



CalOptima Health

Transforming Medi-Cal Policy into Practice: A Journey through CalAIM

Our Mission

To serve member health with excellence and dignity, respecting the value and needs of each person.

Our Vision

By 2027, remove barriers to health care access for our members, implement same-day treatment authorizations and real-time claims payments for our providers, and annually assess members' social determinants of health.

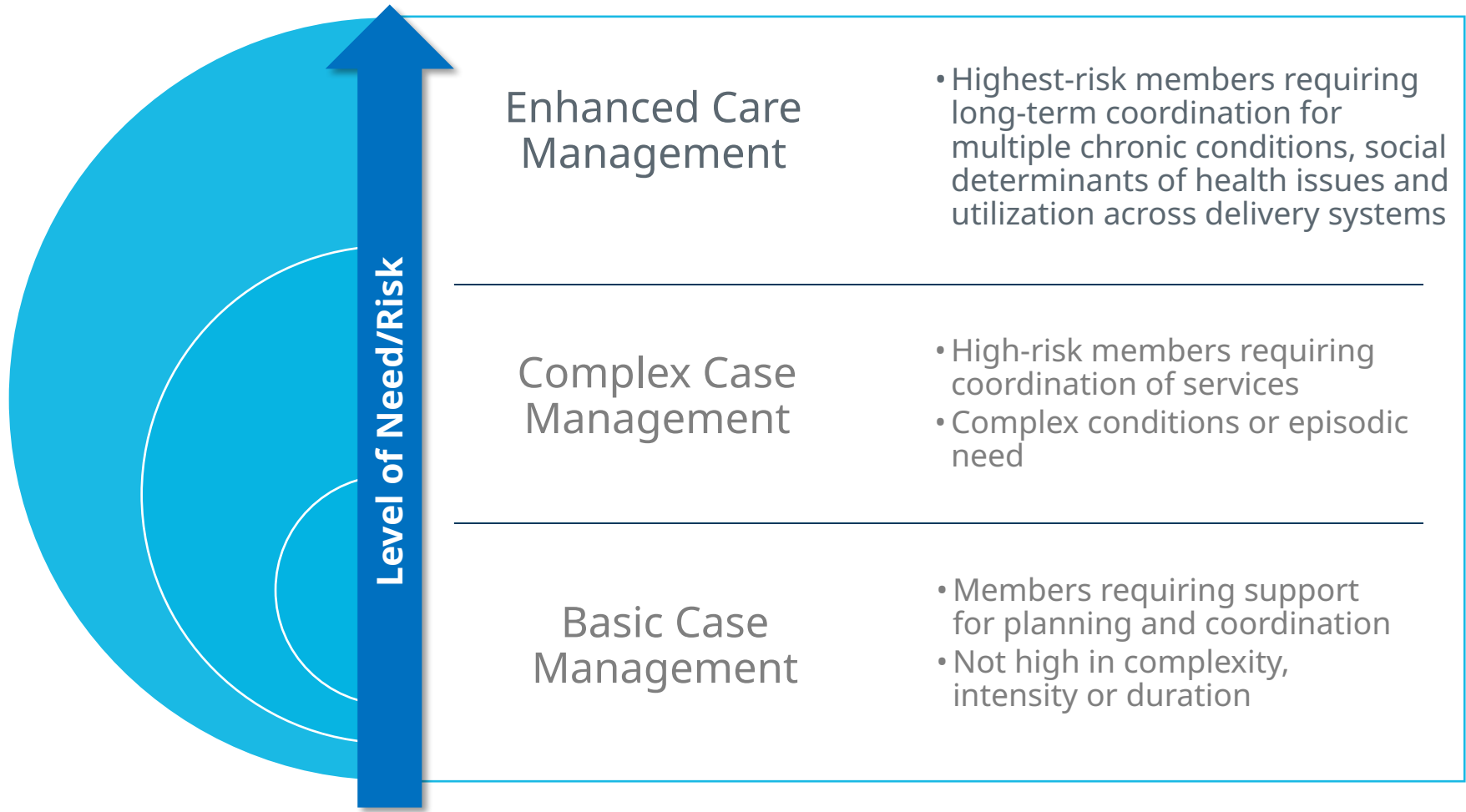
What Are DHCS's Medi-Cal Transformation Goals?

- New and improved services
- Going beyond the doctor's office or hospital and community-based
- More coordinated, person centered and equitable health system
- Addressing physical, social and mental health needs



ECM

Levels of Care Management

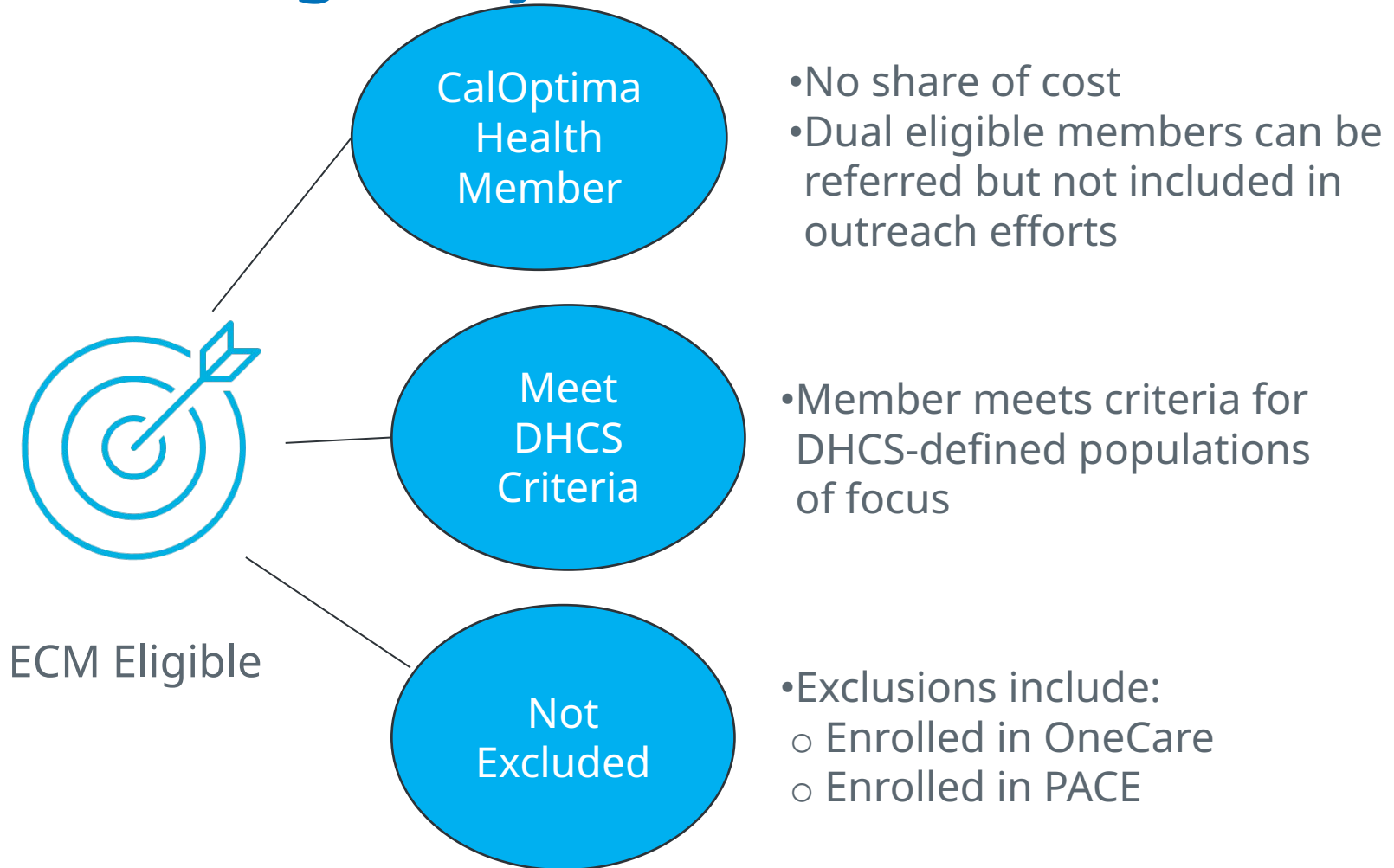


What is ECM?

- A whole-person approach to care that addresses the clinical and non-clinical needs of members with the most complex medical and social needs
- Members will have a single lead care manager who will coordinate care and services among the physical, behavioral, dental, developmental and social services delivery systems



ECM Eligibility



Eligible Populations of Focus

- Adults, youth, children, and families experiencing homelessness.
- Adults, youth, and children at risk for avoidable hospital or ED
- Adults, youth, and children with serious mental health and/or substance use disorder needs.
- Adults at risk for long-term care institutionalization.
- Adult nursing facility residents transitioning to the community.
- Children and youth involved in child welfare (foster care).
- Adults and youth who are transitioning from incarceration.
- Adults and youth who are pregnant or are postpartum and are subject to racial and ethnic disparities

Eligible Populations of Focus (cont.)

- Children and youth enrolled in California Children's Services (CCS) or CCS Whole Child Model with additional needs beyond their CCS condition(s).
- Children and youth involved in child welfare (foster care).
- Adults and youth who are transitioning from incarceration.
- Birth Equity: adults and youth who are pregnant or are postpartum and are subject to racial and ethnic disparities as defined by California public health data on maternal morbidity and mortality:
 - For example: Black, American Indian or Alaska Native, or Pacific Islander Member who is pregnant or postpartum (up to 12 months) and does not qualify for ECM through another Population of Focus.

ECM Core Services



Community Supports



Housing Transition Navigation Services

- Services that assist individuals with obtaining housing
 - Tenant screening and housing assessment
 - Individualized housing support plan
 - Searching for housing, presenting options and more

Housing Deposits

- Housing deposits assist with identifying, coordinating, securing or funding one-time services and modifications necessary to enable a person to establish a basic household that does not constitute room and board
- Length of service
 - A lifetime maximum of \$5,000



Housing Tenancy and Sustaining Services

Provides education, coaching and support to maintain a safe and stable tenancy once housing is secured



Recuperative Care

- Recuperative care is short-term residential care for individuals who no longer require hospitalization, but still need to heal from an injury or illness (including behavioral health conditions) and whose condition would be exacerbated by an unstable living environment
- Length of service
 - 90-day total authorization



Short-Term Post-Hospitalizati on Housing

- Short-term housing for those with high medical or behavioral health needs after leaving the hospital, recovery facility, recuperative care or other qualified facility
- Length of service
 - Once-in-a-lifetime benefit
 - Not to exceed six months



Day Habilitation Programs

- Services designed to assist in acquiring, retaining, and improving self-help, socialization and adaptive skills necessary to reside successfully in one's natural environment



Personal Care and Homemaker Services

Services provided for individuals who need assistance with activities of daily living (ADLs), such as bathing, dressing, toileting, ambulation or feeding





Respite Services

- Services provided to caregivers of members who require intermittent temporary supervision
- Length of service
- 336 hours per calendar year

Medically Tailored Meals/Medically Supportive Food

- Medically tailored meals (MTMs) or grocery boxes delivered to the home after discharge from a hospital or nursing home
 - Up to two meals per day or one box per week
- ○ Length of service
 - Varies: Up to 24 weeks





Sobering Centers

Support for intoxicated individuals who would otherwise be transported to the emergency department (ED) or a jail, or who present at an ED and are appropriate to be diverted to a sobering center.

Environmental Accessibility Adaptations



- Physical adaptations to a home that are necessary to ensure the health, welfare and safety of the individual, or enable the individual to function with greater independence in the home, without which the member would require institutionalization
 - For example: Ramps, grab bars and stairlifts
- Personal Emergency Response System (PERS)
- Length of service
 - Lifetime maximum of \$7,500
- Eligibility
 - Member at risk for institutionalization in a nursing facility AND
 - Member has discussed needing a home modification with primary care provider (PCP)
 - PCP has documented medical need for this service and will provide documentation upon request

Asthma Remediation



- Physical modifications to a home environment that are necessary to ensure the health, welfare and safety of the individual, or enable the individual to function in the home and without which acute asthma episodes could result in the need for emergency services and hospitalization
- Length of service
 - Lifetime maximum of \$7,500

Nursing Facility Transition/Diversion to Assisted Living Facilities

- Services that facilitate nursing facility transition back into a home-like, community setting and/or prevent skilled nursing admissions for members with an imminent need for nursing facility level of care (LOC)



Nursing Facility Transition to a Home

- Non-recurring setup expenses for individuals who are transitioning from a licensed facility to a living arrangement in a private residence where the person is directly responsible for his or her own living expenses
- Length of service
 - Lifetime maximum of \$7,500



Questions?