



Tri-Counties CalAIM PATH Collaborative

October 19, 2023



Welcome!

Please introduce yourself using Chat.

- Name
- Organization
- Your role in CalAIM implementation

Tri-Counties October Collaborative Agenda



Topic	Time
Welcome and Introductions	5
CalAIM Justice-Involved Initiative Overview	25
MCP Updates	10
Measurement Strategy	10
Funding Opportunities	5
Next Steps	5
Optional Office Hours	30

CalAIM Justice-Involved Initiative Overview

Sarah Kang, BluePath Health

Justice-Involved Initiative Objectives

The demonstration approval represents a first-of-its-kind section initiative, focused on improving care transitions for incarcerated individuals.

With the implementation of this demonstration, DHCS hopes to achieve the following:



Advance health equity: The issue of poor health, health outcomes, and death for incarcerated people is a health equity issue because Californians of color are disproportionately incarcerated—including for mental health and SUD-related offenses. These individuals have considerable health care needs but are often without care and medications upon release.



Improve health outcomes: By implementing this initiative, California aims to provide a targeted set of services in the pre-release period to establish a supportive community reentry process, help individuals connect to physical and behavioral health services upon release, and ultimately improve physical and behavioral health outcomes.



Serve as a model for the rest of the nation: California is the first state to receive approval for this initiative. We hope our model will serve as a blueprint for the dozen additional states with pending justice-involved 1115 waivers.

Rationale for Providing Pre-Release Services

California has received approval to authorize federal Medicaid matching funds for select Medicaid services for eligible justice-involved individuals in the 90-day period prior to release from incarceration in prisons, county jails and youth correctional facilities.



The intent of the demonstration is to **build a bridge to community-based care for justice-involved Medi-Cal members**, offering them services to stabilize their condition(s) and establishing a re-entry plan for their community-based care prior to release.



This demonstration is **part of California's comprehensive initiative to improve physical and behavioral health care for the justice-involved population** and builds on the State's substantial experience and investments on ensuring continuity of Medi-Cal coverage and access to care for JI populations.



With its 1115 demonstration, California will directly test and evaluate its expectation that **providing targeted pre-release services to Medi-Cal-eligible individuals will avert the unnecessary use** of inpatient hospitals, psychiatric hospitals, nursing homes, emergency departments and other forms of costly and inefficient care that otherwise would be paid for by Medi-Cal.

Eligibility Criteria for Pre-Release Services

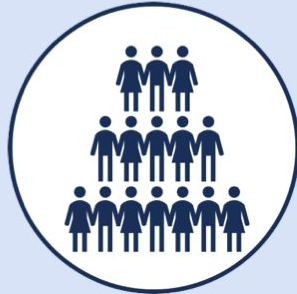
Medi-Cal-eligible individuals who meet the pre-release access screening criteria may receive targeted Medi-Cal pre-release services in the 90-day period prior to release from correctional facilities. DHCS developed detailed definitions for qualifying criteria, based on extensive stakeholder feedback.

Medi-Cal Eligible:

- Adults
- Parents
- Youth under 19
- Pregnant or postpartum
- Aged
- Blind
- Disabled
- Current children and youth in foster care
- Former foster care youth up to age 26

CHIP Eligible:

- Youth under 19
- Pregnant or postpartum



Criteria for Pre-Release Medi-Cal Services

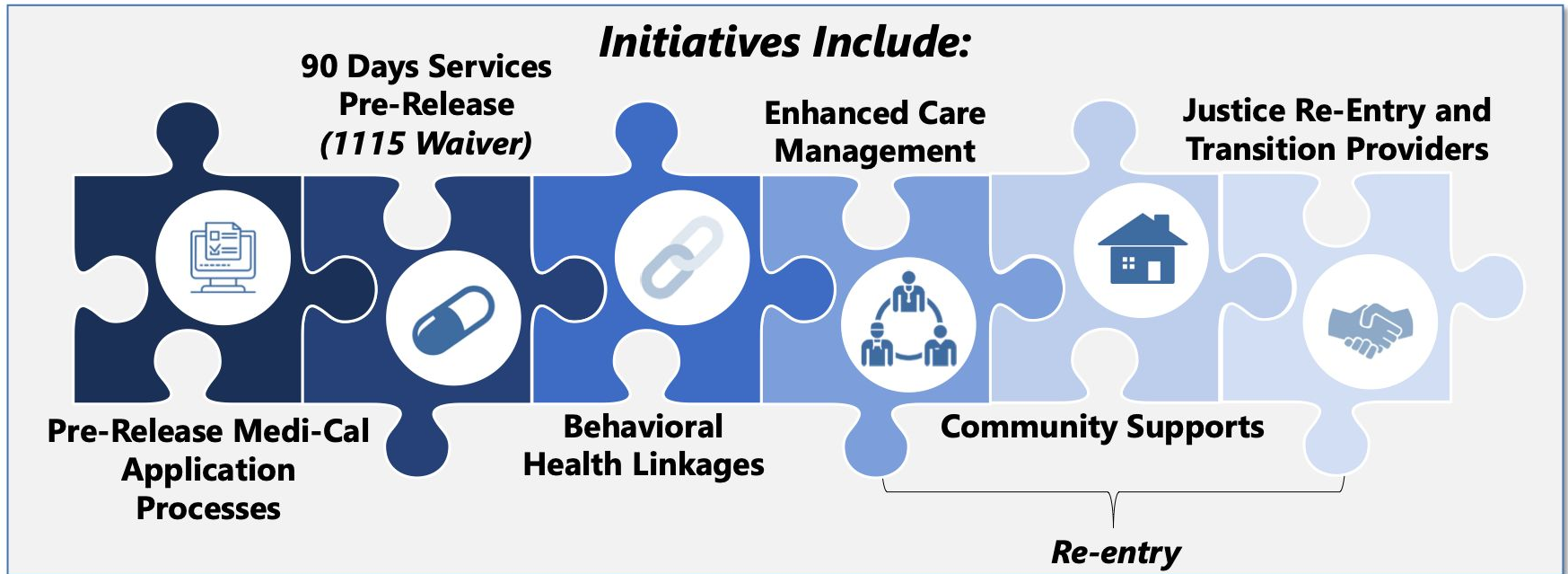
Incarcerated individuals must meet the following criteria to receive in-reach services:

- ✓ Be part of a Medicaid or CHIP Eligibility Group, and
- ✓ Meet one of the following health care need criteria:
 - Mental Illness
 - Substance Use Disorder (SUD)
 - Chronic Condition/Significant Clinical Condition
 - Intellectual or Developmental Disability (I/DD)
 - Traumatic Brain Injury
 - HIV/AIDS
 - Pregnant or Postpartum

Note: All incarcerated youth are able to receive pre-release services and do not need to demonstrate a health care need.

The CalAIM Justice-Involved Initiative

CalAIM justice-involved initiatives support justice-involved individuals by providing key services pre-release, enrolling them in Medi-Cal coverage, and connecting them with behavioral health, social services, and other providers that can support their re-entry.



Providing Access and Transforming Health (PATH) Capacity Building Program

The approved CalAIM 1115 waiver authorizes \$410 million for the PATH Justice-Involved Capacity Building Program to support collaborative planning and IT investments intended to support implementation of Behavioral Health Links in the 90 days prior to release.



Funding from the PATH JI Round 3 will provide implementation grants to correctional facilities (including CDCR, sheriff's offices, probation offices) or their delegates, and County Behavioral Health Agencies.



Funding is intended to support eligible entities as they stand-up processes, protocols, and IT system modifications that are necessary to implement or modify processes to support the provision of Pre-Release Services and Behavioral Health Links.



This funding can be used for investments in personnel, capacity, or IT systems that are needed to effectuate pre-release service processes.



DHCS has provided detailed guidance on PATH applications, available on the CalAIM JI website.

Covered Pre-Release Services

The pre-release services authorized under the Justice-Involved Reentry Initiative include the following services currently covered under DHCS's Medicaid and CHIP State Plans. DHCS worked extensively with stakeholders to develop definitions for each of the covered services (See Appendix).

- Reentry case management services;
- Physical and behavioral health clinical consultation services provided through telehealth or in-person, as needed, to diagnose health conditions, provide treatment, as appropriate, and support pre-release case managers' development of a post-release treatment plan and discharge planning;
- Laboratory and radiology services;
- Medications and medication administration;
- Medications for addiction treatment (MAT), for all Food and Drug Administration-approved medications, including coverage for counseling; and
- Services provided by community health workers with lived experience.



In addition to the pre-release services specified above, qualifying members will also receive **covered outpatient prescribed medications and over-the-counter drugs** (a minimum 30-day supply as clinically appropriate, consistent with the approved Medicaid State Plan) and **durable medical equipment (DME)** upon release, consistent with approved state plan coverage authority and policy.

Pre- and Post-Release Care Management to Support Re-Entry

Correctional facilities and community-based care managers will play a key role in re-entry planning and coordination, including notifying implementation partners* of release date, if known, supporting pre-release warm handoffs, facilitating behavioral health linkages, and dispensing medications and/or DME upon reentry.

Enhanced Care Management (ECM)

Individuals who meet the CalAIM pre-release service access criteria will qualify for ECM Justice Involved Population of Focus and **will be automatically eligible for ECM** until a reassessment is conducted by the managed care plan (MCP), which may occur up to six months after release.

Behavioral Health Linkages

To achieve continuity of treatment for individuals who receive behavioral health services while incarcerated, DHCS will require correctional facilities to:

- » **Facilitate referrals/linkages to post-release behavioral health providers** (e.g., non-specialty mental health, specialty mental health, and SUD).
- » **Share information with the individual's health plan** (e.g., MCPs, SMHS, DMC-ODS) or program (i.e., DMC).

Warm Handoff Requirement

Prior to release, the pre-release care manager must do the following:

- » **Share transitional care plan** with the post-release care manager and MCP.
- » **Schedule and conduct a pre-release care management meeting** (in-person or virtual) with the member and pre- and post-release care managers (if different) to:
 - » Establish a trusted relationship.
 - » Develop and review care plan with member.
 - » Identify outstanding service needs.

*Implementation partners include social services departments, post-release care manager (if different from pre-release care manager, MCPs, and county behavioral health agencies)

CaAIM Justice-Involved Initiative Discussion

Managed Care Plan Updates CenCal Health and Gold Coast Health Plan

Measurement Strategy

Goal: Aligning with health plan reporting to DHCS for more robust data

- In addition to County eligibility and enrollment numbers, Collaborative will look to report out requests for outreach, provider capacity by children and adults, Populations of Focus served by providers, and referral sources
- Collaborative will mirror DHCS quarterly reporting schedule

Are there other data points important to your organization?

Funding Update: DSA Signatory Grants

- Round 3 of the Data Exchange Framework grants now open for organizations that have signed the Data Sharing Agreement (DSA)
- Applications expected to remain open through mid-December

Technical Assistance (TA) Grant

This is a flexible, “**build-your-own-solution**” pathway where Signatories identify a **range of technical and operational activities** and managed the entire process of applying for and managing funds directly.

Qualified Health Information Organization (QHIO) Onboarding Grant

This is a **pre-set, “assisted”** pathway in which Signatories receive support to identify a technology solution that could fulfill their DSA requirements (i.e. a **QHIO**) and support securing and managing funding for that solution.

Funding Update: DSA Signatory Grants

- Enhanced funding available for organizations that serve underserved communities
 - Criteria: Facility is located in a zip code in the bottom quartile of the CA Healthy Places Index or serves over 30% patients who are on Medi-Cal, uninsured or dual eligible
- Must outline how this funding is not duplicative of other funding (e.g., Medicare EHR Incentive funding, PATH CITED or IPP)
- DSA Signatory Grants Informational Webinar: October 24, 2023, 9:00am
 - Register [here](#)

Poll:

Feedback on Community Supports Reauthorizations

Reminder: Resource Center



Tri-Counties CalAIM PATH Collaborative Resource Center

- Upcoming Collaborative meetings and registration links
- ECM and Community Supports provider listing
- Local events and registration links
- Tools and resources
- DHCS updates
- Addressing needs for materials in Spanish

will coordinate care for health and health-related services. Your Lead Care Manager will provide care to you by phone, in-person or where you live. They can also:

- Find doctors and assist you in scheduling your appointments
- Coordinate transportation to and from appointments
- Support medication needs including refills, pick-ups, and follow-up appointments
- Coordinate with local resources, called Community Supports, as needed for: **Food Housing Other social services**

There is no added cost for ECM. ECM does not replace:

- **Benefits.** ECM is an additional benefit.
- **Doctors.** Keep your doctors and other providers
- **Options.** Join if eligible, or cancel at anytime

*Intended for providers
Official tool developed by the
Tri-Counties CalAIM PATH Collaborative
Updated September 2023*

Community Supports help meet members' health & wellness needs

Housing Navigation If you are experiencing homelessness or at risk of experiencing homelessness, you may receive help to find, apply for and secure permanent housing.	Recuperative Care (Medical Respite) After hospitalization, if you are without stable housing and still need to heal from an injury or illness, you may receive short-term residential care also called recuperative care.
Housing Deposit You may also receive assistance with housing fees, such as security deposits and setting up utilities, like gas and electricity.	Medically Supportive Food/ Medically Tailored Meals You may receive deliveries of nutritious, prepared meals and healthy groceries to support your health needs. You may also receive vouchers for healthy food and/or nutrition education.
Housing Tenancy & Sustainability Once housing is secured, you may receive support to maintain your tenancy, such as coordination with landlords to address issues, assistance with annual housing recertification process, and connecting to local resources to prevent eviction.	Sobering Center If found publicly intoxicated, you will be provided a short-term, safe, supportive environment to become sober with services such as medical triage, a temporary bed, meals, counseling, and linkage to other health care services.
Personal Care and Homemaker Services <i>Beginning 01/01/2024</i> You may receive in home support such as bathing or feeding, meal preparation, grocery shopping, and someone to go with you to medical appointments if you require assistance with Activities of Daily Living Instrumental Activities of Daily Living.	Day Habilitation Programs If you are, were, or are at risk for homelessness, you can receive assistance to learn skills, such as: <ul style="list-style-type: none"> • Using public transportation • Cooking and cleaning • Managing personal finances
Caregiver Services (Respite Services) <i>Beginning 01/01/2024</i> Short-term relief for your caregivers. You may receive caregiver services in your home or in an approved facility on an hourly, daily, or nightly basis as needed.	Short-Term Post Hospitalization Housing <i>Beginning 01/01/2024</i> You can receive temporary housing if you have been discharged from an inpatient clinical setting, residential SUD treatment or recovery facility, residential mental health treatment facility, correctional facility, nursing facility, or recuperative care.

<https://www.bluepathhealth.com/tricountiespathresources>

Upcoming Events

- **SMARTIE Goals Training**
 - **Wednesday, October 25, 12:00pm-1:00pm**

- **PATH Statewide Best Practices Webinar**
 - **Friday, October 27, 10:00am-11:00am**

Next Steps

- **Host SMARTIE Goals Training**
- **Continue Justice-Involved Initiative outreach**
- **Distribute Spanish version of ECM and Community Supports resource**
- **November 16 - VCCHIC In-Person Meeting (Ventura)**
- **Prepare for Birth Equity POF Launch**

Next Collaborative Meeting: Tuesday, November 14, 11:00am

Thank you!
Questions or suggestions?
pathinfo@bluepathhealth.com



Office Hours