



PATH Collaborative Planning & Implementation (CPI)

Welcome! The Northwest Collaborative Planning Meeting will be starting shortly.

January 21, 2025



POPULATION HEALTH
INNOVATION LAB

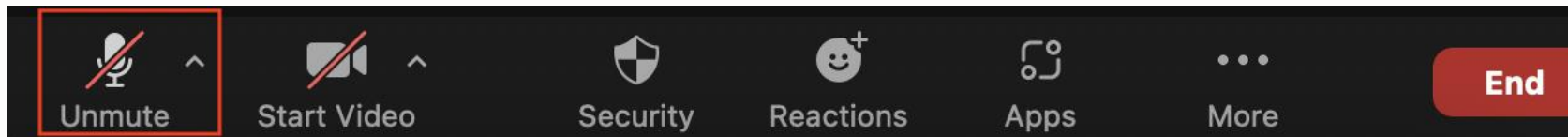
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Please email PATH@pophealthinnovationlab.org

Please mute your microphone during the presentation.





PATH – Collaborative Planning & Implementation (CPI)

Northwest Collaborative Planning Meeting

January 21, 2025



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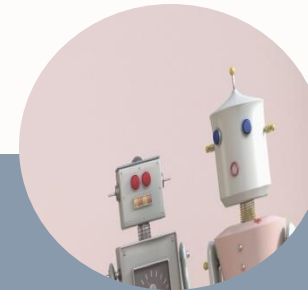


Welcome & Housekeeping



Roll Call

Please share your name, location, title, and organization in the chat.



Participation Eligibility

Vendors and salespeople should recuse themselves from soliciting during this collaborative convening.



Land Acknowledgment

The Population Health Innovation Lab team respectfully acknowledges that we live and operate on the unceded land of Indigenous peoples throughout the U.S.

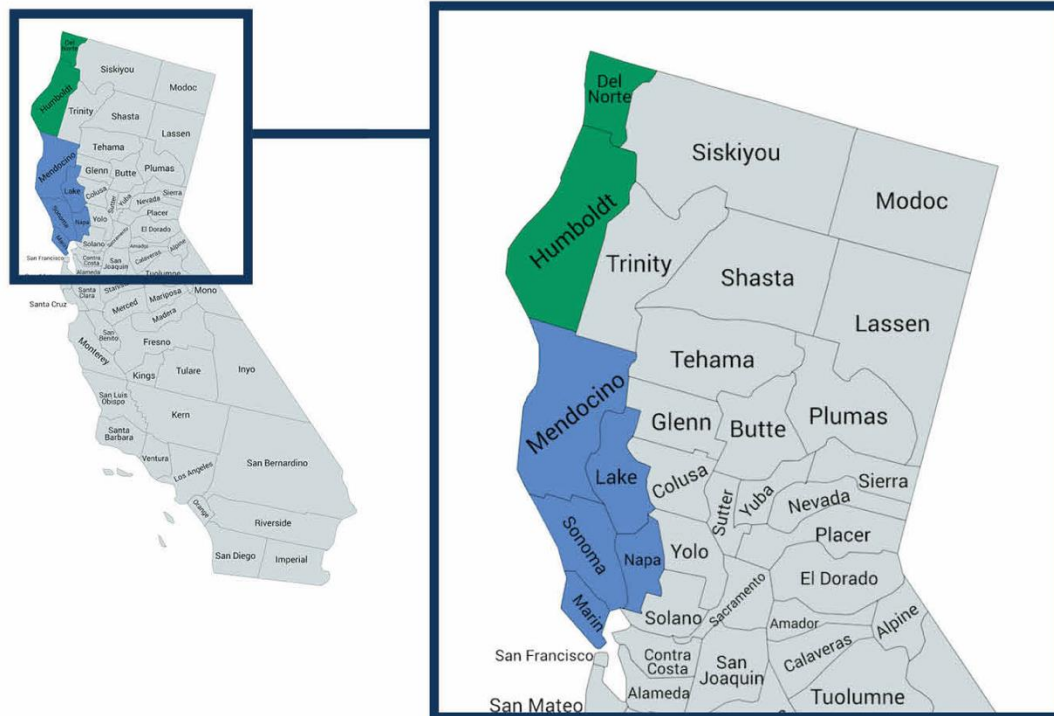
We acknowledge the land and country we are on today as the traditional and treaty territory of the Native American, Alaska Native, and Tribal nations who have lived here and cared for the Land since time immemorial. We further acknowledge the role Native American, Alaska Native, and Tribal nations have today in taking care of these lands, as well as the sacrifices they have endured to survive to this day.



PATH Collaborative Planning & Implementation (CPI)

Region Counties Supported by PHIL

-  Northwest
-  Southwest



PATH is a DHCS funded initiative to support the implementation of Enhanced Care Management (ECM) and Community Supports services.

CPI collaboratives work together to identify, discuss, and resolve California Advancing and Innovating Medi-Cal (CalAIM) implementation issues.

- Learn more about the PATH CPI initiative [here](#).
- Catch up with us! Find meeting information and registration links on the [PHIL website](#).

Population Health Innovation Lab (PHIL)

PATH CPI Project Team



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Commitments to Community Inclusivity

Be Present, Brave, and Curious

- Encourage different opinions and respectful disagreement
- Embrace conflict which can deepen our understanding
- Acknowledge the risk speakers take, and value the privilege to learn from one another.
- Make use of opportunities to connect person-to-person

Create An Inclusive Space

- Invite the unheard voices
- Take responsibility for our own voices (make space)
- Resist the temptation to only witness the dialogue (take space)*

Invite Anti-Racist Dialogue

- Be aware we all have a bias that may impact action; biases are learned and can be unlearned.
- Address racially biased systems and norms.
- Recognize the vast and varied lived experiences participants have with racism.
- Be intentional about power dynamics and how you exercise your privilege.
- Avoid defensive responses when people speak from lived experiences with racism

Be Accountable

- Foster awareness of unrepresented community members not “in the room”
- Respect each other’s time - participate fully and prepare for each activity
- Commit to actions that move items beyond discussion
- Practice patience and persistence – we cannot solve everything in a single conversation and will revisit topics that require additional discussion*



Agenda for Today

- Planning for our CalAIM Ecosystem of Care in 2025
- CalAIM Funding Opportunities: Focus on the TA Marketplace
- Crowdsourcing Successes and Challenges with PATH Initiatives
- Highlights from Partnership HealthPlan of California (PHC)
 - New 2025 Presumptive Authorization Processes
- Other CalAIM Updates
- PATH Collaborative Planning & Implementation (CPI) in 2025

The image is a composite. On the left, a person in a dark suit and a large, light-colored paper cape stands on a grassy cliff, arms raised in a gesture of triumph or hope. The background shows a sunset or sunrise over a body of water. On the right, a white calendar page is open, showing the days 'TUESDAY' and 'WEDNESDAY'. Three markers (two teal, one orange) are lying on the calendar. A jagged, torn-paper edge separates the two scenes.

Check-In Question:

What is the best piece of advice you've been given so far this year?

*"It takes as much energy to wish, as it does to plan."
— Eleanor Roosevelt*

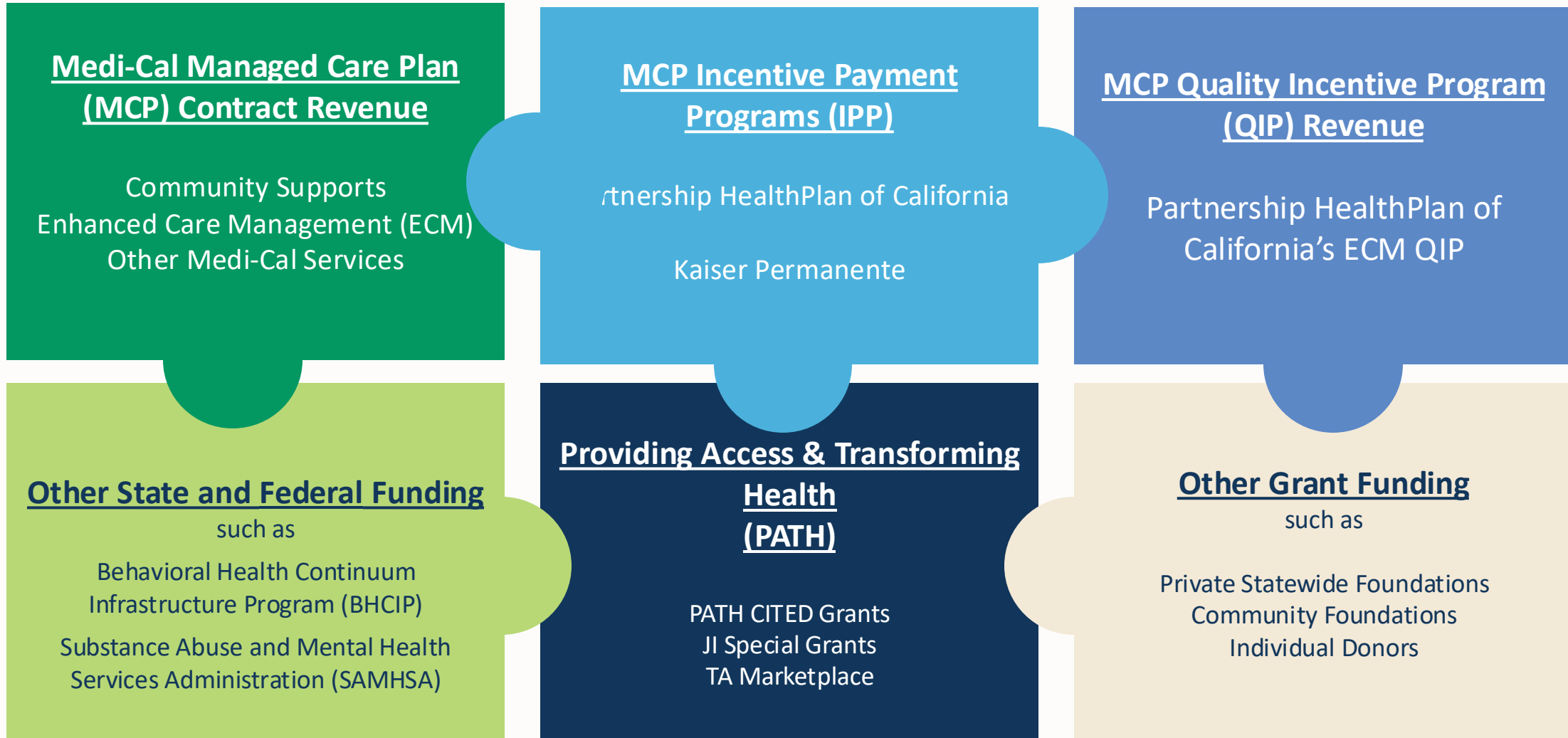


Objectives

- Gain insights into the 2025 goals for CalAIM and PATH CPI and implications for the CalAIM ecosystem of care.
- Develop understanding of and strategies for CalAIM funding opportunities in the new year.
- Encourage shared learning and provide a platform for open dialogue with CalAIM providers, local Managed Care Plans, and other local stakeholders to strengthen a culture of collaboration.
- Facilitate an open forum to enhance transparency surrounding challenges, successes, and innovations in CalAIM Enhanced Care Management (ECM) and Community Supports services.



Stacking and Braiding CalAIM Revenues





A closer look at Providing Access and Transforming Health (PATH) Initiative Opportunities

- Five-year, \$1.85 billion initiative to build up the capacity and infrastructure of on-the-ground partners to successfully participate in the Medi-Cal delivery system as California implements Enhanced Care Management and Community Supports and Justice Involved services under CalAIM.

Justice-Involved
Capacity Building
Program

Capacity and
Infrastructure
Transition, Expansion
and Development
(CITED)

Collaborative
Planning and
Implementation
(CPI)

Technical
Assistance
Marketplace



What is the Technical Assistance (TA) Marketplace, and Who is Eligible?

The **PATH Technical Assistance Initiative** enables entities that are providing or that intend to provide **ECM/Community Supports under CalAIM** to access technical assistance from an array of **qualified TA Vendors**.

Who is eligible?

- City, county, and other government agencies
- County and community-based providers (including but not limited to public hospitals)
- Community-Based Organizations (CBOs)
- Correctional agencies and other Justice Involved stakeholders
- Tribal Designees and Indian Health Programs

For more information about TA Recipient eligibility and required documentation, visit the [TAM Recipient Eligibility webpage](#).



TA Resources Organized Under TA Domains

The TA Marketplace offers TA in seven TA Domains:

Domain 1: Building Data Capacity

Domain 2: Community Supports

Domain 3: Engaging in and Navigating CalAIM through Medi-Cal Managed Care

Domain 4: Enhanced Care Management

Domain 5: Promoting Health Equity

Domain 6: Supporting Cross-Sector Partnerships

Domain 7: Workforce

➤ *Cross-Cutting Competency: Rural Communities*





Modalities for Accessing TA Resources

“Off-the-Shelf” TA Projects

Ready to go, TA offerings packaged for convenient, efficient delivery

“Off-the-Shelf” projects are **more standardized resources** like trainings, well-defined program models or data tools, or best practices guides that are relevant in a variety of settings with little to no customization.

“Hands-On” TA Projects

Customized TA projects tailored to the unique needs of the TA recipient

“Hands-On” projects require the TA Vendor to work together with the TA recipient to develop a **unique Scope of Work (SOW) and Budgets** to describe the project and corresponding deliverables.

“On-Demand” TA Resources

Static TA resources made available directly through CA-PATH website

“On-Demand” TA resources **do not require any direct contact** between the Recipient and Vendor and will eventually be available as part of a TA resource library.

Ex. [Medi-Cal Managed Care 101 for Community Supports Providers \(On Demand Resource Library\)](#)



Three Step Process for Accessing TA

1

TA Recipient Eligibility Application – Confirm the eligibility of prospective TA Registrants per the DHCS-established eligibility criteria and collect standard data for all registered TA Registrants.

2

TA Project Eligibility Application – Vet the ideas for TA Projects put forward by entities already approved as TA Registrants for appropriateness within the CalAIM PATH framework so that such entities do not invest substantial time and effort developing a scope of work (SOW) and budget for TA Projects that will not be approved.

3

TA Project SOW and Budget – Enable DHCS/PCG to review and weigh in on how TA funds will be spent at a detailed level prior to approving a TA Project.



Off-the-Shelf Spotlights

Issues: *Organizational workflows, team burnout, program effectiveness, quality of services*

TA Marketplace Solution:

Domain 4: Enhanced Care Management

Vendor: Camden Coalition

Product Name: Fostering effective team collaboration and cooperation (existing ECM providers)

From the Vendor: “Our project aims to enhance care delivery and boost provider satisfaction by clarifying team roles, routines, and norms.”

Issues: *Unsure how to respond to emerging issues in implementation, trouble starting*

TA Marketplace Solution:

Domain 3: Engaging in CalAIM through Medi-Cal Managed Care

Vendor: Chapman Consulting

Product Name: Strategic Planning to support ECM/Community Supports delivery

From the Vendor: “Facilitate the development of a strategic plan with clear objectives and measurable milestones to meet organizational objectives related to participation in the delivery of the ECM benefit and Community Supports services.”

Issues: *Staff turnover, decreased quality of interaction with clients, low productivity*

TA Marketplace Solution:

Domain 7: Workforce

Vendor: Camden Coalition

Product Name: Skills Labs for the frontline complex care workforce (self-paced)

From the Vendor: “Skills Labs offers a fast, on demand, and self-paced form of learning. The lessons will provide your team with the concrete knowledge and strategies needed to navigate complex care interactions in a compact delivery style.”



TA Marketplace Utilization Update

1020 TA Project SOWs and Budgets submitted as of 12/30/24

- **855 TA Project SOWs fully executed**
- **41 TA Project SOWs awaiting signature**
- **62 TA Project SOWs in re-work or on hold**
- **26 TA Project SOWs in PCG review**
- **1 TA Project SOWs recommended to DHCS for approval**
- **35 Withdrawn***

**Total \$ Requested:
\$104,061,155.90**

**Total \$ Executed:
\$84,212,531.77**

**A project is withdrawn by the recipient and/or vendor due to various reasons such as no longer pursuing the project or to resubmit a new PEA to reflect the support needs not originally requested.*



CITED Round 4 Information & Support

- Register for the next CITED Round 4 webinar:
 - How To Make Your Grant Application Stronger Part 2 on February 3 at 10 am PT ([registration](#))
 - PATH CITED Round 4 Office Hours through February and March

- Join PHIL Office Hours through February

- Set a meeting with us to talk through CITED Round 4 questions



PATH Initiative Insights, Experiences, Questions?

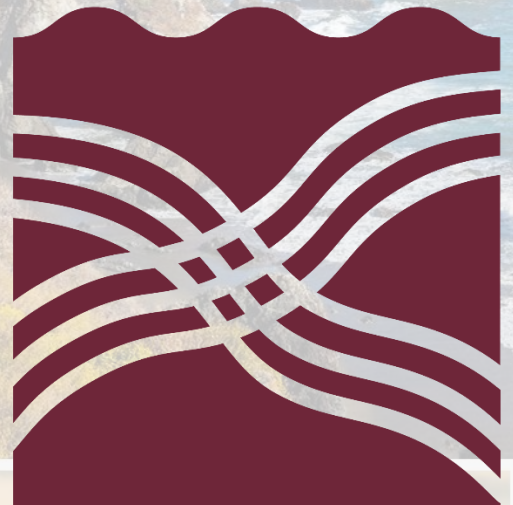


Partnership HealthPlan of California (PHC)

Updates on CalAIM

Ashley Peel, ECM Program Manager

PARTNERSHIP



HEALTHPLAN
of CALIFORNIA
A Public Agency



Partnership Update
January 2025



Agenda

- ECM Presumptive Authorization
- Unsuccessful Outreach Payment
- CalAIM Updates

ECM Presumptive Authorization

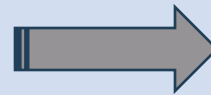
Starting on Jan. 1st, 2025, MCPs are required to allow select ECM Providers to quickly initiate ECM services prior to submitting an ECM referral to an MCP and reimburse Providers for services during a 30-day timeframe

Traditional ECM Authorization Process

Presumptive Authorization Process
(For Select ECM Providers &
Populations of Focus)



RTF/IOT



MCP
Authorization



Services

In the traditional ECM authorization process, ECM services start **AFTER** a referral is submitted to an MCP to authorize ECM Services

ECM Presumptive Authorization

Starting on Jan. 1st, 2025, MCPs are required to allow select ECM Providers to quickly initiate ECM services prior to submitting an ECM referral to an MCP and reimburse Providers for services during a 30-day timeframe

Updated ECM Authorization Process

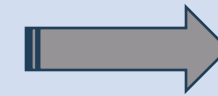
****NEW**** Presumptive Authorization Process (For Select ECM Providers & Populations of Focus)



Services



RTF/IOT



MCP Authorization

Under the ECM Presumptive Authorization Process, ALL ECM Providers can start services **BEFORE** a referral is submitted to an MCP to authorize ECM Services

Enhanced Care Management (ECM) Unsuccessful Outreach Billing

The Department of Healthcare Services (DHCS) requires all Managed Care Plans (MCPs) to reimburse ECM Providers for outreach, including unsuccessful outreach attempts that do not result in member enrollment into an ECM program. Effective January 1, 2025, Partnership HealthPlan of California (Partnership) has updated its ECM coding and rates to include reimbursement for up to 5 unsuccessful outreach attempts, per eligible member, per rolling 30-day period.

- Partnership's rate for each allowable unsuccessful outreach attempt = \$5.00
- A Treatment Authorization Request (TAR) is **NOT** required for unsuccessful outreaches

Enhanced Care Management (ECM) Unsuccessful Outreach Billing

Key Reminders for Submitting ECM Claims for Outreach Attempts

- ECM Providers must verify members' eligibility **before** providing any service
- An unsuccessful outreach attempt is defined as an interaction with a referred PHC member that is **not** yet enrolled in the ECM program.
- Unsuccessful outreach attempt claims submitted for Partnership members who are already enrolled in ECM are not eligible for reimbursement and will result in a claim denial.
- No more than 5 unsuccessful outreach attempts will be reimbursed within a rolling 30-day period per eligible member. Each unsuccessful outreach attempt should be billed on a per-visit/service date basis and not by date span
- Unsuccessful outreach attempts billed in excess of 1 per day, 5 within a 30-day period will be denied

CalAIM Updates

- Register for upcoming CalAIM Office Hours [here](#)
- Register for upcoming ECM Office Hours [here](#)
- Register for upcoming Community Supports Office Hours [here](#)
- Updated ECM Referrals Forms
 - [Adult](#)
 - [Children and Youth](#)
- Information on IPP will be shared in February

Questions

Contacts:

- ECM@partnershiphp.org
- CommunitySupports@partnershiphp.org
- ClaimsECMhelpdesk@partnershiphp.org



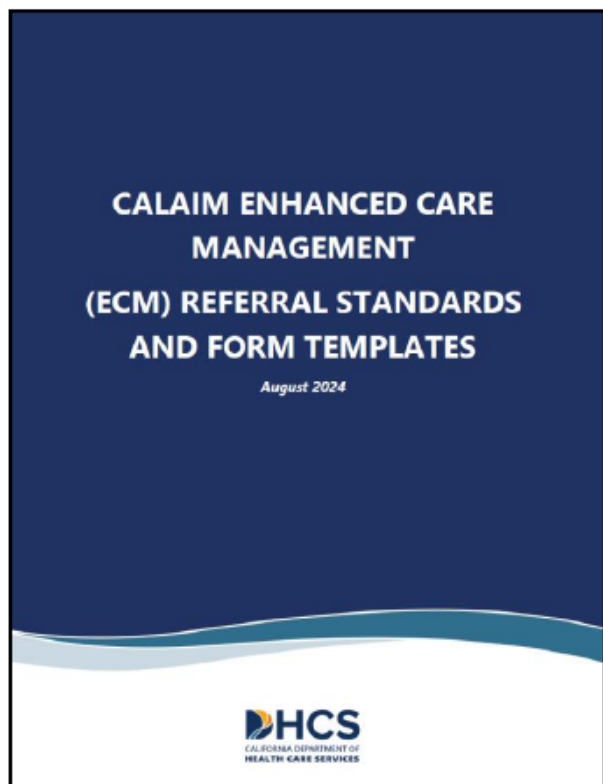
Questions?



Other CalAIM Policy & Implementation Updates

ECM Referral Standards and Form Templates

The ECM Referral Standards and Form Templates released in August 2024 streamline and standardize ECM Referrals across MCPs.



The ECM Referral Standards create a unified set of information that all MCPs collect as part of any referral for ECM. **MCPs must adopt these standards by January 1, 2025.**

The standards include technical information that MCPs can use to build electronic ECM referrals via provider portals, EMRs, HIE etc.

The ECM Referral Form Templates are an application of the ECM Referral Standards for use when the referring entity cannot use an electronic format. **DHCS always encourages and prefers electronic referrals over PDFs/hard copy forms but understands that not all community entities can refer Members this way.** There are two form templates - Adult and Child/Youth.

ECM Referrals to Partnership

- Who can make an ECM referral?
 - Anyone!
- How do I make an ECM referral?

| | |
|---------------------------|--|
| As an ECM Provider | ✓ Include the member in your monthly Return Transmission File (RTF) |
| Others | <ul style="list-style-type: none"> ❑ Fill out the ECM Referral form and send via fax or secure/encrypted email to ECM@partnershiphp.org ; ❑ Call Partnership (800) 809-1350, 8 a.m. to 5 p.m. Monday –Friday |



Enhanced Care Management (ECM) Referral Form for Adults

4665 Business Center Drive, Fairfield, CA
Care Coordination Phone: (800) 809-1350 • Fax: (530) 351-9040

| Medi-Cal Member Information | |
|--|--|
| Date of Referral: <input type="text"/> | Type of Referral: <input type="checkbox"/> Routine <input type="checkbox"/> Expedited |
| Member's Managed Care Plan: <input type="text"/> | Member Medi-Cal Client Index Number (CIN): <input type="text"/> |
| Member First Name: <input type="text"/> | Member Last Name: <input type="text"/> |
| Member Date of Birth (MM/DD/YYYY): <input type="text"/> | Member Phone Number: <input type="text"/> |
| Member Preferred Language: <input type="text"/> | Member Primary Care Provider Name: <input type="text"/> |
| Member Residential Address: <input type="text"/> | <small>Please check here for: No fixed current address. If available, please list frequently visited location for the member. <input type="checkbox"/></small> |
| Member Residential City: <input type="text"/> | Member Residential Zip Code: <input type="text"/> |
| Member Email: <input type="text"/> | Best Contact Method for Member/Caregiver: <input type="checkbox"/> Phone <input type="checkbox"/> Email |
| Best Contact Time for Member/Caregiver: <input type="text"/> | Parent/Guardian/Caregiver Name (if applicable): <input type="text"/> |
| Parent/Guardian/Caregiver Phone Number (if applicable): <input type="text"/> | Parent/Guardian/Caregiver Email (if applicable): <input type="text"/> |
| Referral Source Information | |
| Referring Organization Name: <input type="text"/> | Referring Organization National Provider Identifier (NPI): <input type="text"/> |
| Referring Individual Name: <input type="text"/> | Referring Individual Relationship to Member: <input type="text"/> |
| Referring Individual Email Address: <input type="text"/> | <small>Please select one of the following:</small> |
| Referring Individual Phone Number: <input type="text"/> | <input type="checkbox"/> Medical Provider |
| | <input type="checkbox"/> Social Services Provider |
| | <input type="checkbox"/> Member Self-Referred |
| | <input type="checkbox"/> Other: <input type="text"/> |

ECM Referrals to Partnership

- Who can make an ECM referral?
 - Anyone!
- How do I make an ECM referral?

| | |
|---------------------------|--|
| As an ECM Provider | ✓ Include the member in your monthly Return Transmission File (RTF) |
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Enhanced Care Management (ECM) Referral Form for Children/Youth

4665 Business Center Drive, Fairfield, CA
Care Coordination Phone: (800) 809-1350 • Fax: (530) 351-9040

| Medi-Cal Member Information | |
|---|--|
| Date of Referral: <input style="width: 100%;" type="text"/> | Type of Referral: <input type="checkbox"/> Routine <input type="checkbox"/> Expedited |
| Member's Managed Care Plan: | Member Medi-Cal Client Index Number (CIN): |
| Member First Name: | Member Last Name: |
| Member Date of Birth (MM/DD/YYYY): | Member Phone Number: |
| Member Preferred Language: | Member Primary Care Provider Name: |
| Member Residential Address: | <small>Please check here for: No fixed current address. If available, please list frequently visited location for the member. <input type="checkbox"/></small> |
| Member Residential City: | Member Residential Zip Code: |
| Member Email: | Best Contact Method for Member/Caregiver: <input type="checkbox"/> Phone <input type="checkbox"/> Email |
| Best Contact Time for Member/Caregiver: | Parent/Guardian/Caregiver Name (if applicable): |
| Parent/Guardian/Caregiver Phone Number (if applicable): | Parent/Guardian/Caregiver Email (if applicable): |
| Referral Source Information | |
| Referring Organization Name: | Referring Organization National Provider Identifier (NPI): |
| Referring Individual Name: | Referring Individual Relationship to Member: <small>Please select one of the following:</small> |
| Referring Individual Email Address: | <input type="checkbox"/> Medical Provider |
| Referring Individual Phone Number: | <input type="checkbox"/> Social Services Provider |
| | <input type="checkbox"/> Member Self-Referred |
| | <input type="checkbox"/> Other: <input style="width: 100%;" type="text"/> |



BH-CONNECT Waiver Approval

DHCS now has federal approval of the Behavioral Health Community-Based Organized Networks of Equitable Care and Treatment (BH-CONNECT) initiative.

- **Eligibility and Populations of Focus:** BH-CONNECT serves individuals with significant mental health and substance use disorders, particularly justice-involved individuals and youth in or at risk of child welfare involvement (ie. Transitional rent.) [View eligibility details.](#)
- **Evidence-Based Practices (EBPs):** BH-CONNECT employs proven practices for effective service delivery.
- **Workforce Initiative:** BH-CONNECT bolsters the state's behavioral health workforce by providing training and resources to enhance service quality. [Explore the workforce initiatives.](#)
- **Program Benefits:** BH-CONNECT fosters inclusive communities and reduces hospitalizations. [Learn about the BH-CONNECT benefits for participants and communities.](#)



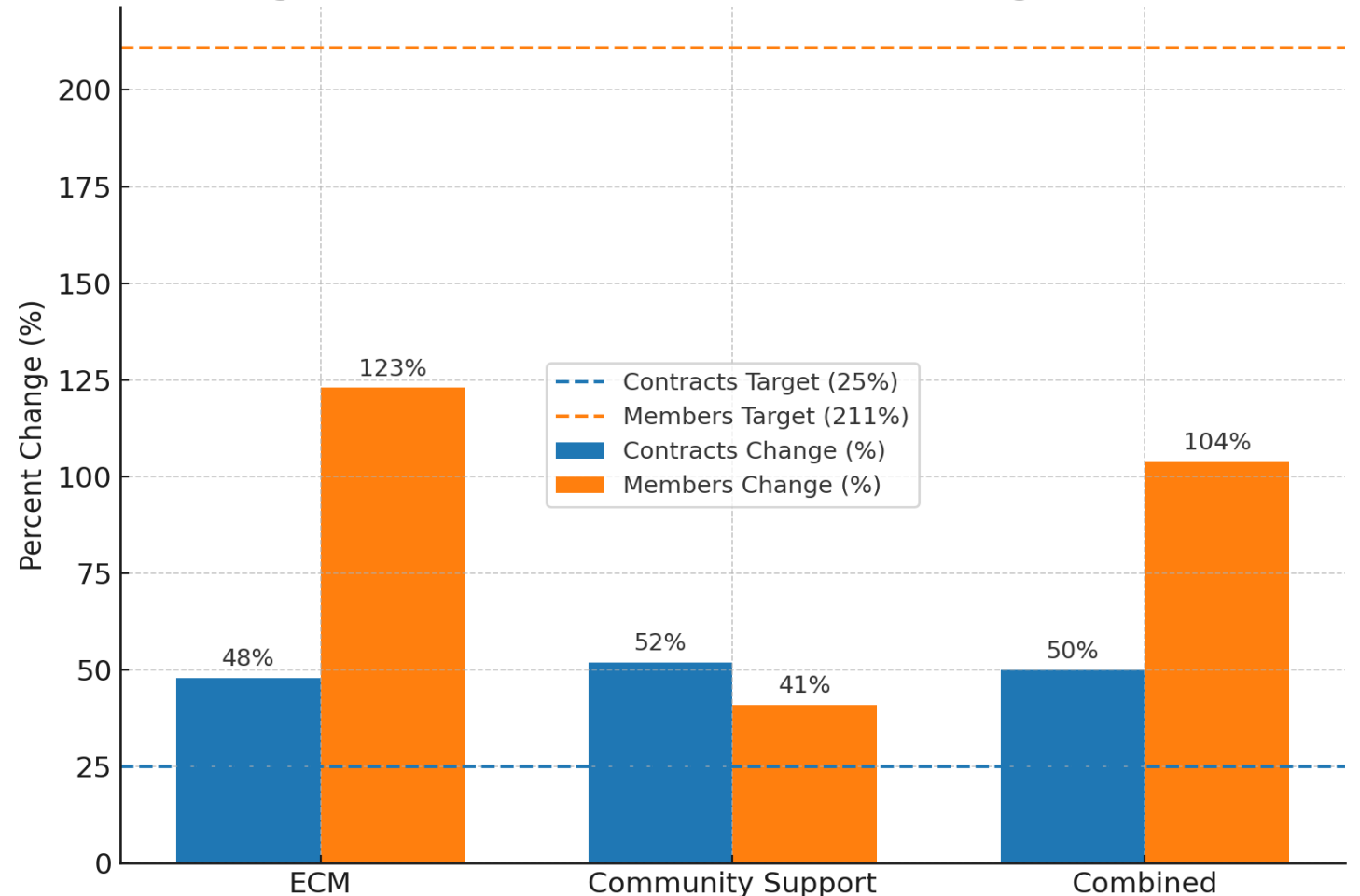
PATH Collaborative Planning & Implementation (CPI) in 2025



Collaborative Aim and Performance

- The Northwest PATH Collaborative Planning and Implementation (CPI) initiative's aim is to enhance access to and enrollment in CalAIM Enhanced Care Management and Community Supports by facilitating CPI participant advancement along the Readiness Roadmap. This will involve a targeted increase in the regional provider network by 25% and an expansion in the number of Medi-Cal members receiving CalAIM services by 211% by December 31, 2024.

Percent Change in Contracts and Members Receiving Services with Targets

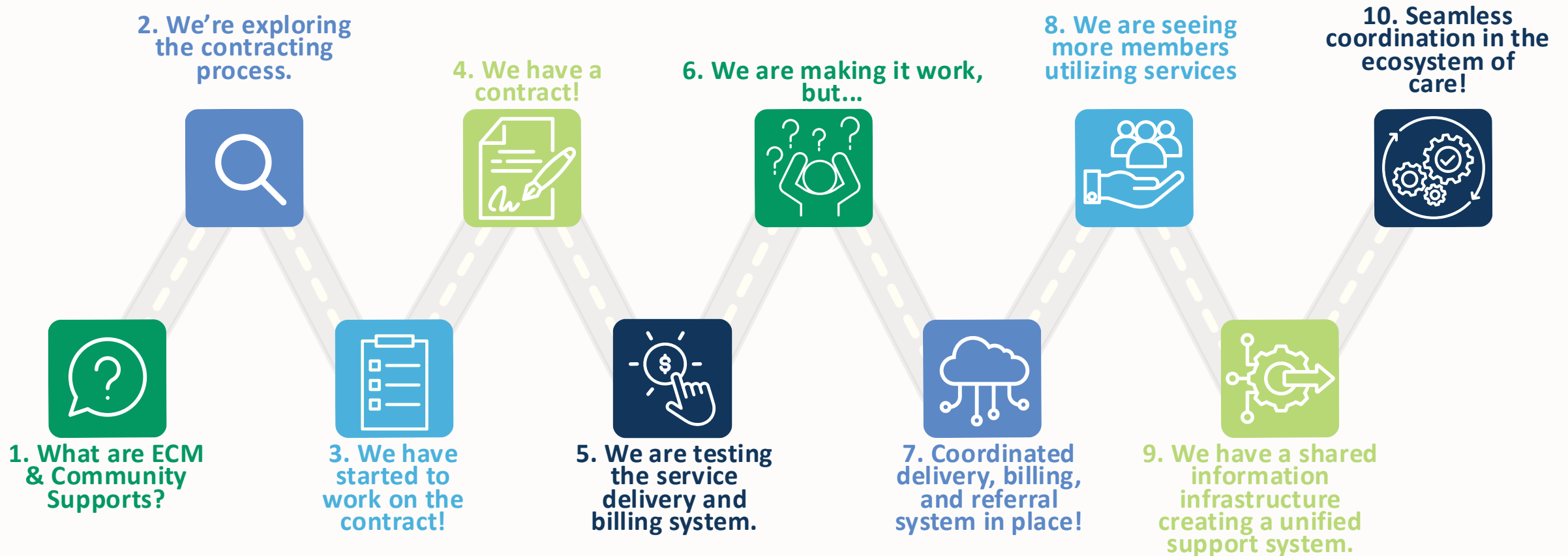


**Contract and member receiving services change is from Q4 2023 to Q2 2024 due to delay in update of [DHCS utilization dashboards](#)*



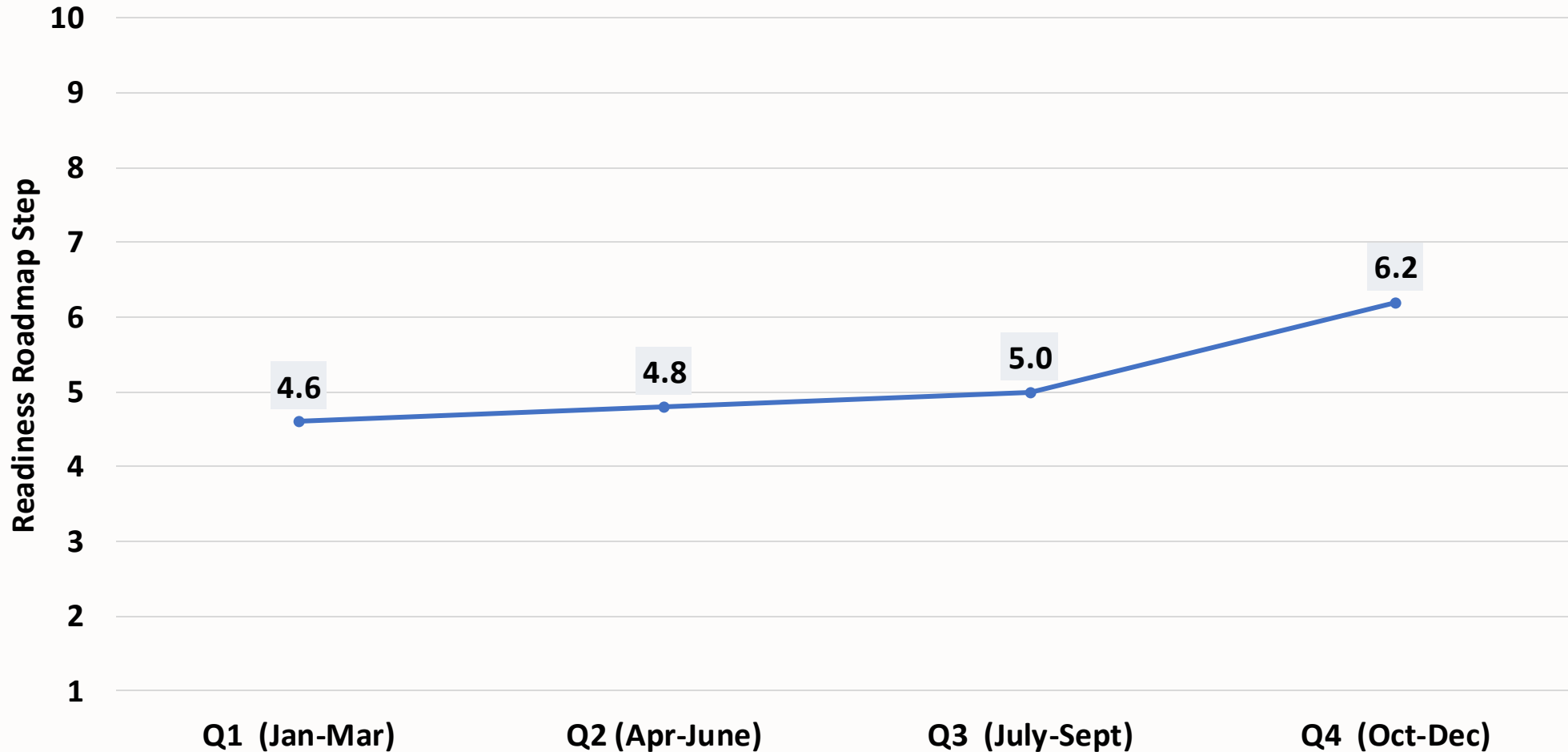
Readiness Roadmap

Where am I on the Readiness Roadmap?





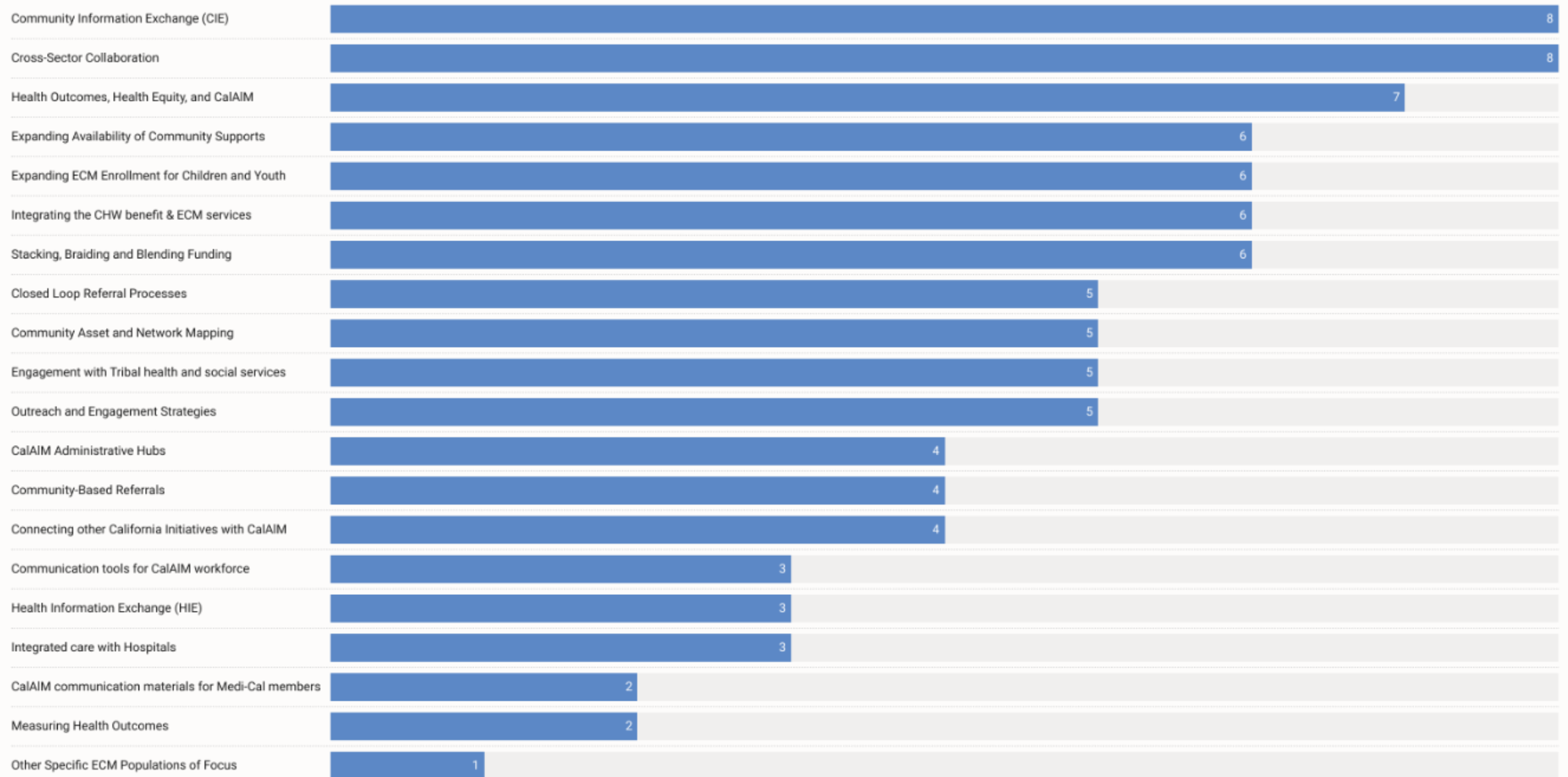
Northwest Collaborative: Quarterly Average Readiness Roadmap Progress



***Prior to May 2024, respondents could only select Steps 1 through 7. Steps 8 through 10 were introduced as additional options starting in May 2024.*

- Steps**
- Step 1:** What are ECM & CS?
 - Step 2:** We're exploring the contracting process.
 - Step 3:** We have started to work on the contract!
 - Step 4:** We have a contract!
 - Step 5:** We are testing the service delivery and billing system
 - Step 6:** We are delivering services and have an internal process, but are having issues with referrals, reimbursements, or other workflow complications.
 - Step 7:** Coordinated delivery, billing, and referral system in place and running smoothly!
 - Step 8:** Our organization is seeing an increase in the number of members that are fully utilizing ECM and CS services.
 - Step 9:** Our organization collaborates with other providers by sharing resources, creating a unified support system that enhances ECM and CS service delivery.
 - Step 10:** Our organization is coordinating seamlessly with other providers in this region to improve health equity and address the social determinants of health.

Northwest Collaborative Topics of Interest for 2025





Reflection Questions:

What should our collective AIM be this year?

What do you want to accomplish together?

What is something new you are planning for 2025 that we can help support?





Upcoming PATH CPI Events

Our next CPI regional meeting is virtual. We hope to see you!

Tuesday, February 18, 2025

[Register through 2025 here!](#)

Mark your calendars: meeting in person on March 18th

PATH CPI Office Hours:

Getting Ready for 2025: PATH CITED Round 4

January 27 from 1:00 – 2:00 pm ([Register here](#))

February 12 from 12:00 – 1:00 pm ([Register here](#))

February 24 from 1:00 – 2:00 pm ([Register here](#))



Post-Event Evaluation

To continue improving our work as your CPI Facilitator, PHIL kindly asks that you complete the brief survey that pops up in a new tab at the close of the meeting. Your feedback ensures quality improvement and will inform planning and activities through the evolution of the collaborative.



<https://bit.ly/42o1XwS>



Thank You!

Feel free to contact our PATH CPI team

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Improvement Manager

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Program Associate II

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Megan Kenney

Program Specialist

mkenney@phi.org

Stefani Hartsfield

Consultant

stefani@hartsfieldhealth.com

For general inquiries, please feel free to email path@pophealthinnovationlab.org

Thank you!





CITED Round 4



PATH Capacity and Infrastructure Transition, Expansion, and Development (CITED) Round 4

- CITED Round 4 provides one year funding to enable the *transition, expansion, and development* of **ECM and Community Supports** capacity and infrastructure.
- PATH CITED Round 4 Eligibility: Organizations eligible to apply for Round 4 funding include:
 - CBOs
 - County, city, or local government agencies
 - Federally Qualified Health Centers
 - Tribes
 - Indian Health Care Providers
 - Providers (including but not limited to hospitals and provider organizations)
 - Others as approved by DHCS



CITED Round 4 Priorities

Priorities DHCS has identified for Round 4.

- County-Specific ECM and Community Supports gaps
- Statewide ECM and Community Supports gaps
 - Birth Equity
 - Justice-Involved
 - Transitional Rent
- Tribal Entities or other entities serving tribal members
- Rural counties
- Entities operating in counties with lower funding in [prior CITED rounds](#)
- Entities serving individuals whose primary language is not English
- Local CBOs

Please note: if the submitted application does not include the priorities listed above, the application will be reviewed for funding if minimum eligibility is met. However, the application may be deprioritized for funding if it does not meet the priorities for the round. ([Guidance Document](#), p.7)



PHIL's Tips for a Successful Application

Get ready..

- Applicants must be actively contracted with a Medi-Cal Managed Care Plan (MCP) for the provision of ECM and/or Community Support services.
 - Contact your MCP for a letter of attestation before March 1st
 - [Partnership HealthPlan of California \(pdf\)](#)
 - A memorandum of understanding (MOU) may be accepted if applicant is a Tribe, Indian Health Organization or Urban Indian Organization.
- Application window: January 6 to March 7, 2025.

Get set...

Plan for the following when developing your application:

- Clarity, focus and detail.
- Feasibility and sustainability.
- Signatures. Ensure organization's authorized signatory key staff are aware of due dates.
- Review time! Ensure all your boxes are checked.



PHIL's Tips for a Successful Application

Get ready..

- Applicants must be actively contracted with a Medi-Cal Managed Care Plan (MCP) for the provision of ECM and/or Community Support services.
 - Contact your MCP for a letter of attestation before March 1st
 - [Partnership HealthPlan of California \(pdf\)](#)
 - [Kaiser Permanente](#)
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Get set...

Plan for the following when developing your application:

- Clarity, focus and detail.
- Feasibility and sustainability.
- Signatures. Ensure organization's authorized signatory key staff are aware of due dates.
- Review time! Ensure all your boxes are checked.



Go! Helpful Resources

- Register now for upcoming CITED Round 4 webinars:
 - Information Session on January 7 at 11:30 am PT ([registration](#))
 - How To Make Your Grant Application Stronger on January 16 at 10 am PT ([registration](#))
 - How To Make Your Grant Application Stronger Part 2 on February 3 at 10 am PT ([registration](#))
- Previous years' [Awardees Summaries](#), [DHCS CaAIM](#) pages including Bold Goals, PATH, ECM and Community Supports.
- If you have questions regarding your application for CITED Round 4, you should email cited@ca-path.com, with the subject “CITED Round 4 Application Inquiry.” ([Guidance Document](#), p.7)

ECM and CS Providers

Marin, Napa and Sonoma Counties

Enhanced Care Management (ECM) Providers in Marin, Napa, & Sonoma County

Organizations listed have executed contracts with KP as of **December 2024**

Other providers are welcomed to apply to join our provider network via the NLEs.
[View the NLEs.](#)



| Provider | Services/Populations of Focus | Phone Number | Counties Served |
|--|--|--------------|---------------------|
| Aldea, Inc. | Children & Youth - Individuals at-risk for IP and ED Children & Youth - Individuals with SMI/SUD Children & Youth - Individuals transitioning from incarceration Children & Youth - Involved in Child Welfare | 707-224-8266 | Napa, Sonoma |
| Alternative Family Services | Children & Youth - Individuals with SMI/SUD Children & Youth - Individuals transitioning from incarceration Children & Youth - Involved in Child Welfare | 707-576-7700 | Sonoma |
| CityServ | TBA | 661-558-4441 | Marin, Napa, Sonoma |
| Community Support Network, DBA Housing and Wellness Program | Adults - Individuals Experiencing Homelessness Adults - Individuals at-risk for IP and ED Adults - Individuals with SMI/SUD Adults - Individuals transitioning from incarceration (Adult) Adults - living in the community at-risk for LTC Children & Youth - Individuals Experiencing Homelessness Children & Youth - Individuals at-risk for IP and ED Children & Youth - Individuals with SMI/SUD Children & Youth - Individuals transitioning from incarceration | 707-757-7892 | Marin, Sonoma |
| Independent Living Systems | Adults - Individuals Experiencing Homelessness Adults - Individuals at-risk for IP and ED Adults - Individuals with SMI/SUD Adults - living in the community at-risk for LTC Adults - NF residents transitioning to the community Adults - Individuals with Intellectual or Developmental Disabilities Adults -Pregnant and Postpartum Individuals at-risk for Adverse Perinatal Children & Youth - Individuals Experiencing Homelessness Children & Youth - Individuals at-risk for IP and ED Children & Youth - Individuals with SMI/SUD Children & Youth - Enrolled in California Children's Services (CCS) or WCM w/needs Children & Youth - Involved in Child Welfare Children & Youth - Individuals with Intellectual or Developmental Disabilities (I/DD) Children & Youth - Pregnant and Postpartum Individuals at-risk for Adverse Perinatal | 844-320-5182 | Marin, Napa, Sonoma |
| J&M Homecare Services, LLC | Adults - Individuals at-risk for IP and ED Adults - living in the community at-risk for LTC Adults - NF residents transitioning to the community | 925-552-6500 | Marin, Napa, Sonoma |

Enhanced Care Management (ECM) Providers in Marin, Napa, & Sonoma County

Organizations listed have executed contracts with KP as of **December, 2024**

Other providers are welcomed to apply to join our provider network via the NLEs.



| Provider | Services/Populations of Focus | Phone Number | Counties Served |
|--|--|--------------|---------------------|
| Keystone Therapy and Training Services, Inc | Adults - Individuals Experiencing Homelessness Adults - Individuals at-risk for IP and ED Adults - Individuals with SMI/SUD Adults - living in the community at-risk for LTC Adults - NF residents transitioning to the community Adults - Individuals with Intellectual or Developmental Disabilities Adults -Pregnant and Postpartum Individuals at-risk for Adverse Perinatal Children & Youth - Individuals Experiencing Homelessness Children & Youth - Individuals at-risk for IP and ED Children & Youth - Individuals with SMI/SUD Children & Youth - Involved in Child Welfare Children & Youth - Individuals with Intellectual or Developmental Disabilities (I/DD) Children & Youth - Pregnant and Postpartum Individuals at-risk for Adverse Perinatal | 707-327-0909 | Marin, Napa, Sonoma |
| Mendona Health Alliance | Adults - Individuals Experiencing Homelessness Adults - Individuals at-risk for IP and ED Adults - Individuals with SMI/SUD Adults - living in the community at-risk for LTC Adults - NF residents transitioning to the community Adults - Individuals with Intellectual or Developmental Disabilities Adults -Pregnant and Postpartum Individuals at-risk for Adverse Perinatal Children & Youth - Individuals Experiencing Homelessness Children & Youth - Individuals at-risk for IP and ED Children & Youth - Individuals with SMI/SUD Children & Youth - Enrolled in California Children's Services (CCS) or WCM w/needs Children & Youth - Involved in Child Welfare Children & Youth - Individuals with Intellectual or Developmental Disabilities (I/DD) Children & Youth - Pregnant and Postpartum Individuals at-risk for Adverse Perinatal | 707-412-3176 | Sonoma |

Enhanced Care Management (ECM) Providers in Marin, Napa, & Sonoma County

Organizations listed have executed contracts with KP as of **December, 2024**

Other providers are welcomed to apply to join our provider network via the NLEs.



| Provider | Services/Populations of Focus | Phone Number | Counties Served |
|--|--|---|---------------------|
| Mindful Living Centers | Adults - Individuals Experiencing Homelessness Adults - Individuals at-risk for IP and ED Adults - Individuals with SMI/SUD Adults - living in the community at-risk for LTC Adults - NF residents transitioning to the community Adults - Individuals with Intellectual or Developmental Disabilities Adults -Pregnant and Postpartum Individuals at-risk for Adverse Perinatal Children & Youth - Individuals Experiencing Homelessness Children & Youth - Individuals at-risk for IP and ED Children & Youth - Individuals with SMI/SUD Children & Youth - Enrolled in California Children's Services (CCS) or WCM w/needs Children & Youth - Involved in Child Welfare Children & Youth - Individuals with Intellectual or Developmental Disabilities (I/DD) Children & Youth - Pregnant and Postpartum Individuals at-risk for Adverse Perinatal | 714-805-8861 | Marin, Napa, Sonoma |
| Resolution Care (dba Vynca Care) [Birth Equity Specialty Provider Type] | Adults - Individuals Experiencing Homelessness Adults - Individuals at-risk for IP and ED Adults - Individuals with SMI/SUD Adults - living in the community at-risk for LTC Adults - NF residents transitioning to the community Adults - Individuals with Intellectual or Developmental Disabilities Adults -Pregnant and Postpartum Individuals at-risk for Adverse Perinatal Children & Youth - Individuals Experiencing Homelessness Children & Youth - Individuals at-risk for IP and ED Children & Youth - Individuals with SMI/SUD Children & Youth - Enrolled in California Children's Services (CCS) or WCM w/needs Children & Youth - Involved in Child Welfare Children & Youth - Individuals with Intellectual or Developmental Disabilities (I/DD) Children & Youth - Pregnant and Postpartum Individuals at-risk for Adverse Perinatal | 888-227-8884 | Marin, Napa, Sonoma |
| Seneca Family of Agencies | Children & Youth - Individuals Experiencing Homelessness Children & Youth - Individuals at-risk for IP and ED Children & Youth - Individuals with SMI/SUD Children & Youth - Individuals transitioning from incarceration | 415-482-6182 (Marin) 707-545-2700 (Sonoma) | Marin, Sonoma |

Enhanced Care Management (ECM) Providers in Marin, Napa, & Sonoma County

Organizations listed have executed contracts with KP as of **December, 2024**

Other providers are welcomed to apply to join our provider network via the NLEs.



| Provider | Services/Populations of Focus | Phone Number | Counties Served |
|--|--|--------------|---------------------|
| Serene Health IPA [Birth Equity Specialty Provider Type] | Adults - Individuals Experiencing Homelessness Adults - Individuals at-risk for IP and ED Adults - Individuals with SMI/SUD Adults - Individuals transitioning from incarceration (Adult) Adults - living in the community at-risk for LTC Adults - NF residents transitioning to the community Adults -Pregnant and Postpartum Individuals at-risk for Adverse Perinatal Children & Youth - Enrolled in California Children's Services (CCS) or WCM w/needs Children & Youth - Involved in Child Welfare Children & Youth - Individuals with Intellectual or Developmental Disabilities (I/DD) Children & Youth - Pregnant and Postpartum Individuals at-risk for Adverse Perinatal | 844-737-3638 | Napa |
| Side by Side | Children & Youth - Individuals Experiencing Homelessness Children & Youth - Individuals at-risk for IP and ED Children & Youth - Individuals with SMI/SUD Children & Youth - Individuals transitioning from incarceration Children & Youth - Enrolled in California Children's Services (CCS) or WCM w/needs Children & Youth - Involved in Child Welfare | 415-457-3200 | Marin, Napa, Sonoma |
| St. Vincent Preventative Family Care [Birth Equity Specialty Provider Type] | Adults - Individuals Experiencing Homelessness Adults - Individuals at-risk for IP and ED Adults - Individuals with SMI/SUD Adults - Individuals transitioning from incarceration Adults - living in the community at-risk for LTC Adults - NF residents transitioning to the community Adults - Individuals with Intellectual or Developmental Disabilities Adults -Pregnant and Postpartum Individuals at-risk for Adverse Perinatal Children & Youth - Individuals Experiencing Homelessness Children & Youth - Individuals at-risk for IP and ED Children & Youth - Individuals with SMI/SUD Children & Youth - Individuals transitioning from incarceration Children & Youth - Enrolled in California Children's Services (CCS) or WCM w/needs Children & Youth - Involved in Child Welfare Children & Youth - Individuals with Intellectual or Developmental Disabilities (I/DD) Children & Youth - Pregnant and Postpartum Individuals at-risk for Adverse Perinatal | 901-337-3003 | Napa |

Enhanced Care Management (ECM) Providers in Marin, Napa, & Sonoma County

Organizations listed have executed contracts with KP as of **December, 2024**

Other providers are welcomed to apply to join our provider network via the NLEs.



Providers with blue text are newly added

| Provider | Services/Populations of Focus | Phone Number | Counties Served |
|--|---|----------------|---------------------|
| Stanford Youth Solutions (dba Stanford Sierra Youth & Families) | Children & Youth - Individuals Experiencing Homelessness Children & Youth - Individuals at-risk for IP and ED Children & Youth - Individuals with SMI/SUD Children & Youth - Individuals transitioning from incarceration | (530) 656-5080 | Napa |
| Star Nursing Inc | Adults - Individuals Experiencing Homelessness Adults - Individuals at-risk for IP and ED Adults - Individuals with SMI/SUD Adults - living in the community at-risk for LTC Adults - NF residents transitioning to the community Children & Youth - Individuals Experiencing Homelessness Children & Youth - Individuals at-risk for IP and ED Children & Youth - Individuals with SMI/SUD | 877-687-7399 | Marin, Napa, Sonoma |
| Sterling Hospitalist Medical Group, Inc | Adults - Individuals Experiencing Homelessness Adults - Individuals at-risk for IP and ED Adults - Individuals with SMI/SUD Adults - living in the community at-risk for LTC Adults - NF residents transitioning to the community Adults - Individuals with Intellectual or Developmental Disabilities Children & Youth - Individuals Experiencing Homelessness Children & Youth - Individuals at-risk for IP and ED Children & Youth - Individuals with SMI/SUD Children & Youth - Individuals with Intellectual or Developmental Disabilities (I/DD) | 714-897-1085 | Sonoma |
| TLC Child & Family Services | Children & Youth - Individuals Experiencing Homelessness Children & Youth - Individuals at-risk for IP and ED Children & Youth - Individuals transitioning from incarceration Children & Youth - Involved in Child Welfare | 707-528-3020 | Sonoma |
| Victor Community Support Services Inc | Children & Youth - Individuals Experiencing Homelessness Children & Youth - Individuals at-risk for IP and ED Children & Youth - Individuals with SMI/SUD Children & Youth - Individuals transitioning from incarceration Children & Youth - Enrolled in California Children's Services (CCS) or WCM w/needs Children & Youth - Involved in Child Welfare | (844) 547-1442 | Sonoma |
| Your Home Assistant LLC | Adults - living in the community at-risk for LTC Adults - NF residents transitioning to the community | 916-970-9001 | Marin, Napa, Sonoma |

Enhanced Care Management (ECM) Providers in Marin, Napa, & Sonoma County

Organizations listed have executed contracts with KP as of **December, 2024**

Other providers are welcomed to apply to join our provider network via the NLEs.



Providers with blue text are newly added

| Provider | Services/Populations of Focus | Phone Number | Counties Served |
|--|---|----------------|---------------------|
| Stanford Youth Solutions (dba Stanford Sierra Youth & Families) | Children & Youth - Individuals Experiencing Homelessness Children & Youth - Individuals at-risk for IP and ED Children & Youth - Individuals with SMI/SUD Children & Youth - Individuals transitioning from incarceration | (530) 656-5080 | Napa |
| Star Nursing Inc | Adults - Individuals Experiencing Homelessness Adults - Individuals at-risk for IP and ED Adults - Individuals with SMI/SUD Adults - living in the community at-risk for LTC Adults - NF residents transitioning to the community Children & Youth - Individuals Experiencing Homelessness Children & Youth - Individuals at-risk for IP and ED Children & Youth - Individuals with SMI/SUD | 877-687-7399 | Marin, Napa, Sonoma |
| Sterling Hospitalist Medical Group, Inc | Adults - Individuals Experiencing Homelessness Adults - Individuals at-risk for IP and ED Adults - Individuals with SMI/SUD Adults - living in the community at-risk for LTC Adults - NF residents transitioning to the community Adults - Individuals with Intellectual or Developmental Disabilities Children & Youth - Individuals Experiencing Homelessness Children & Youth - Individuals at-risk for IP and ED Children & Youth - Individuals with SMI/SUD Children & Youth - Individuals with Intellectual or Developmental Disabilities (I/DD) | 714-897-1085 | Sonoma |
| TLC Child & Family Services | Children & Youth - Individuals Experiencing Homelessness Children & Youth - Individuals at-risk for IP and ED Children & Youth - Individuals transitioning from incarceration Children & Youth - Involved in Child Welfare | 707-528-3020 | Sonoma |
| Victor Community Support Services Inc | Children & Youth - Individuals Experiencing Homelessness Children & Youth - Individuals at-risk for IP and ED Children & Youth - Individuals with SMI/SUD Children & Youth - Individuals transitioning from incarceration Children & Youth - Enrolled in California Children's Services (CCS) or WCM w/needs Children & Youth - Involved in Child Welfare | (844) 547-1442 | Sonoma |
| Your Home Assistant LLC | Adults - living in the community at-risk for LTC Adults - NF residents transitioning to the community | 916-970-9001 | Marin, Napa, Sonoma |

Community Supports (CS) Providers in Marin, Napa, & Sonoma County

Organizations listed have executed contracts with KP as of **December, 2024**

Other providers are welcomed to apply to join our provider network via the NLEs.



| Provider | Services/Populations of Focus | Phone Number | County/Counties |
|--|--|----------------|---------------------|
| Accentcare of California | Housing Transition/Navigation Services Housing Deposits Housing Tenancy & Sustaining Services Respite Services Personal Care and Homemaker Services | 818-837-3775 | Marin, Napa, Sonoma |
| Alegre Care Inc. | Respite Services Personal Care and Homemaker Services | 818-837-3775 | Marin, Napa, Sonoma |
| ASSURED INDEPENDENCE | Home Modifications | 425-516-7400 | Marin, Napa, Sonoma |
| CityServ | Housing Transition/Navigation Services Housing Deposits Housing Tenancy & Sustaining Services Short-Term Post-Hospital Housing Recuperative Care Day Habilitation | (559) 802-3667 | Marin, Napa, Sonoma |
| Committee of the Shelterless DBA COTS | Recuperative Care | 707-776-4777 | Marin, Napa, Sonoma |
| Community Support Network, DBA Housing and Wellness Program | Housing Transition/Navigation Services Housing Deposits Housing Tenancy & Sustaining Services Short-Term Post-Hospital Housing | 707-757-7892 | Marin, Sonoma |
| Connect America West | Home Modifications | 707-200-2138 | Marin, Napa, Sonoma |
| Evolve Emod, LLC | Home Modifications Asthma Remediation | 844-438-7577 | Marin, Napa, Sonoma |

Community Supports (CS) Providers in Marin, Napa, & Sonoma County

Organizations listed have executed contracts with KP as of **December, 2024**

Other providers are welcomed to apply to join our provider network via the NLEs.



Providers with blue text are newly added

| Provider | Services/Populations of Focus | Phone Number | County/Counties |
|---------------------------------------|---|----------------|---------------------|
| Home Safety Services, Inc | Home Modifications | 888-388-3811 | Marin, Napa, Sonoma |
| Independent Living Systems | Housing Transition/Navigation Services Housing Deposits Housing Tenancy & Sustaining Services Nursing Facility Transition/Diversion to Assisted Living Facilities Community Transition Services/Nursing Facility Transition to a Home | 844-320-5182 | Marin, Napa, Sonoma |
| Innovative Health Solutions | Housing Transition/Navigation Services Housing Deposits Housing Tenancy & Sustaining Services Day Habilitation | 707-205-5572 | Napa |
| J&M Homecare Services, LLC | Respite Services Personal Care and Homemaker Services | 925-552-6500 | Marin, Sonoma, |
| Lifeline Systems Company | Home Modifications | 800-451-0525 | Marin, Napa, Sonoma |
| Maxim Healthcare | Respite Services Personal Care and Homemaker Services | (510) 982-3773 | Marin, Napa, Sonoma |
| Mom's Meals | Meals/Medically Tailored Meals | 877-508-6667 | Marin, Napa, Sonoma |
| Serene Health IPA | Housing Transition/Navigation Services Housing Deposits Housing Tenancy & Sustaining Services Short-Term Post-Hospital Housing Community Transition Services/Nursing Facility Transition to a Home | 844-737-3638 | Marin, Napa, Sonoma |

Community Supports (CS) Providers in Marin, Napa, & Sonoma County

Organizations listed have executed contracts with KP as of **December, 2024**

Other providers are welcomed to apply to join our provider network via the NLEs.

| Provider | Services/Populations of Focus | Phone Number | County/Counties |
|--|---|--------------|---------------------|
| Solano Women in Medicine | Housing Transition/Navigation Services Housing Deposits Housing Tenancy & Sustaining Services Respite Services | 707-277-1677 | Marin, Napa, Sonoma |
| St. Vincent Preventative Family Care | Housing Transition/Navigation Services Housing Deposits Housing Tenancy & Sustaining Services | 901-337-3003 | Napa |
| Sterling Hospitalist Medical Group, Inc | Housing Transition/Navigation Services Housing Deposits Housing Tenancy & Sustaining Services | 714-897-1071 | Sonoma |
| Uncuffed Project Inc | Recuperative Care | 415-320-8798 | Marin, Napa, Sonoma |
| Victor Community Support Services Inc | Housing Transition/Navigation Services | 844-547-1442 | Sonoma |



TA Marketplace Recipient Project Eligibility Application Flow



Log In Step 2: Select the Sign In option to access your Recipient Console.

The screenshot shows the homepage of the HCS | PATH Technical Assistance Marketplace. At the top left is the logo for HCS | PATH. Below it is a breadcrumb trail: [Home](#) / Shop Technical Assistance Marketplace. In the top right corner, there are two buttons: "Shop TA Marketplace" and "Sign In". The "Sign In" button is highlighted with a red rectangular box, and a red arrow points from the text "Step 2" to this button. The main heading is "Technical Assistance Marketplace" with a sub-heading "Welcome to the CalAIM PATH Technical Assistance Marketplace" and a blue "Shop" button. Below this is an illustration of a marketplace with several stalls and people. Further down, there are three paragraphs of text describing the marketplace and its vendors. At the bottom, there is a video player titled "How to Browse the TA Marketplace" with "Watch later" and "Share" options. A small inset image shows a mobile device displaying the same website with the "Sign In" button highlighted.

Off-the-Shelf Step 4: Select your Off-the-Shelf service. For the Off-the-Shelf flow, you can only select one (1).

Once your selection has been made, select the Continue to Step 4 button at the bottom of the page.

HCS | PATH RH

[Home](#) / [Shop Technical Assistance Marketplace](#) / [Services](#)

1 Service Type — 2 Domains — 3 Vendor Cards — 4 Vendor Selection

Please select your Vendor(s) preference

TA Recipients are required to identify at least one preferred TA Vendor in their TA Project Eligibility Application. If you would like help selecting a TA Vendor, please reach out to us at ta-marketplace@ca-path.com

Off-the-Shelf Domain 3 Vendor 0 More 0 Reset

AIP
Advocates for Human Potential, Inc.

Advocates for Human Potential, Inc.

Effective Supervision 2 Day Training Series

[Effective Supervision 2 Day Training Series Details](#)

Availability: **Available** Length of service: 2 Days

[View Vendor Profile](#)

AIP
Advocates for Human Potential, Inc.

Advocates for Human Potential, Inc.

Effective Supervision 4.5 Day Training Series

[Effective Supervision 4.5 Day Training Series Details](#)

Availability: **Available** Length of service: 5 Days

[View Vendor Profile](#)

AIP
Advocates for Human Potential, Inc.

Advocates for Human Potential, Inc.

Workforce Recruitment and Retention

[Workforce Recruitment and Retention Details](#)

Availability: **Available** Length of service: 6 Months

[View Vendor Profile](#)

AIP
Advocates for Human Potential, Inc.

Advocates for Human Potential, Inc.

Workflow and Business Process Redesign

[Workflow and Business Process Redesign Details](#)

Availability: **Available** Length of service: 6 Months

[View Vendor Profile](#)

Camden Coalition

Camden Coalition of Healthcare Providers

Cross-Cutting Competency

COACH Training

[COACH Training Details](#)

Availability: **Available** Length of service: 8 Hours

[View Vendor Profile](#)

Camden Coalition

Camden Coalition of Healthcare Providers

Cross-Cutting Competency

RELATE Training

[RELATE Training Details](#)

Availability: **Available** Length of service: 3 Hours

[View Vendor Profile](#)



Showing 6 of 57 - [View All](#)

Previous **1** 2 3 4 5 ... 10 Next

Off-the-Shelf Step 5: Choose a name that will be used to reference this TA project and review your Off-the-Shelf selection.

Then, select the Start Application button at the bottom of the page.

Please Note: Your Off-the-Shelf selection cannot be changed once you begin your Off-the-Shelf TA Project Eligibility Application.



[Home](#) / [Shop Technical Assistance Marketplace](#) / Review Vendor


1 Service Type — 2 Domains — 3 Vendor Cards — 4 Vendor Selection

Please review your vendor selections

For Off-the-Shelf projects, you must select one TA Vendor / TA Project you would like to engage.

ⓘ Your TA Project Application Name is final. Please review before selecting Start Application.

Please enter a name that will used to reference this TA project.



**Advocates for
Human Potential, Inc.**

Advocates for Human Potential, Inc.
Effective Supervision 4.5 Day Training Series

Off-the-Shelf Step 6: Before you begin your TA Project Eligibility Application, you will be prompted to review an informational modal.

HCS | PATH RH

Home / [Shop Technical Assistance](#)

1 Service Type — 2 Domains

Please review your vendor

For Off-the-Shelf projects, you must

① Your TA Project Application

Please enter a name that will used to

Sample PEA Project 2

Advocates for Human Potential
Effective Supervision 4.5 Day Training

Previous Start Application

PATH is a DHCS funded initiative to support the third-party administrator on behalf of DHCS as a [Waiver Special Terms and Conditions](#).

This website passes accessibility standards, please

Technical Assistance (TA) Project Eligibility Application ✕

The Technical Assistance (TA) Project Eligibility Application is intended to provide the information needed to request a TA project and initiate the steps listed below.

- TA Project Eligibility Applications will be reviewed to ensure that the proposed TA Project is feasible to complete within the relevant timeframe, is non-duplicative of other federal, state, or local funding, and has the potential to strengthen the TA Recipient ability to provide high quality Enhanced Care Management (ECM)/Community Supports (CS) services for Medi-Cal members. The availability of the requested TA Vendor will also be confirmed as part of the TA Project Eligibility Application review process. Please note that the Department of Health Care Services (DHCS) has final approval authority for all TA Project Eligibility Applications.
- The TA Recipient will be notified when their TA Project Eligibility Application has been approved using the contact information provided in the application. Once approval is received, the TA Recipient should work with their selected TA Vendor to develop a detailed scope of work (SOW) and budget for their proposed TA Project. The TA Vendor will be responsible for submitting the TA Project SOW and budget for review; the TA Recipient must provide sign-off on the TA Project SOW and budget submission.
- TA Project SOWs and budgets will be reviewed to ensure that deliverables, timelines, and costs are reasonable and that the project is non-duplicative of other federal, state, or local funding. The TA Recipient and the TA Vendor will be notified that their TA Project SOW and budget are approved and will coordinate with the TA Vendor formalize the SOW and budget with regards to the TA Vendor's Acknowledgement of Terms and Conditions. Similar to TA Project Eligibility Applications, DHCS has final approval authority for all TA Project SOWs and budgets.

Note that TA Project work cannot begin until a detailed TA Project SOW and budget have been approved by DHCS and formalized with regards to the TA Vendor's Acknowledgement of Terms and Conditions. Costs incurred by TA Vendors prior to formal DHCS approval will not be reimbursed.

① The following information and materials are required to complete the Form.

- Name and contact information for the organization's authorized signatory
- Estimate and Project details
- CalAIM PATH TA information
- Additional Information supporting the project

For assistance in completing this form, please contact our team at ta-marketplace@ca-path.com or (866) 529-7550.

Okay

to administer PATH. PCG is acting solely as a [summary](#) and California's approved [1115](#)

Off-the-Shelf Step 7: Complete all required fields and move to the next page.

HCS | PATH RH

[Home](#) / [Vendor Selection](#) / Application Information

Application Information ^

- Vendor Preferences**
 - Organization Details
- Estimate and Project details v
- ECM/Community Supports v
- CaAIM PATH v
- Submit v

[← Save and Exit](#)

Vendor Preferences All Fields Required

TA Project Name

Sample PEA Project 2

Advocates for Human Potential, Inc.
[Effective Supervision 4.5 Day Training Series](#)

Please select the County or Counties that the requested TA will impact.

Select v

Please check all that apply.

Please identify the desired start date for implementation of the requested Off-the-Shelf TA Support at your organization. Please note that TA Projects started in the period January 1, 2023 to December 31, 2023 must be completed within a twenty-four-month period.

Requested Start Date

mm/dd/2023

Next

Off-the-Shelf Step 8: Review the Organizational and Primary Contact details on file for your organization. If the registered primary contact on file will **not** be responsible for the progress and successful completion of the requested TA, and/or if you would like to identify a secondary contact for this TA effort, provide the information in the modal before moving to the next page.

The screenshot displays the HCS | PATH application interface. The top navigation bar includes the logo and a user profile icon labeled 'RH'. The left sidebar contains a menu with items: Application Information, Vendor Preferences, Organization Details (highlighted), Estimate and Project details, ECM/Community Supports, CalAIM PATH, and Submit. The main content area shows the breadcrumb 'Home / Vendor Selection / Application Information' and the section 'Organization Details'. Below this, a message asks for confirmation of the primary contact's responsibility. Two detail boxes are shown: 'Organization Details' (Name: TEST RH, Type: FQ, Street Address: 123 Test Way, City: Roseville, state: CA, Zip: 95661, Website: www.example.com) and 'Primary Contact Details' (First Name: Rebekah, last Name: Hartford, Title: CEO, Phone Number: (916) 276-1234, Email: Test-PATH@example.com). Below these are two questions with radio button options: 'Is the registered primary contact on file going to be responsible for progress and successful completion of the requested TA?' and 'Do you want to add Secondary contact responsible for progress and successful completion of the requested TA?'. At the bottom are 'Previous' and 'Next' buttons. A modal window titled 'Secondary TA Contact' is open on the right, containing a message and fields for First Name, Last Name, Title, Phone Number, and Email. A red arrow points from the 'Do you want to add Secondary contact...' question to the modal. The modal has 'Cancel' and 'Add' buttons at the bottom right.

HCS | PATH RH

Application Information ^
Vendor Preferences
Organization Details
Estimate and Project details v
ECM/Community Supports v
CalAIM PATH v
Submit v

← Save and Exit

Home / Vendor Selection / Application Information

Organization Details

Please confirm if the registered primary contact on file will be responsible for the progress and successful completion of the the requested technical assistance (TA) services.

Organization Details

Name: TEST RH
Type: FQ
Street Address: 123 Test Way
City: Roseville
state: CA
Zip: 95661
Website: www.example.com

Primary Contact Details

First Name: Rebekah
last Name: Hartford
Title: CEO
Phone Number: (916) 276-1234
Email: Test-PATH@example.com

Is the registered primary contact on file going to be responsible for progress and successful completion of the requested TA?
 Yes No

Do you want to add Secondary contact responsible for progress and successful completion of the requested TA?
 Yes No

Previous Next

Secondary TA Contact

All Fields Required

Please enter the contact who will be directly responsible for progress and successful completion of this Hands-On TA.

First Name

Last Name

Title

Phone Number
(###) ### - ####

Email

Cancel Add

Off-the-Shelf Step 9: Complete all required fields and move to the next page.

The screenshot shows a web application interface for HCS | PATH. The top navigation bar is dark blue with the HCS | PATH logo on the left and a circular 'RH' icon on the right. Below the navigation bar is a breadcrumb trail: [Home](#) / [Vendor Selection](#) / ECM / Community Supports. On the left side, there is a vertical menu with several items: 'Application Information' (with a dropdown arrow), 'Estimate and Project details' (with a dropdown arrow), 'ECM/Community Supports' (with an expand/collapse arrow and a sub-item 'ECM/Community Supports' highlighted in a light purple box), 'CalAIM PATH' (with a dropdown arrow), and 'Submit' (with a dropdown arrow). At the bottom left of the menu area is a link: [← Save and Exit](#). The main content area has a title 'ECM and/or Community Support' in purple, followed by a 'All Fields Required' label in a light grey box. Below the title is a paragraph of instructions: 'Please explain how the requested TA will strengthen your organization's ability to provide high-quality Enhanced Care Management (ECM) and/or Community Supports for Medi-Cal members. Please provide as much detail as possible. Reviewers should be able to clearly discern how the project you are requesting will augment your ability to engage with MCPs or other eligible entities and provide high quality ECM or CS.' Underneath the text is a large, empty text input field with a light grey border. In the bottom right corner of the input field, there is a character count '0/2000'. At the bottom of the form, there are two buttons: 'Previous' (a light purple button) and 'Next' (a dark purple button).

Off-the-Shelf Step 10: Complete all required fields. If you answer Yes to any of the questions on this page, you must provide further details by selecting the +Add option under each question.

HCS | PATH RH

Application Information ▾
Estimate and Project details ▾
ECM/Community Supports ▾
CaAIM PATH ▾
 Connection to Other PATH Initiatives
 Non-Duplication of Funding
Submit ▾

[← Save and Exit](#)

[Home](#) / [Vendor Selection](#) / CaAIM PATH

Connection to Other PATH Initiatives All Fields Required

Please make a selection if the requested TA fits into the following categories.

Will the TA you are about to request complement, support, or expand upon a previous TA Project implemented via the CaAIM PATH TA Marketplace?
 Yes No

Will the requested TA complement, support, or expand upon a CITED grant that your organization has received or intends to apply for?
 Yes No

Will the requested TA complement, support, or help implement learnings from a CaAIM PATH Collaborative Planning and Implementation in which your organization is participating or has participated?
 Yes No

Will the requested TA complement, support, or help implement learnings from a PATH Justice Involved (JI) project in which your organization is participating or has participated?
 Yes No

Is there any other information you would like to provide as part of this Hands On TA Project request?
 Yes No

Connection to Other PATH Initiatives X


Previous TA Project implemented via the CaAIM PATH TA Marketplace All Fields Required

TA Project Number

Please briefly explain how the requested TA will complement, support, or expand upon the previous TA Project?

0/2000

Off-the-Shelf Step 11: Complete all required fields. If you answer Yes, you will be prompted to explain how the requested TA is different than other services or projects undertaken with other federal, state, or local funds.

RH

[Home](#) / [Vendor Selection](#) / CaAIM PATH

Non-Duplication of Funding All Fields Required

TA Projects cannot be duplicative of other services or other projects undertaken by the TA Recipient with other federal, state, or local funds, including other PATH funds, payments received for covered Medi-Cal services, or other payment programs, such as incentives.

Could any aspect of the requested TA be reasonably perceived to be duplicative of or similar to other services or projects undertaken with other federal, state, or local funds?

Yes No

Please briefly explain how the requested TA is different.

0/2000

I attest that the requested TA is not duplicative of other services received or other projects undertaken by our organization with other federal, state, or local funds.

[Previous](#) [Next](#)

[← Save and Exit](#)

Off-the-Shelf Step 12: Review the information provided on the Submit page and select the Submit button when you are ready to submit your TA Project Eligibility Application.

The screenshot shows the 'Submit' page in the HCS | PATH system. The header includes the HCS | PATH logo and an RH icon. A navigation menu on the left lists: Application Information, Estimate and Project details, ECM/Community Supports, CalAIM PATH, and Submit (which is expanded to show a 'Submit' button). A breadcrumb trail at the top reads 'Home / Vendor Selection / Submit'. The main heading is 'Submit' with a note 'All Fields Required'. A message states: 'Successful submission of this application will initiate the steps listed below.' A box contains three bullet points: 1. The Technical Assistance (TA) Project Eligibility Application will be reviewed, and the preferred TA Vendor's availability will be confirmed. Registered TA Recipients will be notified when their application is approved. 2. Once the application is approved, registered TA Recipients can begin work with their preferred TA Vendor to develop a full scope of work (SOW) and budget for the requested TA. TA Vendors are responsible for submitting the final SOW and budget for review. Registered TA Recipients must attest to their approval of the SOW and budget prior to review. 3. Registered TA Recipients and TA Vendors will be notified when the SOW and budget is approved. Note that no work should begin on a TA Project until formal approval of the SOW and budget is received. Detailed feedback will be provided for any application that is not approved. Below this box, it says 'Assistance is available to discuss application comments and questions at any point during this process.' At the bottom are 'Previous' and 'Submit' buttons. A '← Save and Exit' link is also visible in the left sidebar.

HCS | PATH RH

[Application Information](#) ▾ [Home](#) / [Vendor Selection](#) / Submit

Submit All Fields Required

Successful submission of this application will initiate the steps listed below.

- The Technical Assistance (TA) Project Eligibility Application will be reviewed, and the preferred TA Vendor's availability will be confirmed. Registered TA Recipients will be notified when their application is approved.
- Once the application is approved, registered TA Recipients can begin work with their preferred TA Vendor to develop a full scope of work (SOW) and budget for the requested TA. TA Vendors are responsible for submitting the final SOW and budget for review. Registered TA Recipients must attest to their approval of the SOW and budget prior to review.
- Registered TA Recipients and TA Vendors will be notified when the SOW and budget is approved. Note that no work should begin on a TA Project until formal approval of the SOW and budget is received. Detailed feedback will be provided for any application that is not approved.

Assistance is available to discuss application comments and questions at any point during this process.

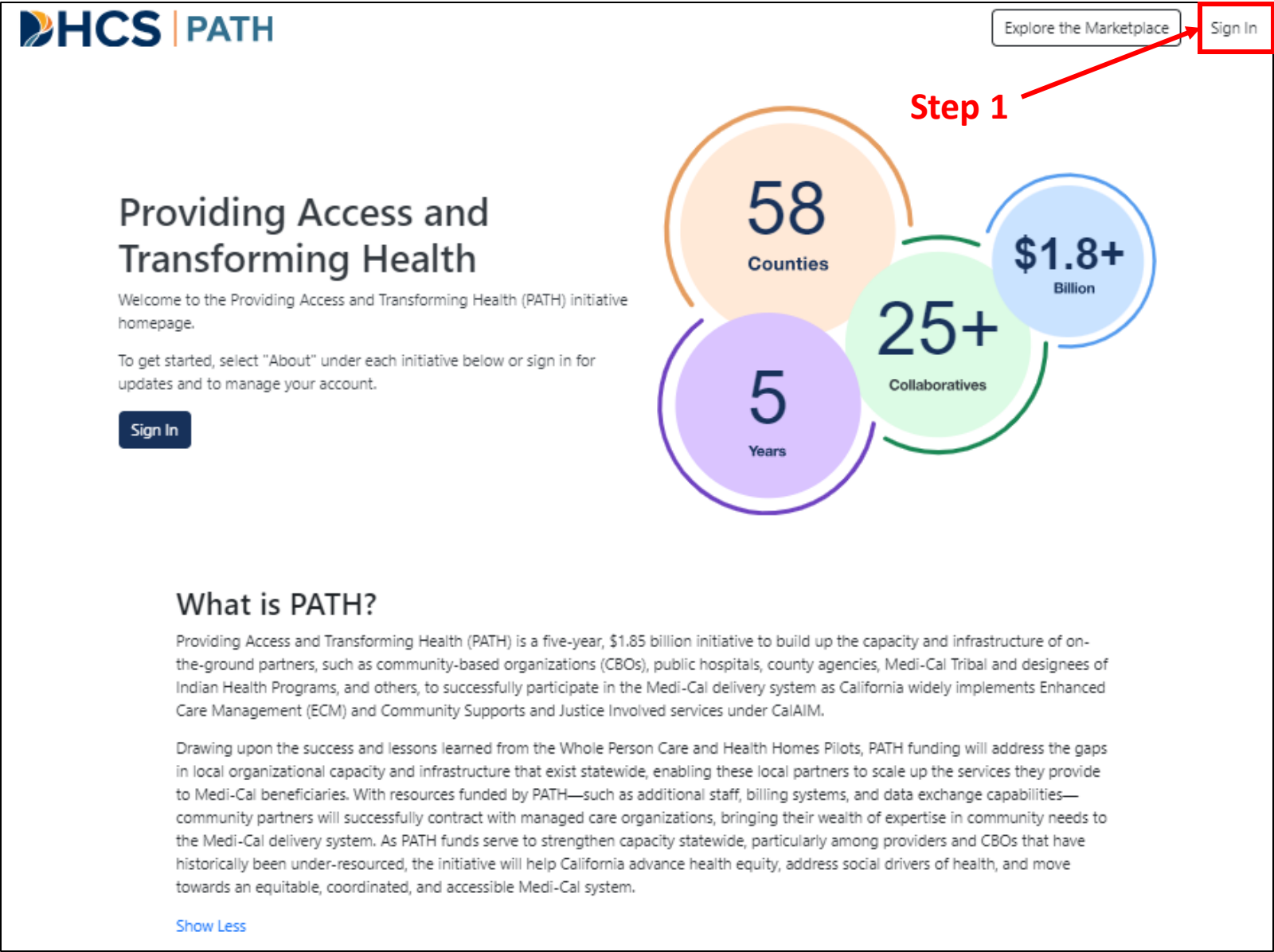
[← Save and Exit](#)

[Previous](#) [Submit](#)

TA Marketplace Recipient Project Scope of Work Flow



Step 1: Navigate to the PATH homepage (ca-path.com) and select the Sign In button.



The screenshot shows the PATH homepage with the following elements:

- Header:** DHCS | PATH logo on the left. On the right, there are two buttons: "Explore the Marketplace" and "Sign In". The "Sign In" button is highlighted with a red box, and a red arrow labeled "Step 1" points to it.
- Main Content:**
 - ## Providing Access and Transforming Health
 - Welcome to the Providing Access and Transforming Health (PATH) initiative homepage.
 - To get started, select "About" under each initiative below or sign in for updates and to manage your account.
 - [Sign In](#)
- Infographic:** A central graphic with four overlapping circles containing statistics:
 - Orange circle: 58 Counties
 - Blue circle: \$1.8+ Billion
 - Green circle: 25+ Collaboratives
 - Purple circle: 5 Years
- Text Content:**
 - ### What is PATH?
 - Providing Access and Transforming Health (PATH) is a five-year, \$1.85 billion initiative to build up the capacity and infrastructure of on-the-ground partners, such as community-based organizations (CBOs), public hospitals, county agencies, Medi-Cal Tribal and designees of Indian Health Programs, and others, to successfully participate in the Medi-Cal delivery system as California widely implements Enhanced Care Management (ECM) and Community Supports and Justice Involved services under CalAIM.
 - Drawing upon the success and lessons learned from the Whole Person Care and Health Homes Pilots, PATH funding will address the gaps in local organizational capacity and infrastructure that exist statewide, enabling these local partners to scale up the services they provide to Medi-Cal beneficiaries. With resources funded by PATH—such as additional staff, billing systems, and data exchange capabilities—community partners will successfully contract with managed care organizations, bringing their wealth of expertise in community needs to the Medi-Cal delivery system. As PATH funds serve to strengthen capacity statewide, particularly among providers and CBOs that have historically been under-resourced, the initiative will help California advance health equity, address social drivers of health, and move towards an equitable, coordinated, and accessible Medi-Cal system.
 - [Show Less](#)

Step 2: Sign-in to your Recipient Console. For help signing-in or resetting your password, please refer to the [Sign-in and Password Reset](#) guide.

[Sign In](#) [Create Account](#)

Welcome to PATH TPA Sign-In

Please sign-in or create an account

Username

Password

Sign in

Forgot your password?

For help signing-in or resetting a password, please refer to the [Sign-in and Password Reset](#) guide.

Step 3: On your Recipient Console homepage, select the Vendor Invoices tab.

Home

Shop TA
Marketplace

Home / Technical Assistance

Technical Assistance

- Recipient Eligibility 1
- TA Service Applications 1
- Scope of Work 1**
- Vendor Invoices 1

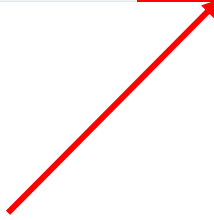
Recipient Eligibility

Eligible

Application ID: TBD

View

Step 3



Step 4: Under the Scope of Work tab, locate your new TA Project and select the Start button. Please note that you must approve identified sections of the Project Details and Project Plan before the TA Vendor can submit the Scope of Work.

- Home
- Technical Assistance
- Explore the Marketplace

Home / Technical Assistance

Technical Assistance

Recipient Eligibility 1 TA Service Applications 0 Scope of Work 1 Vendor Invoices 0

Project ID or Vendor Name

Status Reset All

Smith Consulting Services, LLC

In Progress

Project ID: 23051205092710417

Off-the-shelf

Name of Project

Start

Step 4

Showing 1 of 1

PART 1 | Project Details: Review, approve, and complete all required Project Details sections. Please note that:

- Sections may be reviewed and approved in any order.
- You can view any saved, draft sections that the TA Vendor creates. However, these sections cannot be approved until the TA Vendor completes and submits the section(s).
- As soon as the TA Vendor completes and submits a section, you will be able to review and approve the section.

✔ Project Details

✔ Project Plan

← [Exit](#)

[Home](#) / [Project Scope of Work](#) / Smith Consulting Services, LLC

Project Details Project ID: 23051205092710417 In Progress

Vendor Details

Name: Smith Consulting Services, LLC
Primary Contact: Stephen Smith
Email: Stephen@vendoremail.com
Phone Number: (555)-555-5555

Project Details

Domain: Community Supports
Service Type: Off-the-Shelf
Service Name: Name of Project
Requested Start Date: 04/10/2023

Create your Scope of Work by completing each section below. In the Scope of Work, the recipient is responsible for approving each section submitted by the vendor for their review. The recipient must also provide contact information for their organization's legal signatory. Please note that the vendor, recipient, and TPA will be able to view sections as they are initiated.

| | Recipient Status | Recipient Action | Vendor Status |
|--|------------------|------------------------|--------------------------|
| Project Summary Brief description of the project. | Pending Review | Review | Complete |
| Recipient Legal Signatory Must be completed by authorized Recipient representative. | Pending Input | Start | N/A |
| Goals and Objectives Detailed description of the project goals and objectives. | Pending Review | Review | Complete |
| Non-Duplication of Funding Funding information for other projects, if applicable, and non-duplication attestation. | Pending Review | Review | Complete |
| Sustainability Description of project sustainability, if applicable, and sustainability attestation. | Pending Review | Review | Complete |
| Project Management and Communication Plan Description of the project management and communication plan. | Pending Review | Review | Complete |
| References (Optional) Supporting references for the project. | N/A | View | Complete |
| Assumptions (Optional) Assumptions for the project. | Pending Review | Review | Complete |

[Back](#)

[Continue to Project Plan](#)

Project Summary: Review the Project Summary section. To send this section back to the TA Vendor for edits, select Action Required. To approve this section, select Approve.

Project Summary

All Fields Required

The project summary should communicate to eligible recipients what they can expect from this specific project and should identify specific differences from other scopes developed between this vendor and recipient.

Additionally, this project summary may be made publicly available to share information about the CalAIM PATH TA Marketplace. Please use accessible, non-technical language understandable to reviewers with varied expertise and experience.

Provide project summary.

This is an example.

20/2000

[Back](#)

 Action Required

 Approve

Recipient Legal Signatory: Complete the Recipient Legal Signatory fields to provide contact information for your organization's legal signatory. To save a draft, select Save Draft. When you are finished, select Complete Legal Signatory.

Recipient Legal Signatory

All Fields Required

Person who will receive the contract via email and responsible for signing the final Scope of Work (SOW).

First Name

Last Name

Title

Please enter your organization title.

Phone Number

Please enter your work phone number.

Email

Please enter your organization's email.

[Cancel](#)

[Save Draft](#)

[Complete Legal Signatory](#)

Project Goals and Objectives: Review the Project Goals and Objectives section. To send this section back to the TA Vendor for edits, select Action Required. To approve this section, select Approve.

Project Goals and Objectives

All Fields Required

The project's goals and objectives should be clearly stated and identify the connection to the goals of CalAIM, including how the project will advance the TA Recipient's ability to provide high quality Enhanced Care Management (ECM) or Community Support services. Goals and objectives should be specific and detailed to avoid delays in project approval.

Please use accessible, non-technical language understandable to reviewers with varied expertise and experience.

Provide project goals and objectives.

This is an example.

20/2000

[Back](#)

 Action Required

 Approve

Non-Duplication of Funding: Review the Non-Duplication of Funding section. To send this section back to the TA Vendor for edits, select Action Required. To approve this section, select Approve.

Non-Duplication of Funding

All Fields Required

TA Projects cannot be duplicative of other services or other projects undertaken by the TA Recipient with other federal, state, or local funds, including other CalAIM PATH funds, payments received for covered Medi-Cal services, or other payment programs, such as incentives.

If this TA Project could appear to be duplicative or similar to other services or projects undertaken with other federal, state, or local funds, please briefly explain how this TA Project is different. Please indicate N/A if this does not apply to this TA Project.

Yes

Not Applicable

Recipient Project Eligibility Application Response

Copy & Paste Recipient Response

Describe how payments from the TA Marketplace initiative will not duplicate or supplant reimbursement received through other programs/initiatives.

This is an example.

20/4000

- By checking this box, the TA Vendor attests that the TA Recipient has confirmed that this TA Project is not duplicative of other services received or other projects undertaken by the TA Recipient with other federal, state, or local funds.

[Back](#)

[Action Required](#)

[Approve](#)

Sustainability: Review the Sustainability section. To send this section back to the TA Vendor for edits, select Action Required. To approve this section, select Approve.

Sustainability


All Fields Required


Person who will receive the contract via email and responsible for signing the final Scope of Work (SOW).

For TA Projects with work products meant to be updated and used beyond the period of performance, please describe what on-going costs are associated with these products, and what the TA Recipient's plans are for sustainability of the project products and outputs. Please indicate N/A if this does not apply to this TA Project. *

Yes Not Applicable

[Back](#)

 Action Required

 Approve

Project Management and Communication Plan: Review the Project Management and Communication Plan section. To send this section back to the TA Vendor for edits, select Action Required. To approve this section, select Approve.

Project Management and Communication Plan

All Fields Required

Description of the project management and communication plan.

Please briefly describe how the TA Vendor will maintain communication with the TA Recipient on progress and status of the TA Project. If not addressed in an earlier section, please describe the agreed upon division of labor between the TA Recipient and the TA Vendor, as appropriate.

This is an example.

4/2000

[Back](#)


 Action Required

 Approve

Reference Materials (Optional): View any Reference Materials provided by the TA Vendor. Please note that this section does not require your approval.

Reference Materials

Please include reference materials from prior projects.

 Document Type: Illustration
Name: [Sample.docx](#)
Description: This is an example

[Back](#)


Assumptions (Optional): If the TA Vendor submitted project assumptions, review the Assumptions section. To send this section back to the TA Vendor for edits, select Action Required. To approve this section, select Approve.


Assumptions

Please include applicable specifications, illustrations, diagrams, tables, charts, and similar elements if they assist in describing the planned work or related requirements. TA Vendors engaged in Hands-On TA Projects should use this section to identify if any tools or resources to be utilized in the TA Project were created by the TA Vendor prior to their acceptance into the TA Marketplace.

| No. | Assumption Name | Description |
|-----|-----------------------|---------------------|
| 1 | This is an Assumption | This is an example. |

[Back](#)

 Action Required

 Approve

Continue to Project Plan: Once you have approved or completed all Project Details sections, select Continue to Project Plan.

- ✓ Project Details
 - ✓ Project Plan
- ← [Exit](#)

Project Details Project ID: 23051205092710417 In Progress

| | |
|---|--|
| Vendor Details Name: Smith Consulting Services, LLC Primary Contact: Stephen Smith Email: Stephen@vendoremail.com Phone Number: (555)-555-5555 | Project Details Domain: Community Supports Service Type: Off-the-Shelf Service Name: Name of Project Requested Start Date: 04/10/2023 |
|---|--|

Create your Scope of Work by completing each section below. In the Scope of Work, the recipient is responsible for approving each section submitted by the vendor for their review. The recipient must also provide contact information for their organization's legal signatory. Please note that the vendor, recipient, and TPA will be able to view sections as they are initiated.

| | Recipient Status | Recipient Action | Vendor Status |
|--|------------------|----------------------|---------------|
| Project Summary Brief description of the project. | Approved | View | Complete |
| Recipient Legal Signatory Must be completed by authorized Recipient representative. | Complete | View | N/A |
| Goals and Objectives Detailed description of the project goals and objectives. | Approved | View | Complete |
| Non-Duplication of Funding Funding information for other projects, if applicable, and non-duplication attestation. | Approved | View | Complete |
| Sustainability Description of project sustainability, if applicable, and sustainability attestation. | Approved | View | Complete |
| Project Management and Communication Plan Description of the project management and communication plan. | Approved | View | Complete |
| References (Optional) Supporting references for the project. | N/A | View | Complete |
| Assumptions (Optional) Assumptions for the project. | Approved | View | Complete |

Continue to Project Plan

[Back](#) [Continue to Project Plan](#)

PART 2 | Project Plan: Review, approve, and complete all required Project Plan sections. Please note that:

- Sections may be reviewed and approved in any order.
- You can view any saved, draft sections that the TA Vendor creates. However, these sections cannot be approved until the TA Vendor completes and submits the section(s).
- As soon as the TA Vendor completes and submits a section, you will be able to review and approve the section.
- Project Type does not require your approval.

Home / [Project Scope of Work](#) / Smith Consulting Services, LLC

Project Plan Project ID: 23051205092710417 In Progress

Project Details

Project Plan

[← Exit](#)

| Vendor Details | Project Details |
|--------------------------------------|----------------------------------|
| Name: Smith Consulting Services, LLC | Domain: Community Supports |
| Primary Contact: Stephen Smith | Service Type: Off-the-Shelf |
| Email: Stephen@vendoremail.com | Service Name: Name of Project |
| Phone Number: (555)-555-5555 | Requested Start Date: 04/10/2023 |

Create your Project Plan by completing each section below. In the Project Plan, the recipient is responsible for approving each section submitted by the vendor for their review. Please note that the vendor, recipient, and TPA will be able to view sections as they are initiated.

| | Recipient Status | Recipient Action | Vendor Status |
|---|-----------------------------|------------------------|--------------------------|
| Project Type Time and materials or deliverable based project | N/A | View | Complete |
| Project Services List of project service(s) and staff | Pending Review | Review | Complete |
| Other Direct Costs (Optional) Time and materials or deliverable based project | Pending Review | Review | Complete |

[Back](#) [Exit](#)

Project Type: View the Project Type. Please note that this section does not require your approval.

Project Type

All Fields Required

Select Deliverables Based or Time and Materials Based. You will be able to change your selection in the next step but be aware that changing your selection will need erase any existing budget items.

If you need assistance or have any questions regarding the Scope of Work contract types, please contact us at ta-marketplace@ca-path.com



Deliverables Based

Deliverables based scopes of work must provide a detailed overview of the specific tasks and outcomes that need to be achieved in order to successfully complete the project or achieve the objectives. This deliverable based contract outlines the work packages or deliverables that need to be completed and breaks them down into smaller tasks with associated costs to be invoiced by the TA Vendor upon task completion. Deliverables based contracts may only be invoiced once a deliverable is completed.

Each deliverable must be clearly outlined and organized in a structured list providing the associated costs for each deliverable or task.

In completing the budget for a deliverables-based contract, TA Vendors should ensure that 1) labor rates cited match the labor rates on file with the TA Marketplace for their organization, and 2) individual costs identified for a deliverable sum to the total cost of the deliverable.



Time and Materials Based

Time and Materials based scopes of work must provide a detailed overview of the specific tasks and outcomes that need to be achieved in order to successfully complete the project or achieve the objectives. This time and material-based contract will be paid based on the hours billed by the vendor specific to the staff title. Vendors may bill monthly for their services, up to the "not to exceed" amount.

In completing the budget for a time and materials-based contract, TA Vendors should ensure that labor rates cited match the labor rates on file with the TA Marketplace for their organization.

Please select the anticipated invoice frequency



Monthly



Quarterly

Vendors submit invoices on either a monthly or quarterly basis for all services/deliverables rendered during the applicable period. Invoices are initiated through the PATH TPA website (<https://console.ca-path.com>), submitted to TA Recipients for review and acknowledgement, and then processed through DHCS' Third Party Administrator. Upon receipt and review, the TPA will confirm that TA service delivery has been satisfactorily met. If so, the TPA will cause payment to be remitted to vendor on the subsequent ACH payment date. Payments will be disbursed a maximum of 45 days from date of invoice approval.

Back

Project Services: Review the Project Services section. You can view a summary of the Project Services at the top of the page. To view additional details, select the drop down or the View button for each line item.





To send this section back to the TA Vendor for edits, select Action Required. To approve this section, select Approve.

Project Services

All Fields Required

Project services are tasks of a work item or activity with a specific purpose related to the larger project. It's a necessary step on the road towards project completion.

| | | | | |
|---|---|--|---------------------------|----------------------------------|
| Projected Start Date 10/23/2023 | Projected End Date 01/25/2024 | Total Projected Duration 3 MONTHS 2 DAYS | Total Hours 158 | Total Cost \$47,870.00 |
|---|---|--|---------------------------|----------------------------------|

| Service Name ¹ ₂ | Start Date ¹ ₂ | End Date ¹ ₂ | Hours ¹ ₂ | Costs ¹ ₂ | |
|---|--------------------------------------|------------------------------------|---------------------------------|---------------------------------|---|
|  Service 1 | 11/21/2023 | 01/25/2024 | 106 | \$29,150.00 |  |
| Description: This is an example. | | | | | |
|  Service 2 | 10/23/2023 | 11/20/2023 | 52 | \$18,720.00 |  |

[Back](#)

Click to view details

Other Direct Costs (Optional): If the TA Vendor submitted other direct costs, review the Other Direct Costs section. You can view a summary of at the top of the page. To view additional details, select the drop down for each line item.

To send this section back to the TA Vendor for edits, select Action Required. To approve this section, select Approve.

Other Direct Costs

All Fields Required

Please add any other direct costs associated with the requested TA Project.

| | |
|---------------------------------|------------------------------|
| Total Other Direct Costs Amount | Number of Other Direct Costs |
| \$90.00 | 1 |

| Type ¹ ₂ | Cost Per Unit ¹ ₂ | Quantity ¹ ₂ | Cost ¹ ₂ |
|--------------------------------|---|------------------------------------|--------------------------------|
| ▼ Equipment | \$30.00 | 3 | \$90.00 |

[Back](#)

[Action Required](#) [Approve](#)

TA Recipient Review Complete: When you have completed and approved all required Project Details and Project Plan sections, the TA Vendor will be able to submit the Scope of Work.

[Home](#) / [Project Scope of Work](#) / Smith Consulting Services, LLC

Project Details Project ID: 23051205092710417 In Progress

Vendor Details

Name: Smith Consulting Services, LLC
 Primary Contact: Stephen Smith
 Email: Stephen@vendoremail.com
 Phone Number: (555)-555-5555

Project Details

Domain: Community Supports
 Service Type: Off-the-Shelf
 Service Name: Name of Project
 Requested Start Date: 04/10/2023

Create your Scope of Work by completing each section below. In the Scope of Work, the recipient is responsible for approving each section submitted by the vendor for their review. The recipient must also provide contact information for their organization's legal signatory. Please note that the vendor, recipient, and TPA will be able to view sections as they are initiated.

| | Recipient Status | Recipient Action | Vendor Status |
|--|------------------|----------------------|---------------|
| Project Summary Brief description of the project. | Approved | View | Complete |
| Recipient Legal Signatory Must be completed by authorized Recipient representative. | Complete | View | N/A |
| Goals and Objectives Detailed description of the project goals and objectives. | Approved | View | Complete |
| Non-Duplication of Funding Funding information for other projects, if applicable, and non-duplication attestation. | Approved | View | Complete |
| Sustainability Description of project sustainability, if applicable, and sustainability attestation. | Approved | View | Complete |
| Project Management and Communication Plan Description of the project management and communication plan. | Approved | View | Complete |
| References (Optional) Supporting references for the project. | N/A | View | Complete |
| Assumptions (Optional) Assumptions for the project. | Approved | View | Complete |

[Home](#) / [Project Scope of Work](#) / Smith Consulting Services, LLC

Project Plan Project ID: 23051205092710417 In Progress

Vendor Details

Name: Smith Consulting Services, LLC
 Primary Contact: Stephen Smith
 Email: Stephen@vendoremail.com
 Phone Number: (555)-555-5555

Project Details

Domain: Community Supports
 Service Type: Off-the-Shelf
 Service Name: Name of Project
 Requested Start Date: 04/10/2023

Create your Project Plan by completing each section below. In the Project Plan, the recipient is responsible for approving each section submitted by the vendor for their review. Please note that the vendor, recipient, and TPA will be able to view sections as they are initiated.

| | Recipient Status | Recipient Action | Vendor Status |
|---|------------------|----------------------|---------------|
| Project Type Time and materials or deliverable based project | N/A | View | Complete |
| Project Services List of project service(s) and staff | Approved | View | Complete |
| Other Direct Costs (Optional) Time and materials or deliverable based project | Approved | View | Complete |

[Back](#) [Exit](#)