pay for Health not just Healthcare
Population Health Drivers

Health starts in our homes, schools, workplaces, neighborhoods, and communities.

We must continue to improve coverage, access and quality of care with a focus on equity that fits the needs of California.

Simultaneously, we must move toward making greater ecosystem Investments that not only improve health but secure health.
Building a System of Care

- Programs and services must complement one another to best address the needs of the people we serve.
- Siloed systems yield siloed responses.
- Deliver services that are person-centered and not program-centered.
CalAIM
California Advancing and Innovating Medi-Cal

• First time the state has proposed to make a state General Fund investment in a waiver proposal. The proposed 2020-21 budget includes $695 million ($348 million General Fund), growing to $1.4 billion ($695 million General Fund) in 2021-22 and 2022-23.

• Medi-Cal helping address many complex challenges facing California’s most vulnerable.

• New optional benefits for building clinically-enriched housing settings, such as recuperative care and respite care along with various other housing supports service.

• New set of services to support justice-involved populations with serious clinical concerns so they can transition out of incarcerated settings with greater supports.

• Transformation of behavioral health system through payment and program reform to drive innovation, integration, improved access and a true orientation around metrics and outcomes.

• Focus on the behavioral health needs of children, and overall health of children in foster care.
Integration of Behavioral Health

• Integrates mental health and substance use disorder treatment by creating one, aligned system of County based specialty behavioral health care.

• The enhanced case management benefit provides an opportunity to better coordinate services across the full range of Medi-Cal services helping bridge the chasm between physical and behavioral health.

• Full Integration Plans: Responsibility for (most) all Medi-Cal benefits within one contracted entity as a way to integrate services in a human-centered fashion.

• As the Governor said in the State of the State, we need a health system that cares for “the sum of our parts, not some of our parts.”
Mr. Jones is a 45 year old, poorly-controlled diabetic who sleeps under a bridge on the 101 Freeway in Los Angeles City and County.

Mr. Jones needs:

(1) sufficient supportive services; (2) regular and reliable primary care for his chronic physical and behavioral health needs; and (3) a home.
Opportunity: Mr. Jones in 2021

Establish Flexible Fund

Innovative, scalable regional approach, that coordinates investments and yields immediate outcomes.

Leverage Medi-Cal

CalAIM presents an opportunity to provide housing transition and tenancy support services.

The Housing and Services Fund gives Medi-Cal health plans a place to make investments that will yield better outcomes for their beneficiaries.
Workforce: Backbone of our Vision

We need to be laser focused on the state of our workforce.

How do we create a stronger workforce?

How do we create jobs people want and want to keep?

How do we leverage the great strength of California’s diversity to meet our health needs?
Thank you!