



PATH Collaborative Planning & Implementation (CPI)

Welcome! The Southwest Collaborative Planning Convening will begin shortly.

January 15, 2026



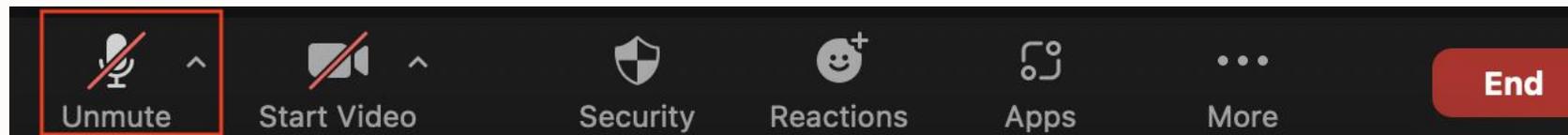


This event is being recorded and transcribed.

Why? PHIL uses the recording and transcription to assess key takeaways, CPI participant needs, and to develop better events for you in the future.

Recordings will be available by request after the event.
Email PATH@pophealthinnovationlab.org to request access.

Please mute your microphone during the presentation.





PATH Collaborative Planning & Implementation (CPI)

Southwest Collaborative Monthly Convening

January 15, 2026





Thank you to our sponsors



PUBLIC™
CONSULTING GROUP



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.



Welcome & Housekeeping



Roll Call

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



Request for Vendors

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

Population Health Innovation Lab (PHIL)

PATH CPI Project Team



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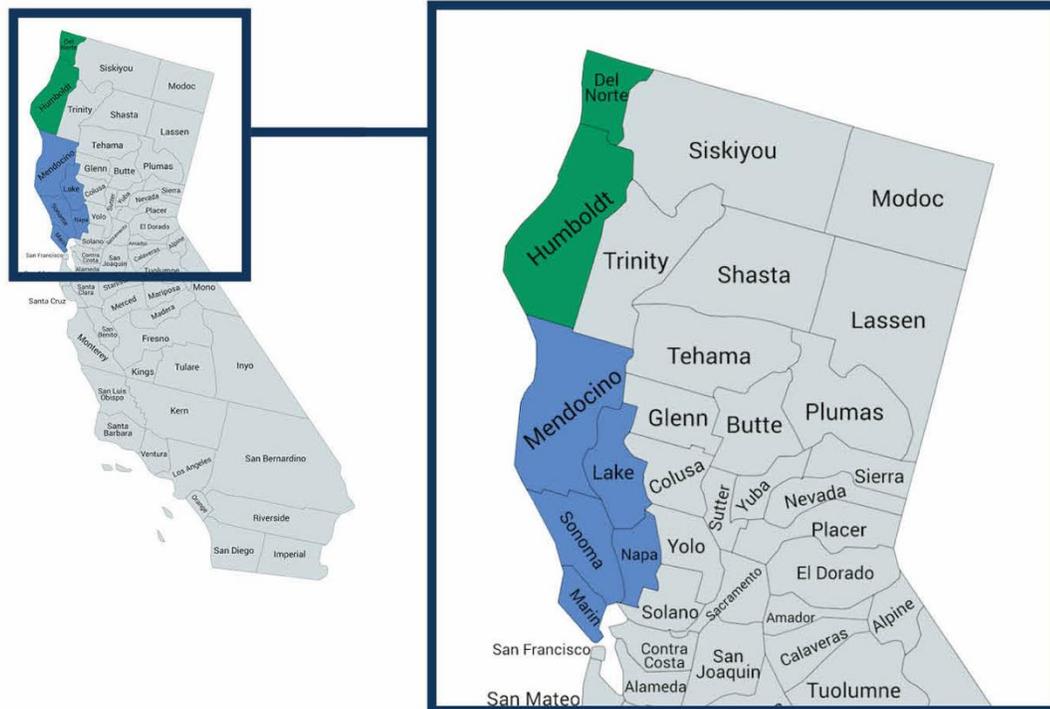
Lizania Romero
Research Associate III
liromero@phi.org



Collaborative Planning & Implementation Overview

Region Counties Supported by PHIL

-  Northwest
-  Southwest



CPI collaboratives will work together to identify, discuss, and resolve CalAIM implementation issues.

- Learn more about the PATH CPI initiative [here](#).
- Catch up with us! Find meeting materials, Readiness Roadmap Resources, and registration links on the [PHIL website](#).
- Find all the specific resources for today's meeting on our [SW CPI Resource Hub \(Zoom Doc\)](#).



Scan for Zoom Doc



Southwest CPI Agenda for Today

- Welcome & Framing
- 2025 CPI Data Review: Regional Reflections
- Mini-Training & Resource Review: Open Space Technology
- Applying Open Space Technology: Equity in Practice Conversations (Breakout Rooms)
- Managed Care Plan Updates from Partnership HealthPlan of California and Kaiser Permanente
- CalAIM Announcements & Policy Updates
- Closing and Evaluation



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**



CPI Resource Hub (Zoom Doc)

PATH Southwest Region CPI Monthly Meeting Resource Hub

🕒 Updated at 09:37 PM 08/20/2025 | ⚡ Quick preview

←

[Event Details](#)

Beyond Land Acknowledg...

Monthly Meetings Links

August 21, 2025

Upcoming Events

Stay in Touch with PHIL & ...

Welcome to the resource page for our monthly CPI Meeting!

Meetings Occur the Third Thursday of the Month | 11 am -12:30 pm PT

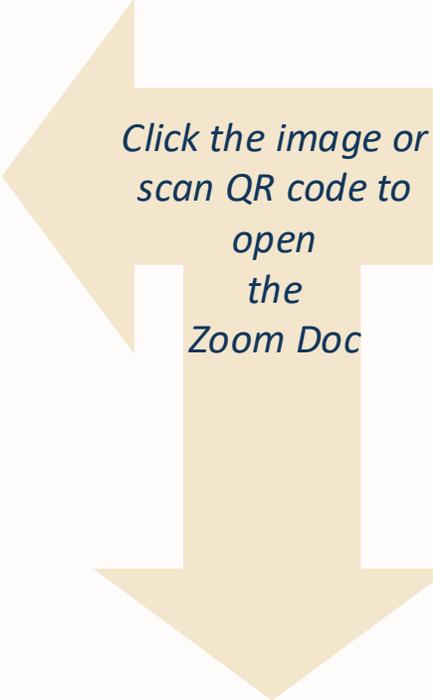
Our Sponsors:




Event Details

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The Southwest CPI is comprised of partners who come together to improve the quality of care for families and individuals in the region. Registered participants collaboratively support the implementation of [Enhanced Care Management \(ECM\) and Community Supports](#) initiatives by





2025 CPI Data Review: Regional Reflections

Engagement snapshot

- 12 monthly convenings delivered (Jan–Dec 2025)
- Attendance: Monthly aggregated attendance across the past year reflects participation from 593 individuals representing approximately 103 organizations.
- Evaluation surveys submitted: 214

91%

Positive: open & transparent forum

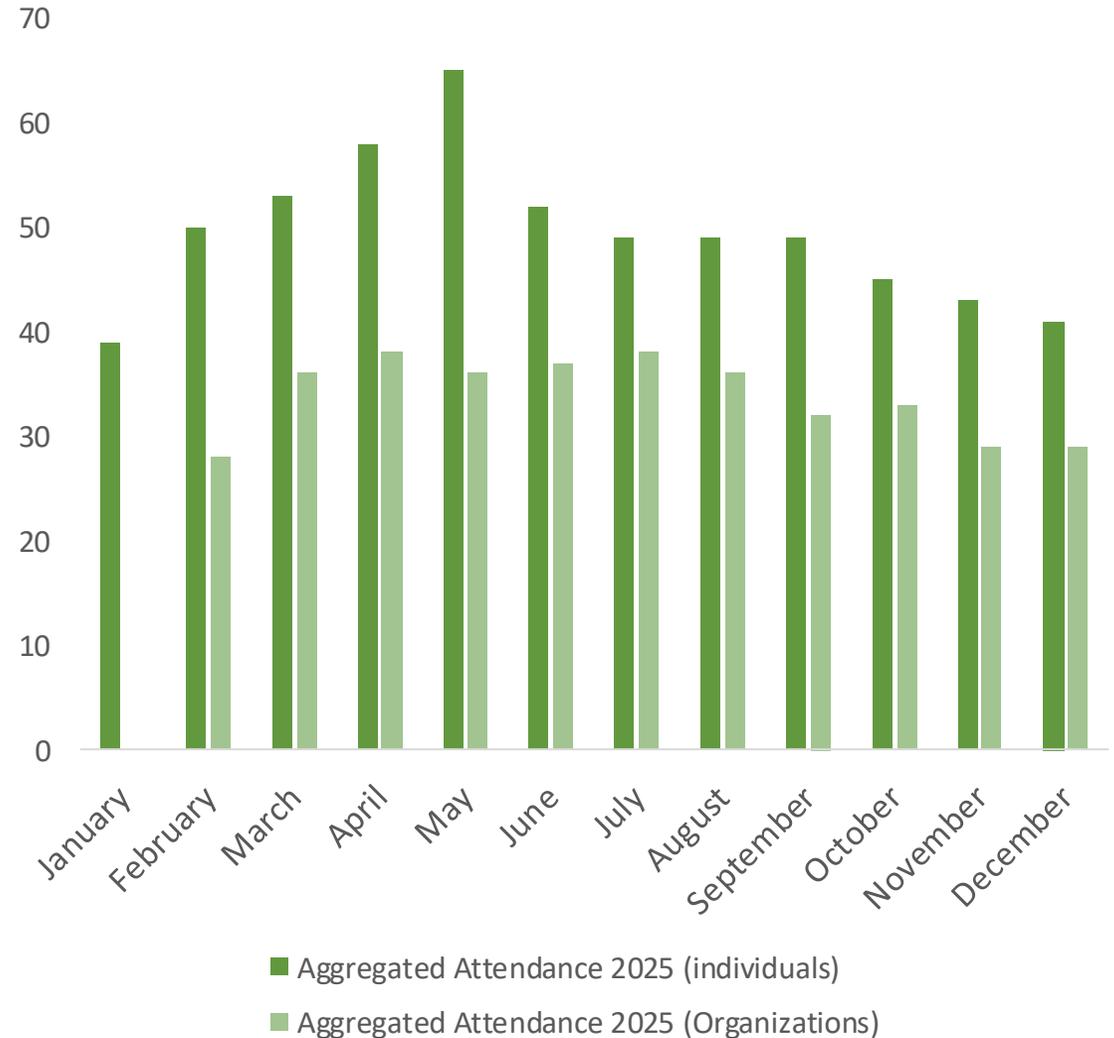
Across 2025 session evaluations (n=133)

91%

Positive: shared learning & dialogue

Across 2025 session evaluations (n=148)

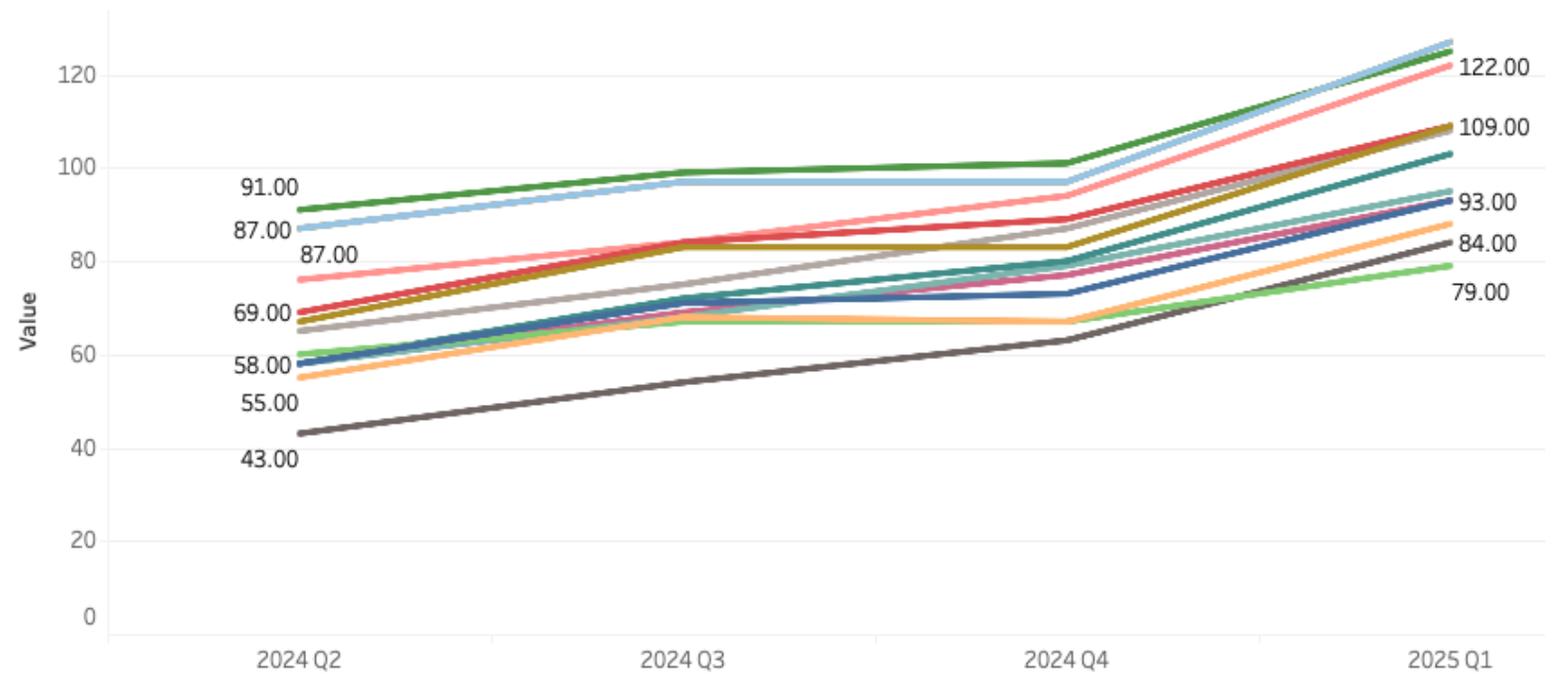
How many attended?



Contracted ECM Providers Trend, Last four Quarters

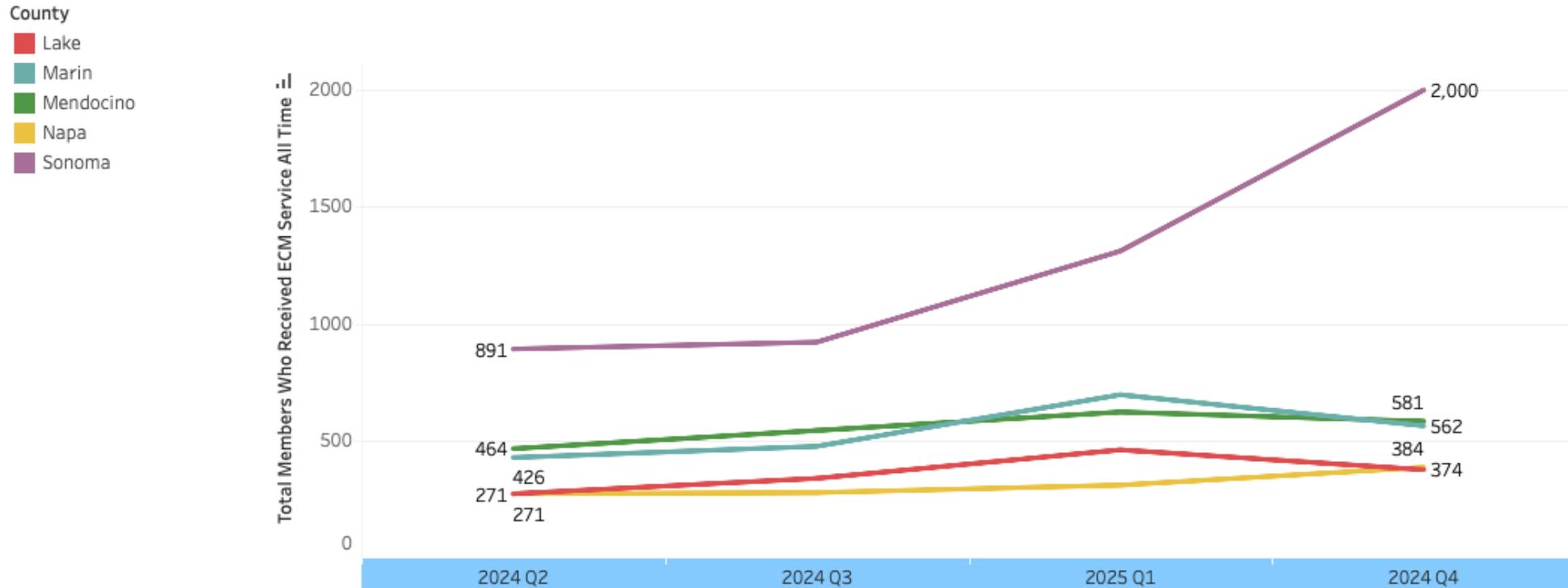
- Adult – Birth Equity
- Adult – Individuals At Risk for Avoidable Hospital or ED Utilization
- Adult – Individuals Experiencing Homelessness
- Adult – Individuals Transitioning from Incarceration (some WPC counties only)
- Adult – Individuals with Serious Mental Health and/or Substance Use Disorder ...
- Adult Nursing Facility Residents Transitioning to Community
- Adults Living in the Community and At Risk for Long-Term Care Institutionaliza...
- Children and Youth – Birth Equity
- Children and Youth – Enrolled in California Children’s Services (CCS) with Additi...
- Children and Youth – Individuals At Risk for Avoidable Hospital or ED Utilization
- Children and Youth – Individuals Experiencing Homelessness
- Children and Youth – Individuals Transitioning from Incarceration (some WPC c...
- Children and Youth – Individuals with Serious Mental Health and/or Substance ...
- Children and Youth – Involved in Child Welfare

ECM Providers by PoF in last 4 Quarters of Reporting Period (Q2 2024 to Q1 2025)



Contracted ECM providers increased by approximately **24%** across the region over the past year.

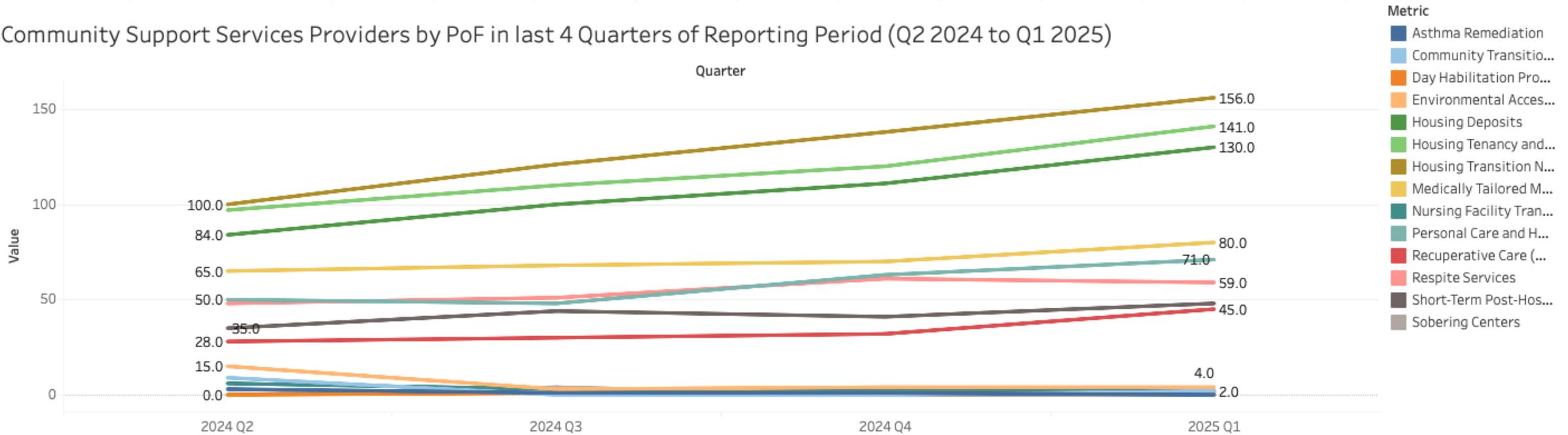
Members Receiving ECM Services, Last Four Quarters



Members receiving ECM services increased by approximately **68%** across the region over the reporting period.

Contracted Community Support Providers, Last Four Quarters

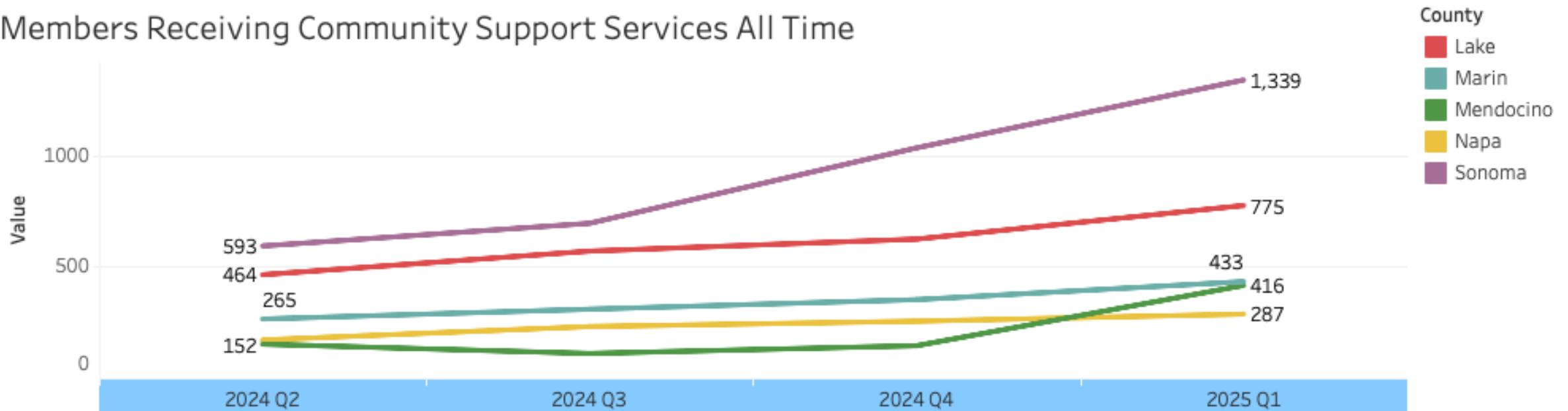
Community Support Services Providers by PoF in last 4 Quarters of Reporting Period (Q2 2024 to Q1 2025)



Contracted Community Support providers increased by approximately **45%** across the region over the past year.

Members Receiving Community Support Services — Regional Trend

Members Receiving Community Support Services All Time



Members receiving Community Support services increased by approximately **98%** across the region over the reporting period.



Equity: What We Heard & Our Progress

What We Heard

Addressing Service Gaps



- **Expand outreach & program support** to underserved populations
- **Increase availability & accessibility** of services

Tailored Support for Tribal and Rural Providers



- Address **cultural, geographic, & logistical** challenges
- Provide **targeted guidance** to strengthen local capacity
- Prioritize **Tribal partner participation**

Resource Sharing and Capacity Awareness



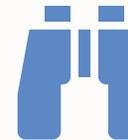
- **Improve access to information** on services and local community resources
- **Enhance awareness** of provider capacity

Our Progress & Next Steps

Progress We've Made



- Hosted three **Tribal Roundtable** meetings in 2025 (1 in person, 2 virtual)
- Discussed **Guiding Principles for Equitable Data Sharing**
- Shared **Resources & Tools** (e.g. ECM/Community Support Contracted Providers List)



Looking Ahead: Equity in 2026

- **Sustain & Expand** Equitable Practices
- Continue **Tribal Roundtable**
- Strengthen child/youth pathways (coordination, workflows, legalities)
- Improve TA marketplace access and direct points of contact



Mini-Training & Resource Review: Open Space Technology



What is Open Space Technology (OST)?

- Open Space Technology (OST) is a methodology of hosting events around a central topic where participants create the agenda themselves.
- The process is designed to be highly participatory, inclusive and collaborative and can be with groups ranging in size from 5 to over 1000.
- Participants are in full control of their experience and the outcome of the session – collectively they create the agenda



When do you use Open Space Technology?

- Open Space Technology is particularly effective when no one knows the answer, and when a diverse group of people with different perspectives is required to find a solution.
- Examples of use:
 - Community Planning and Collaboration
 - Deep learning about issues and gaining perspectives



How does Open Space Technology work?

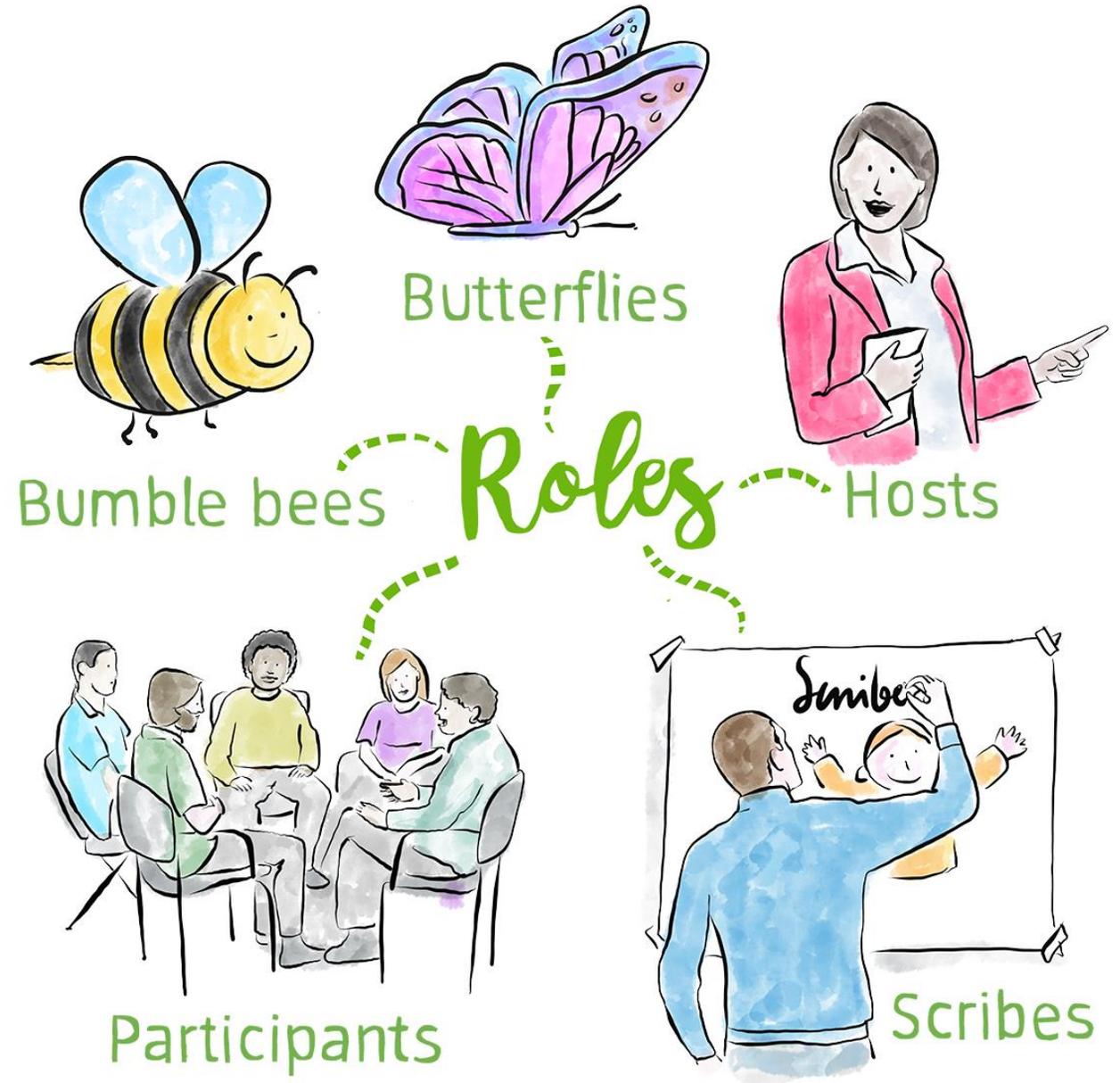
- **Set a Conversation Theme**
 - The theme helps to focus discussion and to inspire participation
 - Today's Open Space theme is *Equity in CalAIM Practice*
- **Create the Agenda and Marketplace**
 - Participants are invited to identify topics related to the theme they want to discuss
 - Not everyone needs to put forward a topic
 - The participants that suggest themes are the hosts of the conversations
 - You do **NOT** have to be an expert of the topic – it should be something you want to discuss with others
- **Break into groups by the topics related to the Theme**
 - Participants will choose which topic they are interested in discussing and go the relevant breakout room
- **Follow the OST Roles and Principles**





Open Space Roles

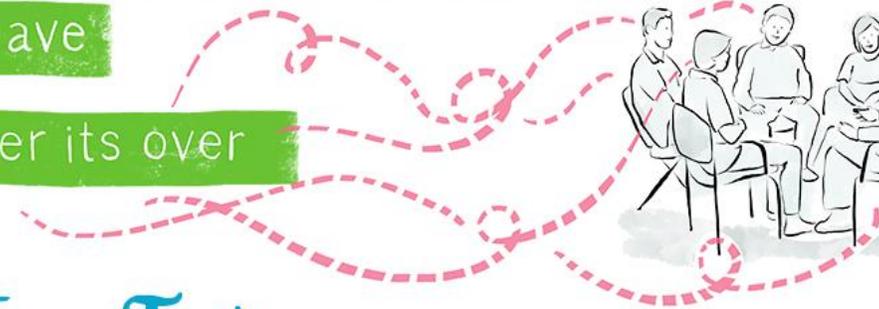
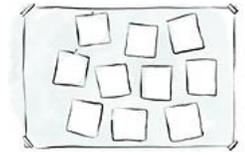
- The host is always the person that proposed the topic of discussion and does not change during a round of conversation.
- You can play one role or in some cases, start in one role and switch to another!





4 Principles of Open Space

- Whoever comes are the right people
- Whenever it starts its the right time
- Whatever happens is the only thing that could have
- When its over its over



4 Principles
and 1 Law

The Law of Two Feet

IF AT ANY TIME YOU FIND YOURSELF
IN ANY SITUATION WHERE YOU ARE
NEITHER LEARNING NOR CONTRIBUTING,
USE YOUR TWO FEET.





Questions?



Today's Open Space Marketplace Theme:

Equity in Practice

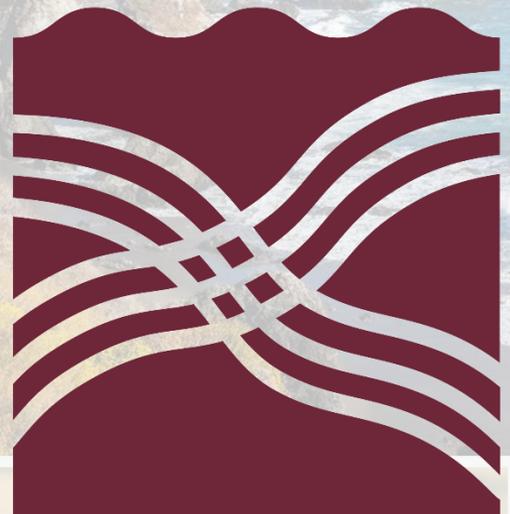


Partnership HealthPlan of California (PHC)

Managed Care Plan CalAIM Updates
January 2026

Amber Kovalchuk

PARTNERSHIP



HEALTHPLAN
of CALIFORNIA
A Public Agency



MCP CalAIM Updates January 2026





Agenda

Transitional Rent

Housing Deposit
Changes

ECM Exclusion-
DSNP

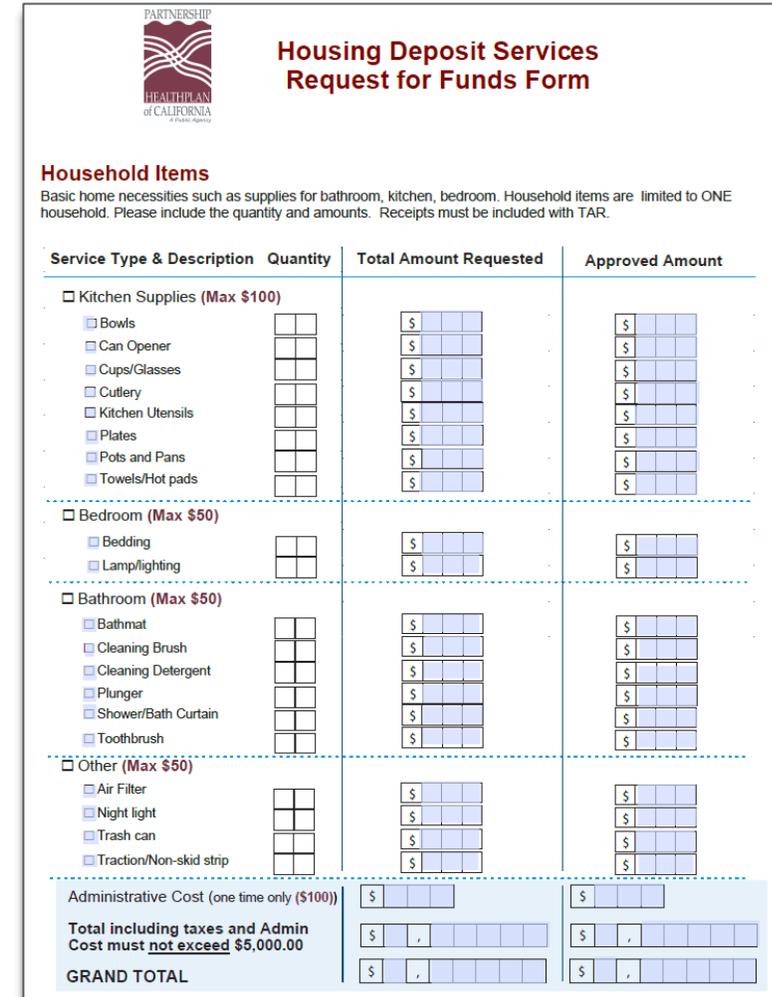


Transitional Rent

- Partnership is working with County BHA to complete contracting
- DHCS is still working on finalizing the referral requirements and the policy guide for Transitional Rent
- Partnership has added Transitional Rent to the referral form. Please note:
 - Transitional Rent may not be used to cover eviction prevention including back rent or prospective rental assistance for individuals who are housed and at risk of homelessness
 - Members must meet all three of the eligibility requirements to be referred to a provider
 - Once deemed eligible, the member will work with provider to identify appropriate housing and work on a sustainability plan which is a requirement of Transitional Rent approval

Community Supports: Housing Deposit Changes

- Beginning in January, certain Household Furnishings will be reimbursable under the Housing Deposit Service using the *Housing Deposit Services Request for Funds Form*.
- Providers will be expected to submit the following with the HD TARs
 - o HD Form request
 - o Housing Support Plan
 - o Copy of the lease or similar document
 - o Household item receipts and/or PO
- Providers will also indicate date of inspection and communication with landlord on the form
- Form was reviewed at the January provider webinar
- Form is posted on the Partnership CalAIM website



Housing Deposit Services Request for Funds Form

Household Items
Basic home necessities such as supplies for bathroom, kitchen, bedroom. Household items are limited to ONE household. Please include the quantity and amounts. Receipts must be included with TAR.

Service Type & Description	Quantity	Total Amount Requested	Approved Amount
□ Kitchen Supplies (Max \$100)			
<input type="checkbox"/> Bowls	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
<input type="checkbox"/> Can Opener	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
<input type="checkbox"/> Cups/Glasses	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
<input type="checkbox"/> Cutlery	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
<input type="checkbox"/> Kitchen Utensils	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
<input type="checkbox"/> Plates	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
<input type="checkbox"/> Pots and Pans	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
<input type="checkbox"/> Towels/Hot pads	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
□ Bedroom (Max \$50)			
<input type="checkbox"/> Bedding	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
<input type="checkbox"/> Lamp/lighting	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
□ Bathroom (Max \$50)			
<input type="checkbox"/> Bathmat	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
<input type="checkbox"/> Cleaning Brush	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
<input type="checkbox"/> Cleaning Detergent	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
<input type="checkbox"/> Plunger	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
<input type="checkbox"/> Shower/Bath Curtain	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
<input type="checkbox"/> Toothbrush	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
□ Other (Max \$50)			
<input type="checkbox"/> Air Filter	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
<input type="checkbox"/> Night light	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
<input type="checkbox"/> Trash can	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
<input type="checkbox"/> Traction/Non-skid strip	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Administrative Cost (one time only (\$100))		\$ <input type="text"/>	\$ <input type="text"/>
Total including taxes and Admin Cost must not exceed \$5,000.00		\$ <input type="text"/>	\$ <input type="text"/>
GRAND TOTAL		\$ <input type="text"/>	\$ <input type="text"/>

ECM Exclusion: DSNP

- Dual-eligible Medicare and Medi-Cal Members enrolled in full scope Medicare with a DSNP plan are excluded from ECM
- Per DHCS, since 2024, these members should receive coordination of services (“ECM”-like supports) from their Medicare DSNP plan.
- Providers should proactively verify Medicare eligibility and confirm the Member is not enrolled in a DSNP by obtaining their Medicare plan, checking Medicare eligibility online, or calling Medicare.
- If a Member is found to not be enrolled in a DSNP, a TAR correction or reauthorization should be submitted including the Medicare card and a simple statement of attestation documenting the call to the insurance plan with date and contact.
- If a Member is enrolled in a DSNP, the Member is required to receive coordination of care through their Medicare plan.



Medi-Medi Exclusion Resources

For any questions or concerns with this requirement, you may reach out to DHCS directly at CaAIMECMILOS@dhcs.ca.gov

Please refer to the DHCS ECM policy guide for additional information:
<https://www.dhcs.ca.gov/CaAIM/ECM/Documents/ECM-Policy-Guide.pdf>





Questions

Contacts:

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

Register for upcoming CalAIM Office Hours [here](#)



Kaiser Permanente

Managed Care Plan CalAIM Updates January 2026

Tamar Kurlaender



Southwest PATH CPI

Tamar Kurlaender, Medi-Cal Local Engagement

January 15, 2026



Changes are coming to Medi-Cal. These changes will affect who can get help from the program.

Federal Update: HR 1: Eligibility Changes to Medi-Cal

Effective Date	Medi-Cal Change
October 1, 2026	Restricts Medi-Cal eligibility for some immigrant populations such as refugees.
December 31, 2026 (potential delay of two years).	Requires (with some exceptions) adults 19-64 of age to work, go to school, or volunteer to keep their Medi-Cal. This will depend on how much money their household makes.
January 1, 2027	Some individuals will be required to confirm Medi-Cal eligibility every six months, based on: <ul style="list-style-type: none">• Age (ages 19 through 64); and• Income (for example, \$21,597 for a single individual, \$29,187 for a couple)
October 1, 2028	Require Medi-Cal to impose fees for certain medical services on some individuals based on: <ul style="list-style-type: none">• Age (ages 19 through 64); and• Income (for example, \$21,597 for a single individual, \$29,187 for a couple)

State Budget: Eligibility Changes to Medi-Cal

Effective Date	Medi-Cal Change
January 1, 2026	The state is changing the rules for Medi-Cal. Older adults and people with disabilities may need to have less money and property to qualify.
January 1, 2026	Freezes future Medi-Cal enrollment for undocumented members aged 19 years of age and older.
July 1, 2026	Eliminates Medi-Cal dental benefits for Medi-Cal members with specific immigration status.
July 1, 2027	Requires \$30 monthly payment for Medi-Cal members 19-59 years of age with specific immigration status but will still provide full Medi-Cal coverage for pregnant members with those specific immigration statuses.

REMINDER: Kaiser Permanente Referral Forms

Kaiser Permanente has CalAIM referral forms. These referral forms aim to improve successful linkages and enhance information collected, thereby reducing authorization delays.

1. [Enhanced Care Management, Complex Care Management \(CCM\), and Community Health Workers Referral Form](#)
2. [Community Supports – Referral Form Housing Insecurities](#)
3. [Community Supports – Referral Form Keeping Members at the Home and Chronic Conditions](#)



More information available at [Provider Information | Community Provider Portal | Kaiser Permanente](#)

Additional NLE Provider Support | Provider Office Hours

Kaiser Permanente is working with Network Lead Entities (NLEs) to develop a network of community-based ECM, CS, and CHW providers.



Contracted Providers

Second/Fourth Thursdays

1:00 – 2:00 pm

[Zoom: Join Meeting Now](#)

Prospective Providers

First Thursdays of the Month

1:00 - 2:00 pm

[Zoom: Join Meeting Now](#)

Questions?

ILSCAProviderRelations@ilshealth.com

Phone number: 844-269-3447



Contracted Providers

Tuesdays

3:00 - 4:00 pm

[Microsoft Teams: Register and Join Here](#)

Prospective Providers

Second/Fourth Thursdays of the Month

12:00 - 1:00 pm

[Microsoft Teams: Register and Join Here](#)

Questions?

network@fullcirclehn.org

Phone number: 888-749-8877



Questions?



Reflections?



Ideas?

Contact your Medi-Cal Local Engagement Representative!

Tamar Kurlaender

tamar.x.kurlaender@kp.org



CalAIM Policy Updates



Medi-Medi Plan Expansion

- [California Expands Medi-Medi Plans to 29 New Counties](#)
- [Medi-Medi Plan Expansion Fact Sheet](#)
- [Medicare Medi-Cal Plan List](#)

HCS CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES **MEDI-MEDI PLAN EXPANSION**

Medi-Medi Plans

Medi-Medi Plans are a type of Medicare Advantage plan that are only available to members dually eligible for both Medicare and Medi-Cal. Medi-Medi Plans combine Medicare and Medi-Cal benefits into one plan by providing Medicare Part A, B, and D services, specialized care coordination, and wrap-around Medi-Cal services.

Medi-Medi Plan 2026 Expansion

Starting in 2026, Medi-Medi Plans will be open for enrollment in most counties in California.



- Enrollment currently available:** Fresno, Kings, Los Angeles, Madera, Orange, Riverside, Sacramento, San Bernardino, San Diego, San Mateo, Santa Clara, Tulare
- Enrollment newly available in all plans in 2026:** Alameda, Alpine, Amador, Calaveras, Contra Costa, El Dorado, Imperial, Inyo, Kern, Mariposa, Merced, Mono, Monterey, San Benito, San Francisco, San Joaquin, San Luis Obispo, Santa Barbara, Santa Cruz, Stanislaus, Tuolumne, Ventura
- Enrollment newly available in at least one plan in 2026:** Marin, Napa, Placer, Solano, Sonoma, Yolo, Yuba
- Enrollment phased in after 2026:** Butte, Colusa, Del Norte, Glenn, Humboldt, Lake, Lassen, Mendocino, Modoc, Nevada, Plumas, Shasta, Sierra, Siskiyou, Sutter, Tehama, Trinity



Federal Use of Medi-Cal Data & Member Privacy

[Statement from DHCS on the Federal Use of Medi-Cal Data and Member Privacy](#)

Updated January 2, 2026

DHCS NEWS RELEASE

STATEMENT FROM THE DEPARTMENT OF HEALTH CARE SERVICES ON THE FEDERAL USE OF MEDI-CAL DATA AND MEMBER PRIVACY

SACRAMENTO — The California Department of Health Care Services (DHCS) remains committed to protecting the privacy and well-being of all Medi-Cal members. Recent reports and legal developments have raised serious concerns about how federal agencies use Medicaid data, including personal information for the more than 14 million Californians covered by Medi-Cal. We want to share what we know.

On December 29, 2025, a federal court ruled that the Centers for Medicare & Medicaid Services (CMS) may share limited information with Immigration and Customs Enforcement (ICE) only for individuals who are not “lawfully residing” in the United States. However, some uncertainty remains as the federal government has not provided California with any information about how it plans to implement the court’s order. We will update this page with more information as it becomes available.

Information that may be shared about people who are not “lawfully residing” in the United



MCP-Hub Toolkit: A Resource for MCPs and CalAIM Providers

The [MCP-Hub Toolkit](#) is intended for MCPs, existing Hubs, and organizations interested in becoming Hubs to support the delivery of Medi-Cal services. It includes a series of modules that highlight opportunities, basic requirements, considerations, and provide practical tools to support MCPs and Hubs to operationalize voluntary contracting partnerships.

- Informational Webinar: **January 16, 2026, 1:00pm – 2:30pm** ([Webinar Registration Link](#))
 - Present the MCP-Hub Toolkit and discuss opportunities and basic requirements
 - Review considerations for Medi-Cal managed care plans (MCP) and Hubs to operationalize voluntary contracting partnerships.
 - Q&A session



Coverage Ambassadors Webinar

Thursday, January 29, 2026

11:00am – 12:00pm

[Register Here](#)

Find resources and learn more about Coverage Ambassadors [here](#).

Coverage Ambassadors are trusted messengers who help raise awareness about Medi-Cal benefits, enrollment opportunities, and new initiatives aimed at building a healthier California for all.



Upcoming Events

Find All Registration Links on the [Zoom Doc Resource Hub](#)

January	February	March
20 CalAIM Deep Dive Webinar – Financial Sustainability (HC2 & IHI)	19 Tribal Roundtable	19 Tribal Roundtable
22 Rural Resilience Innovation Hub Meeting	19 SW Monthly Meeting	19 SW Monthly Meeting
30 Indian Health Collaborative Meeting	27 Indian Health Collaborative Meeting	27 Indian Health Collaborative Meeting



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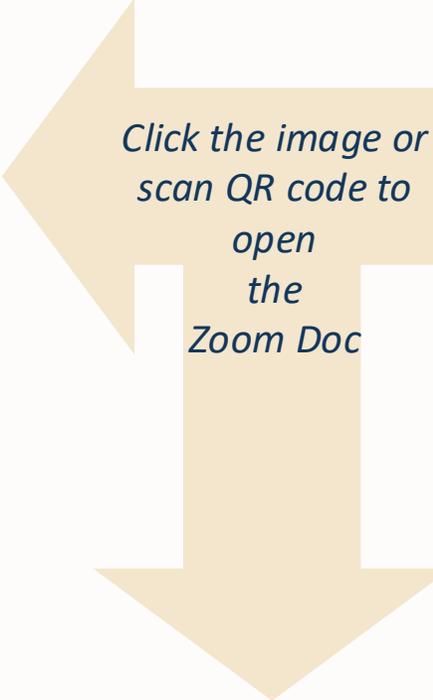
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Post-Event Evaluation

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://s.zoom.us/j/bPIRxXdOF>



Thank You!

Feel free to contact our PATH CPI team any time at
PATH@pophealthinnovationlab.org

Thank you!

