Theory of Change for the Southwest CPI Collaborative

CURRENT ENVIRONMENT
- Policy is constantly changing.
- DHCS is transforming Medi-Cal through various initiatives, including CalAIM.
- Such initiatives have complex and unique roll-outs.
- Regional providers have variable levels of capacity and interest to implement Enhanced Care Management and Community Supports.
- Organizations are working with new external partners and new systems.
- Providers contracted by local Managed Care Plan include non-local providers.
- Siloed approaches to implementing CalAIM.

KEY ELEMENTS
- Shared Vision & Goals
- Shared Knowledge
- Engagement and Retention
- Testing and Innovation
- Gap Identification and Solution

STRATEGIES TO EFFECTIVELY COLLABORATE FOR ECM AND COMMUNITY SUPPORT EXPANSION
- Capacity Building
- Relationship Buiding
- Collaborative Systems Improvements

TEAM

CPI Participants

PHIL

MCPs

PCG/ DHCS

Collaborative Supports
Monthly and Pop-Up Convenings
Office Hours and Technical Assistance
Workgroups
Peer-to-Peer Learning
Resource Hub
Skill Building and Training Hub

Long Term Results

(2-3 years)
Improve access to contracted providers by helping increase the number of providers, increasing enrollment, *and increasing the quality of services for members who are eligible for Enhanced Care Management and Community Supports.*

Short Term Results

(1 year)
Resource compilation
Increase peer networks
Gap identification
Shared learning and sharing
Increased partnerships
Increase alignment in CalAIM participation
Relationship building among local providers

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