



PATH Collaborative Planning & Implementation (CPI)

Welcome! The Southwest Collaborative Planning Convening will begin shortly.

February 19, 2026



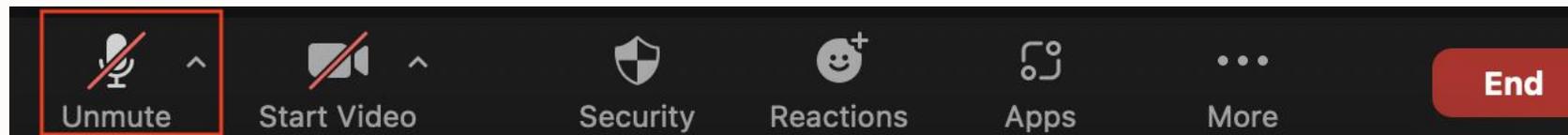


This event is being recorded and transcribed.

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

February 19, 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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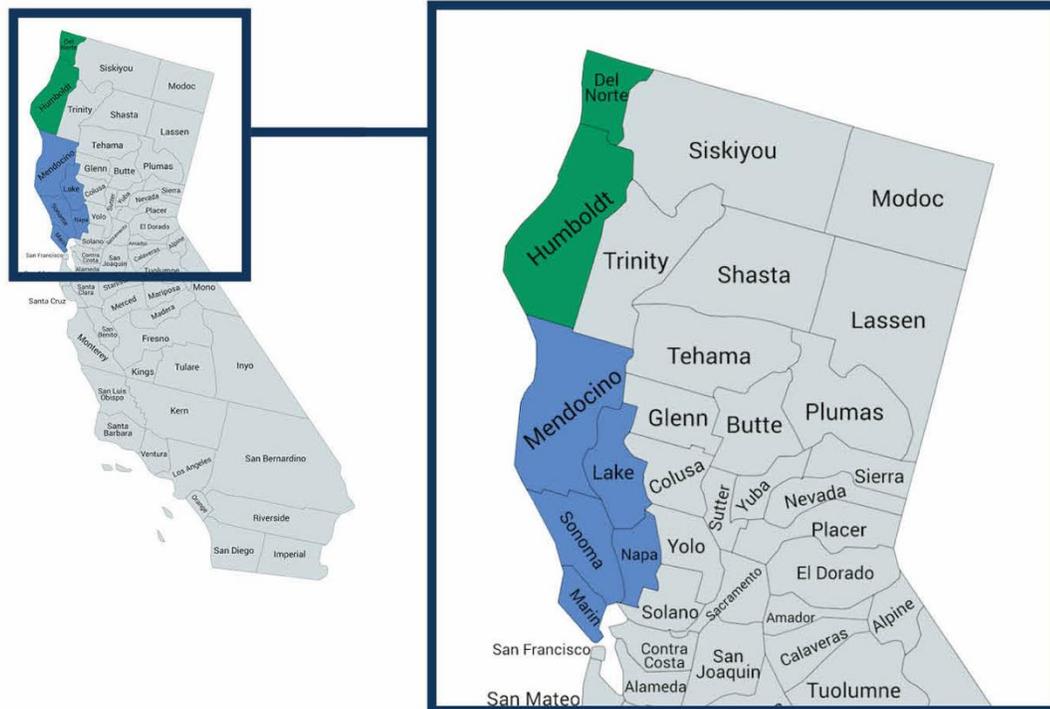
Lizania Romero
Research Associate III
liromero@phi.org



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
- Exploring County-Level Progress, Gaps, and Equity Needs for ECM and Community Supports
- County-based Breakout Discussion on Community Data and Needs
- Looking Ahead: Upcoming CPI Plans
- 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**



March CalAIM Deep Dive: Justice Involved Initiative

- **Speaker:** Ron Klinger, Senior Manager of Justice Involved Systems, Partnership HealthPlan of California
- **Who is invited:** All CPIs and members of the Rural Resilience Innovation Hub
- **What this means for March:**
 - We will cancel the March 19 regular SW convening to free up some time for you to attend the CalAIM Deep Dive
 - We will request written updates from Partnership HealthPlan

March 17, 2026

1:00-2:30 pm

*(will replace the usual
NW meeting time)*



Exploring County-Level Progress, Gaps, and Equity Needs for ECM and Community Supports



Our 2025 Region Aim Statement

The goal to have
completed by December
31, 2025

Increase Medi-Cal member **ECM utilization to at least:**
1% for children
3% for adults

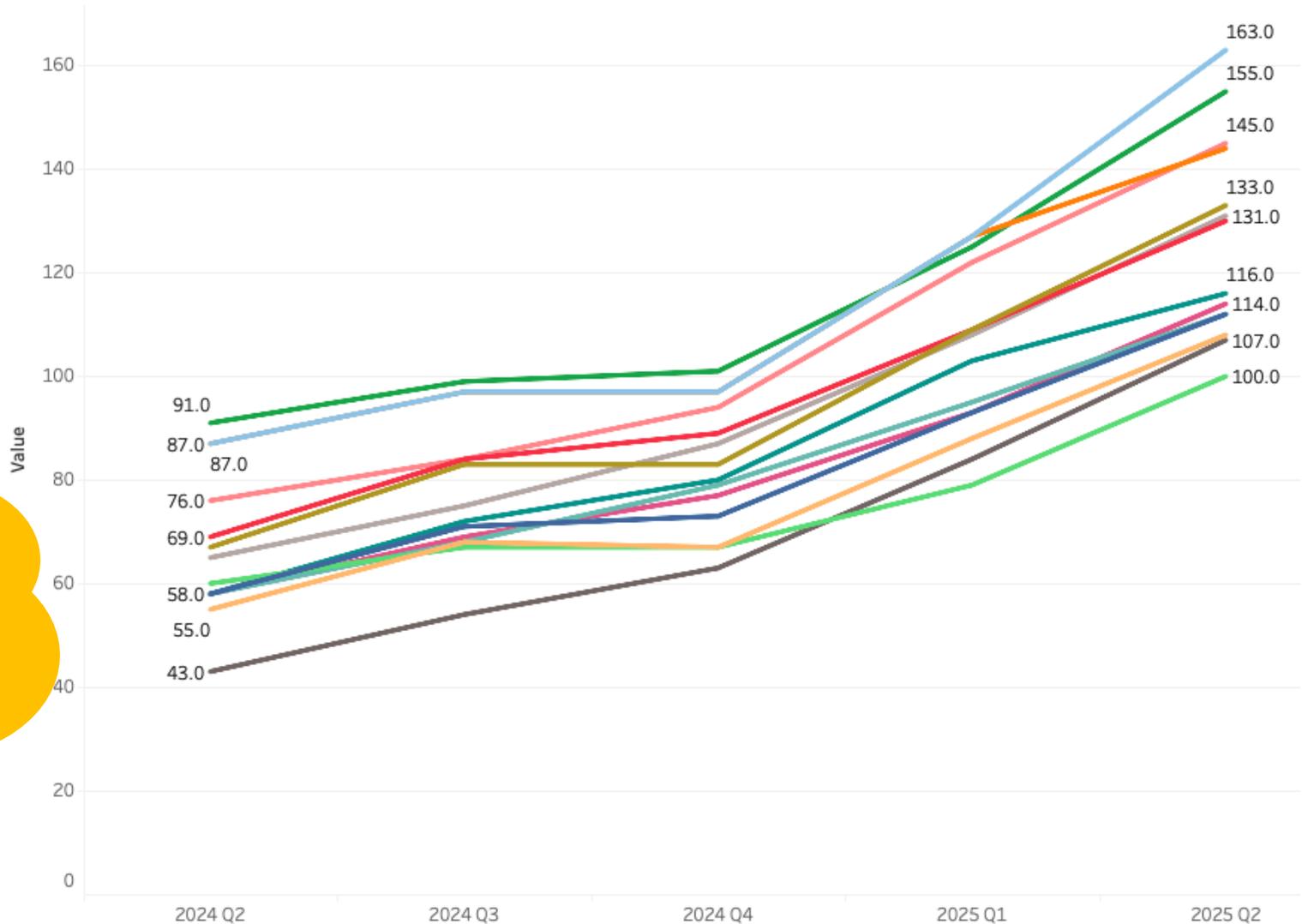
Increase overall Medi-Cal member utilization of
Community Supports to at least **1%**

Prioritize addressing **service gaps, improving access,**
and ensuring quality care for target populations.

Contracted ECM Providers Trend, Last five 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

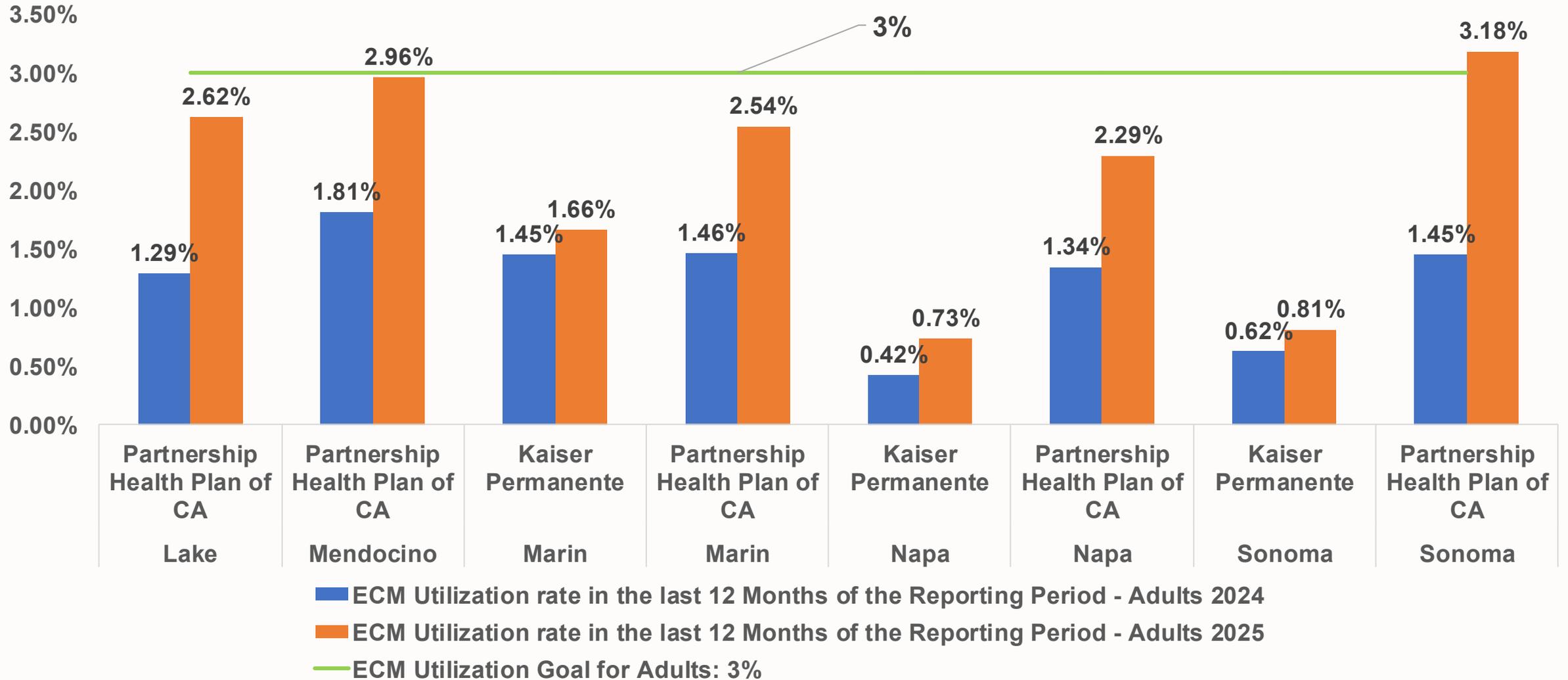
ECM Providers by PoF Quarterly (Q2 2024 to Q2 2025)



Contracted ECM providers increased by approximately **46%** across the region over the past five quarters.

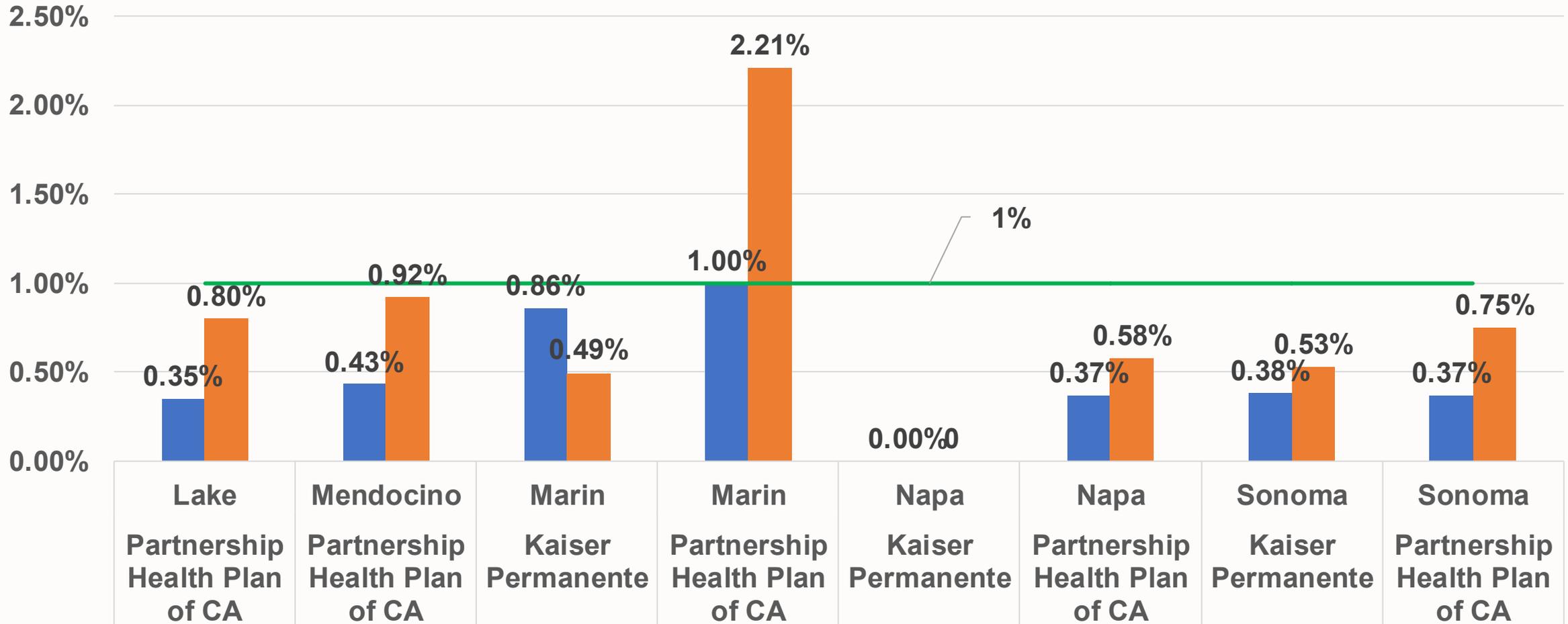


ECM Utilization Rates by County- Adults





ECM Utilization Rates by County- Under Age 21



- ECM Utilization rate in the Last 12 Months of the Reporting Period (2024) -Under Age 21
- ECM Utilization rate in the Last 12 Months of the Reporting Period (2025)-Under Age 21
- ECM Utilization Rate Goal for People under Age 21: 1%



Check-in: Reflect on Progress

Mentimeter

Instructions

Go to

www.menti.com

Enter the code

1500 3782



Or use QR code



Check-in Results: Reflect on Progress

- What factors aided in increasing ECM utilization over the last year (e.g., clinical, operational, partnership-related, or engagement-related)?

10 / 11

13

Engagement and partnership

Collaboratives and peer-to-peer TA

Partnership building

For our agency, we expanded our services by adding additional care managers, offering more ECM services broadly and polishing our strategies for "selling the service" to clients.

Time. Learning over time what works and what doesn't and being able to incorporate changes to increase census and billing.

The inclusions of Community Base Organization and collaboration with other organizations.

Community Outreach & engagement

Educating community partners

Building awareness in teams on how it can help their clients

Strong partnerships and collaboration with organizations

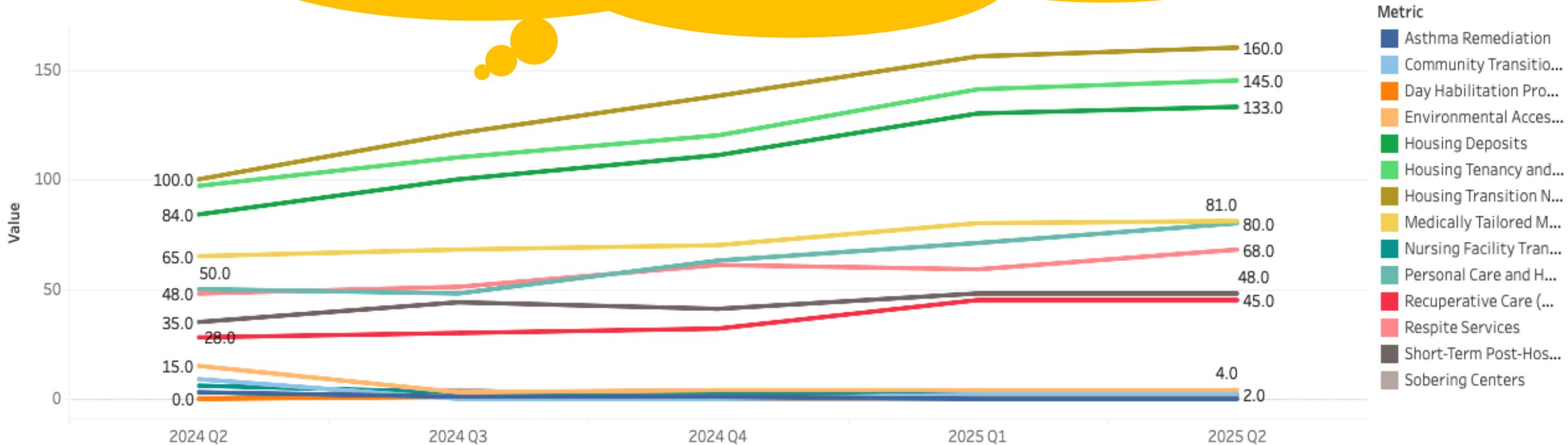
CHW Training Program

CHW educational series

CHW Collaboratives

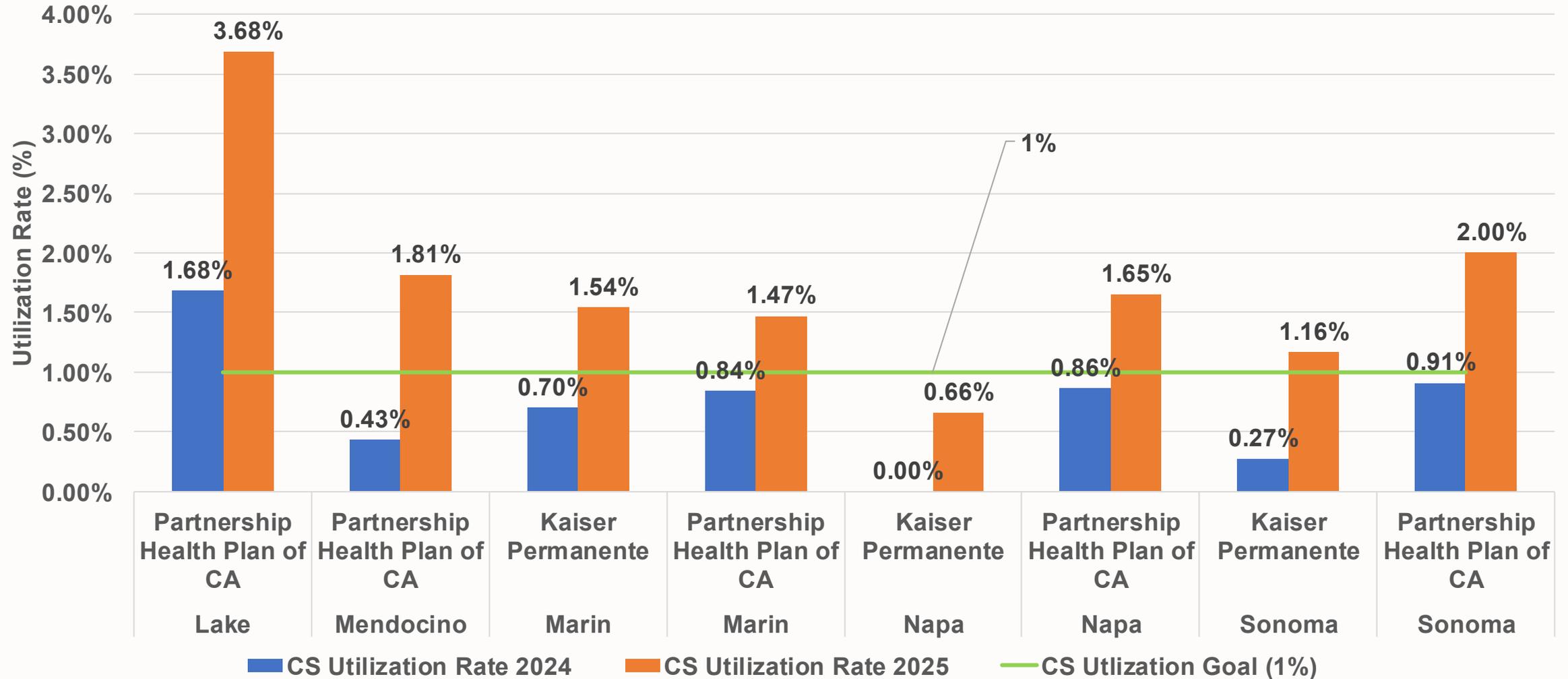
Contracted Community Support Providers, Last Five Quarters

Contracted Community Support providers increased by approximately **30%** across the region over the past five quarters.





Community Supports Utilization





Check-in: Reflect on Progress

Mentimeter

Instructions

Go to

www.menti.com

Enter the code

1500 3782



Or use QR code



Check-in Results: Reflect on Progress

● What thoughts are coming to mind as you see the Community Supports utilization rates in your community?

6 / 11

6

New requirements to MTM and if that will change utilization

applying what worked for community supports utilization to ECM utilization!

Only one CBO in our area provides CS

Our organization has joined another local collaborative, which has helped us share referrals and increase services that clients can receive. Ex. only a few CBOs provide Housing Deposits in our area.

Where are the gaps?

Housing shortage is a an issue in our rural community.



Top Utilization Service Area

Large increase in the total number of providers offering these specific PoF services.

Housing Transition Navigation is the primary entry point for members.

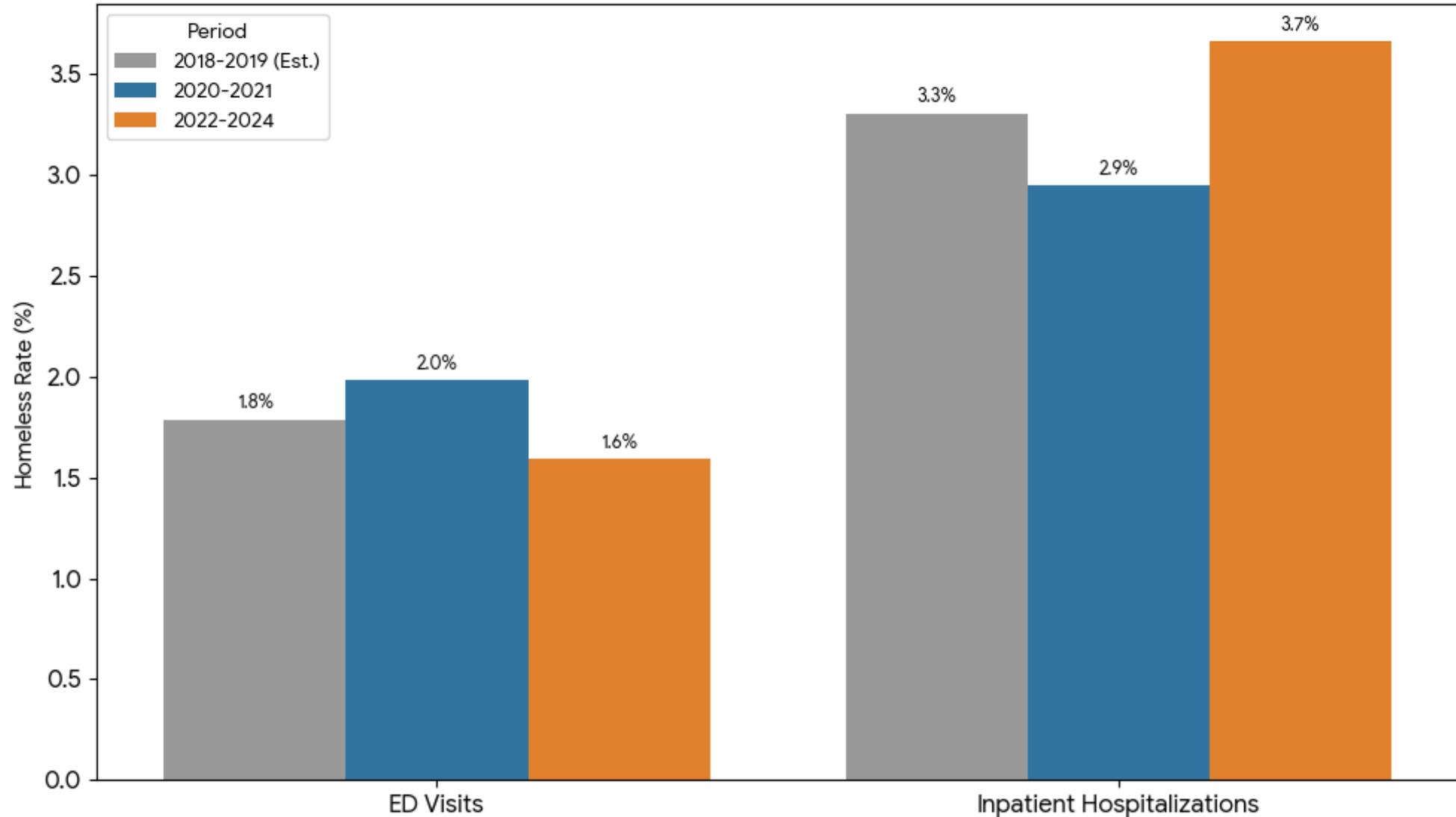
Over 3,500 total individuals utilized ECM & Community housing Support services.

Housing gives us a concrete example of how contracting, referral pathways, and service delivery can align to drive utilization.



Beyond Utilization- Housing Impact

Southwest Region: Homeless Patient Rate by Encounter Type

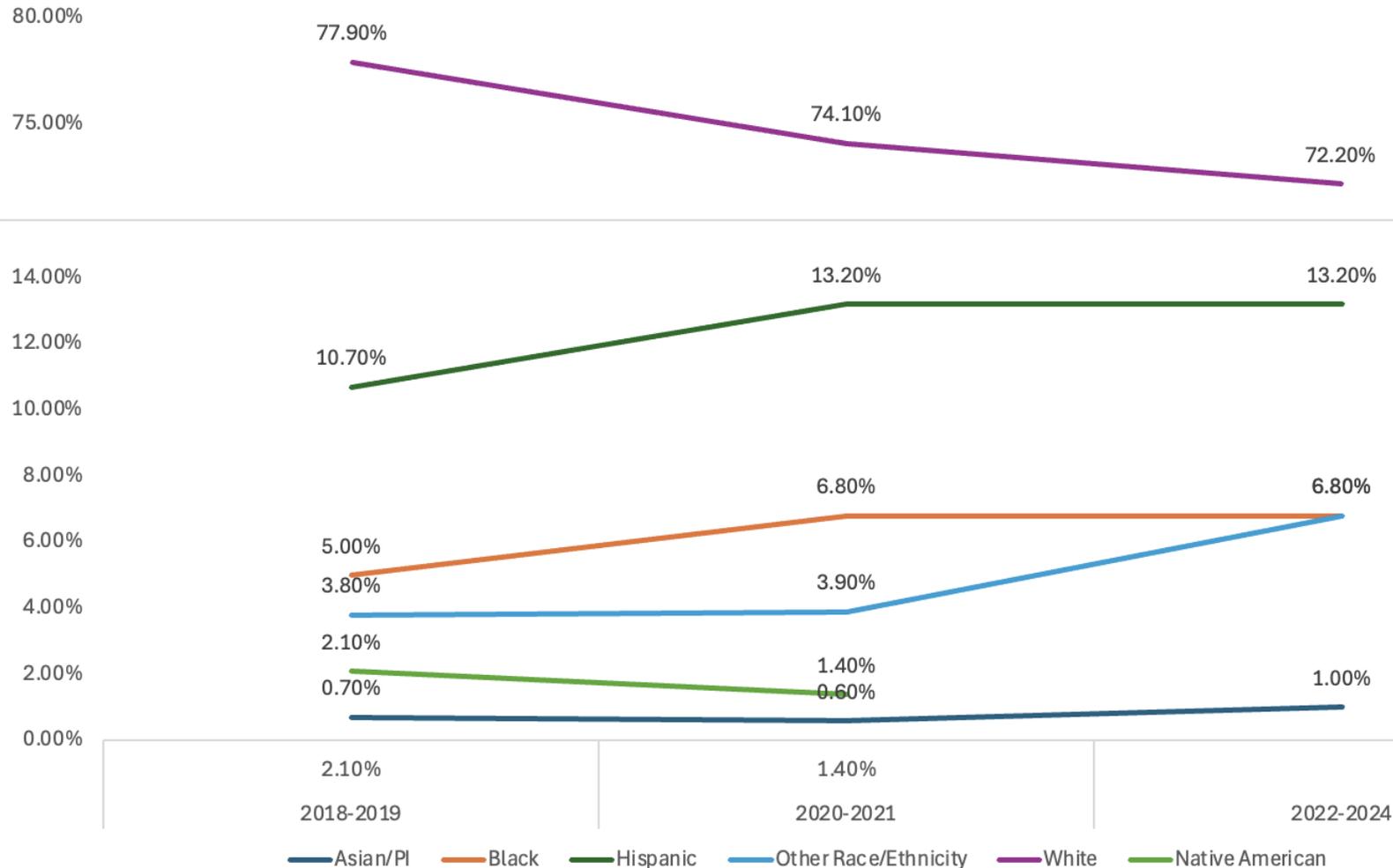


Data retrieved from DHCS Open data portal: <https://data.chhs.ca.gov/dataset/hospital-encounters-for-homeless-patients>



Beyond Utilization- Persistent Equity Gap

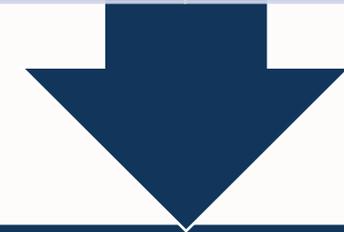
Southwest Region: Racial Distribution of Hospital Patients Experiencing Homelessness



Racial and ethnic distribution of individuals experiencing homelessness shows not all groups experienced declines over time.

Disparities persist—particularly for Black and Hispanic populations.

DHCS removed the AI/AN race/ethnicity categorization in the data for 2022-2024



This suggests that even as access to services expands and utilization increases, **structural inequities remain embedded in who experiences homelessness and how long those conditions persist.**



Beyond Utilization- Centering people

Sustainability isn't just about maintaining utilization levels but about strengthening the conditions that allow services to reach and work effectively for different populations.

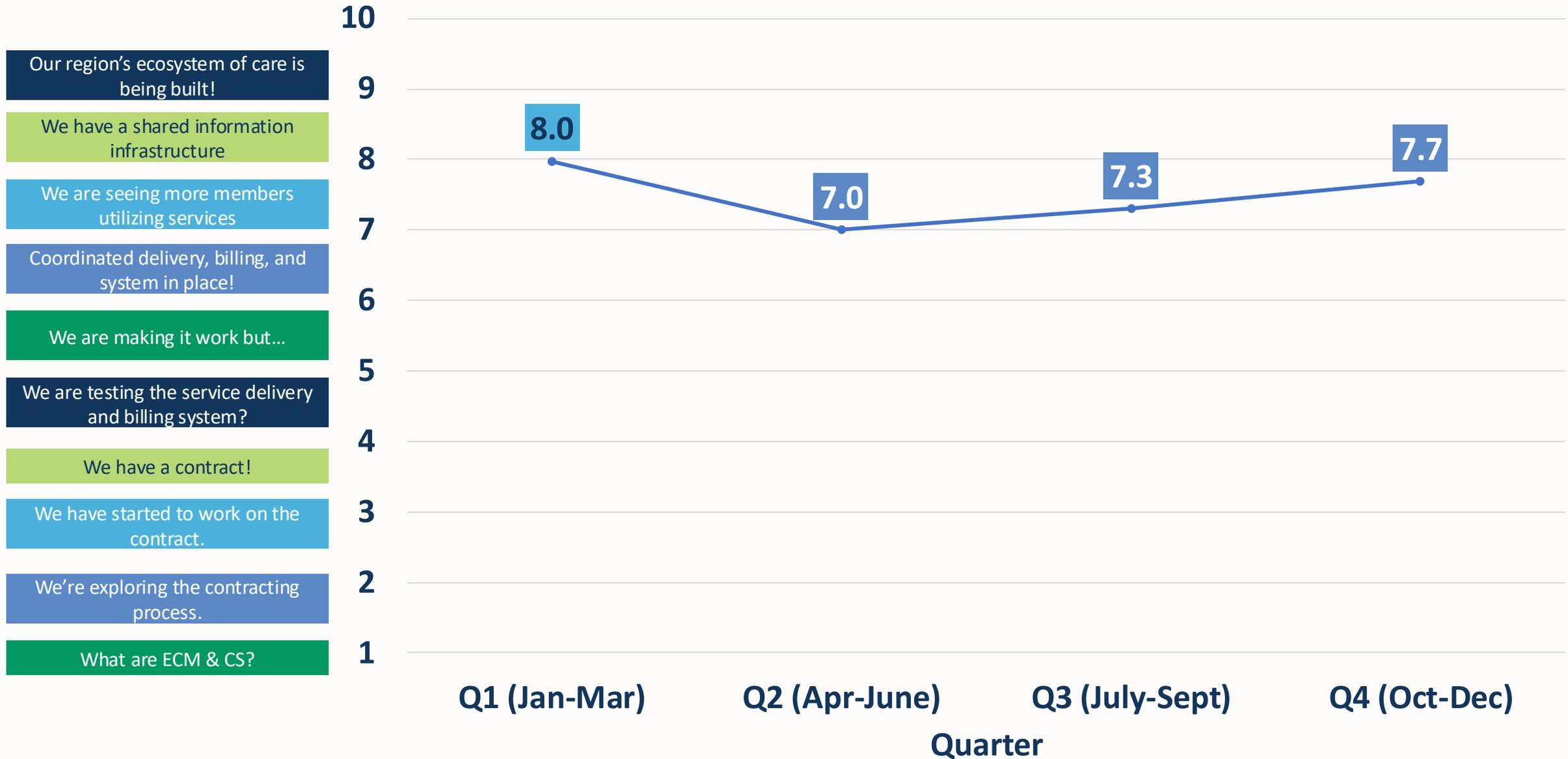


Looking Ahead

WHERE AM I ON THE READINESS ROADMAP?



Southwest CPI Average Readiness Roadmap Step (2025)



***Summary statistics do not precisely represent the entire collaborative due to variations of respondents in each quarter and variations in the number of respondents each quarter.*



County-Based Breakout Discussions

Please self-select into the County room where you provide services



Looking Ahead: Upcoming CPI Plans



March CalAIM Deep Dive: Justice Involved Initiative

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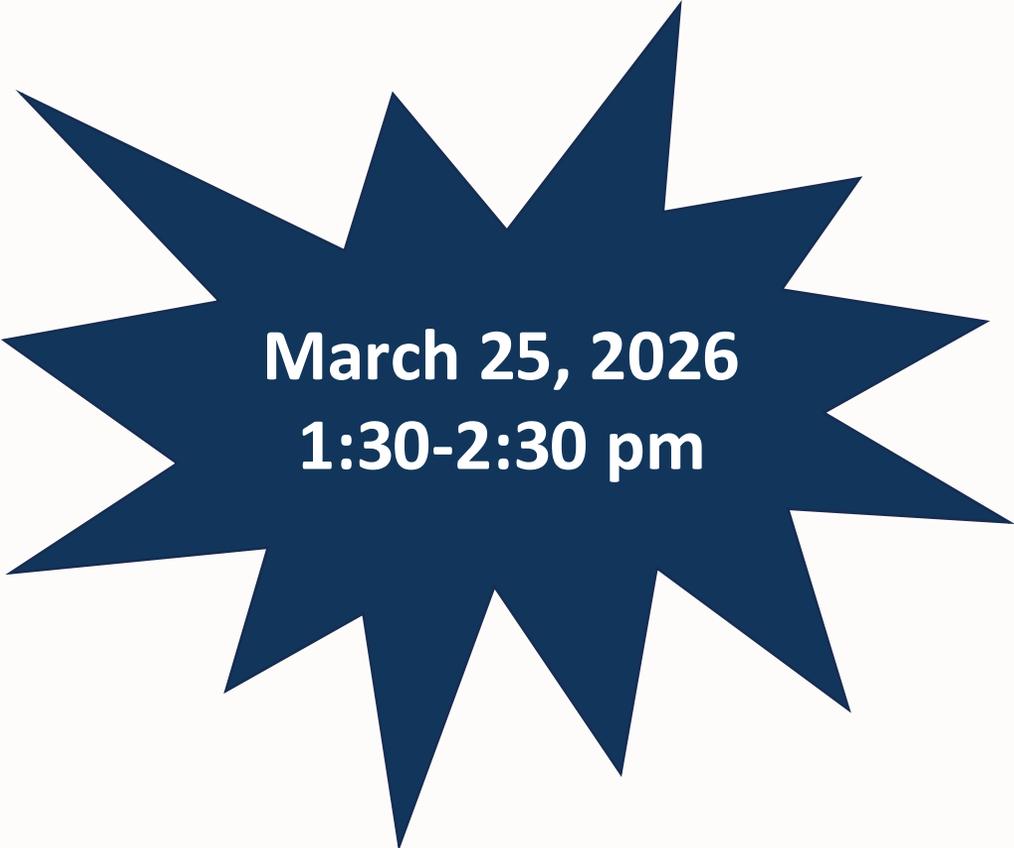
1:00-2:30 pm

*(will replace the usual
NW meeting time)*



Another March PATH Pop-up Training Opportunity: Asthma Remediation Services

- **Speaker:** Regional Asthma Management & Prevention (RAMP) Program
- **Who is invited:** All CPIs
- **Why join:** Learn more about becoming a provider of Asthma Remediation Community Support



**March 25, 2026
1:30-2:30 pm**



Convening Updates

- **Quarter 2 (April-June) & Beyond:**
 - We will merge meetings of the **Southwest & Northwest CPI Regions**
 - Joint meetings will occur during what is now the Northwest meeting time – the **third Tuesday of the month starting at 1:00 pm PT**





Tribal Roundtable Meetings Continue

- **Who:** Native communities and Tribal-serving organizations across the Northwest and Southwest CPI regions
- **Why:** Continue conversations to uplift the needs, challenges, and priorities of Native communities working in the CalAIM space
- **Upcoming In-Person Meeting:** April 24 in Nice, CA (Lake County) – *registration forthcoming*

Please let us know
if you need the
Zoom link for
regular virtual
meetings.

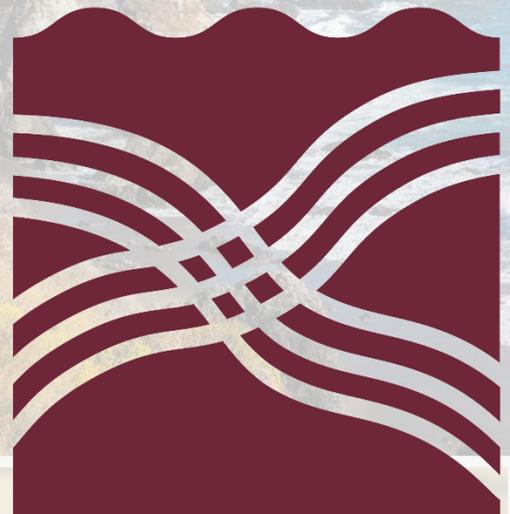


Partnership HealthPlan of California (PHC)

Managed Care Plan CalAIM Updates
February 2026

Sonia Calderon

PARTNERSHIP



HEALTHPLAN
of CALIFORNIA

A Public Agency



MCP CalAIM Updates February 2026





Agenda

Transitional Rent

Community Health
Worker

Justice Involved
Programs



Transitional Rent

- Partnership is working with County Behavioral Health Agencies (BHAs) on Transitional Rent referral workflows
- DHCS is still working on finalizing the referral requirements and the policy guide for Transitional Rent
- 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 a provider to identify appropriate housing and work on a sustainability plan which is a requirement of Transitional Rent approval
 - Partnership will update providers when we have the referral workflows set with County BHAs



Community Health Workers: CCS/Whole Child Model

California Children's Services (CCS) has released new guidance on CHW services for members enrolled in CCS. Guidance clarifies coverage of benefit for CCS enrolled members.

For more information:

<https://www.dhcs.ca.gov/services/ccs/Documents/CCS-IN-25-05.pdf>

<https://www.dhcs.ca.gov/formsandpubs/Documents/MMCDAPLsandPolicyLetters/APL%202024/APL24-006.pdf>



Justice Involved Programs

The CalAIM Justice-Involved (JI) Initiative is a program designed to improve health outcomes for incarcerated individuals by providing Medi-Cal services 90-days pre-release and ensuring continuity of care upon reentry.

- Go-live dates have shifted to a rolling schedule; no longer only once per quarter in 2026
- Deadline remains October 1, 2026 for all counties to be live with Pre-Release
- Readiness Assessments review period shortened to 1 month (from 6 months) by DHCS



Questions

Contacts:

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

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



Kaiser Permanente

Managed Care Plan CalAIM Updates February 2026

Tamar Kurlaender



Southwest February PATH CPI

Tamar Kurlaender, Medi-Cal Local Engagement

February 2026



Update on Medically Tailored Meals



NEW Transitional Rent Educational Resources

Kaiser Permanente partnered with Homebase and the California Health Care Foundation to develop Transitional Rent educational materials.

- Brief summary of Transitional Rent
- What to know before a referral is submitted for TR
- Transitional Rent member vignettes for the BH POF
- Transitional Rent eligibility detailed overview

JOSEPH

Joseph is in his mid-40s and has been experiencing homelessness the majority of his adult life

Joseph has diagnosed schizophrenia and has been in services with his County Behavioral Health Department since 2015.

Joseph was living at a shelter until June 2025, when a bed became available in one of the local County Behavioral Health's temporary housing programs, where he has been living for the past five months.

Joseph is not connected to his local CoC program, nor is he entered in HMIS, which means he has not been assessed by the Coordinated Entry System nor is he on the local by-name-list.

Because of his schizophrenia and lack of stable housing history, he would likely have a high score and be near the top of the by-name-list.

None of his providers, family, or friends have referred him to ECM or any of the Community Supports. The only services he receives are services through his County Behavioral Health program.

Joseph is ready and able to move to permanent housing. Because Joseph is a Medi-Cal member, the Behavioral Health Department is hoping they can refer him to the local managed care plan for a Housing Deposit and Transitional Rent.

Homebase with generous support from the California Health Care Foundation and Kaiser Permanente

December 2025



Deep Dive on Medi-Cal Transitional Rent: Peer Learning Series on Key Topics

About the Peer Learning Series

Join Homebase to go in-depth on Transitional Rent topics with your peers across the state. Each session will dig into a different topic, offering brief context-setting, short presentations from different communities, and a chance to brainstorm and problem solve with cross-sector peers and other communities.

[Register here](#)

“Month 7” Planning: Thursday February 26th, 9:30-11PST Discuss what communities are planning to ensure Transitional Rent recipients remain housed after their six months of coverage ends, including: planning for Month 7 funding, what resources could be leveraged for Month 7 planning, and partnerships to explore to support Month 7 resources.

Recommended Audience

This series is intended for local providers and agencies who are or will be directly involved in Transitional Rent implementation, especially county Behavioral Health departments, managed care plans, homeless response Continuums of Care, and potential Transitional Rent providers.



Submitting Referrals | ECM, CS, and CHW

Kaiser Permanente (KP) has a no-wrong-door approach to referrals.

- Referrals are accepted from any source (members, providers, family, community organizations, etc.)
- Referrals may be placed via email, via phone, or through KP Health Connect.

 AREA	NORTHERN CALIFORNIA COUNTIES	SOUTHERN CALIFORNIA COUNTIES
 PHONE (Member)	1-833-721-6012 (TTY 711) Monday-Friday (closed major holidays) 8:30 a.m. to 5:00 p.m.	1-866-551-9619 (TTY 711) Monday-Friday (closed major holidays) 8:30 a.m. to 5:00 p.m.
 EMAIL (Counties/CBOs)	Send completed referral form to REGMCDURNS-KPNC@kp.org Subject line: “ECM Referral” or “CS Referral” or “CHW services request” All Enhanced Care Management, Community Support and Community Health Worker referral forms can be located at Provider Information Community Provider Portal Kaiser Permanente .	Send completed referral form to RegCareCoordCaseMgmt@kp.org Subject line: “ECM Referral” or “CS Referral” or “CHW services request” All Enhanced Care Management, Community Support and Community Health Worker referral forms can be located at Medi-Cal provider portal Kaiser Permanente .

For KP contracted providers/organizations submitting referrals to your own ECM/CS/CHW organization, please send the referral form directly to your contracted Network Lead Entity.



Questions?



Reflections?



Ideas?

Contact your Medi-Cal Local Engagement Representative!

Tamar Kurlaender

tamar.x.kurlaender@kp.org



CalAIM Policy Updates



Updates to ECM Policy Guide

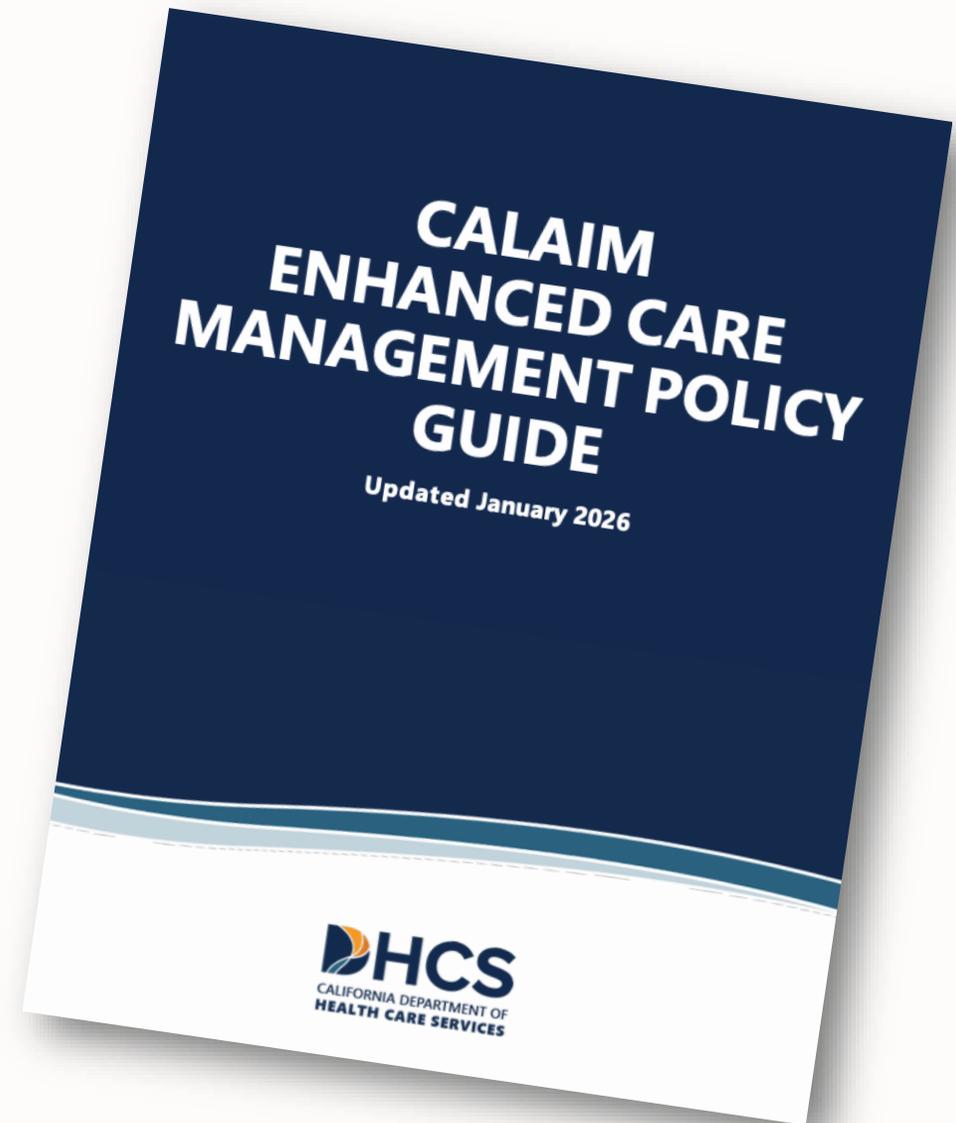
As of January 28, 2026

What has changed?

Refinements and clarifications to align the ECM Policy Guide with DHCS's Birthing Care Pathway, upcoming requirements for MCPs to authorize ECM for members receiving Transitional Rent, and other key areas.

Note: All updated areas are marked with **red Updated January 2026** or **Added January 2026** indicators throughout the guide.

[Link to updated CalAIM ECM Policy Guide](#)





Sustainability Toolkits Now Available



Practical tools, templates and guidance for YOU

Two separate components to support the long-term sustainability of Enhanced Care Management (ECM) and Community Supports.

Both are compiled by PATH Collaboratives statewide are now available **free and on-demand**.

**Provider Organization
Level:
Part 1**

**Community Level:
Part 2**

Where to Access the Sustainability Toolkit?

**[PATH On-Demand Resource Library](#) and
[the CPI Best Practices & Resources webpage](#)**



Ex: Provider Readiness for Sustainability

Complete the Provider Organization Sustainability Checklist (Optional)

This optional tool is designed to help individual organizations delivering ECM and Community Supports assess their readiness to sustain those services over time. It encourages reflection on your current systems, processes, and infrastructure - aiming to spark ideas for where to focus improvement efforts with long-term sustainability in mind.

We recommend completing this checklist as a team and including at least one person with frontline experience and one with business or administrative oversight.

For items not completed on the checklist, use this Toolkit to find resources to assist you.

Access the [Provider Organization Sustainability Checklist](#) here.

**Organization
Self-Assessment of
Sustainability
Readiness**
Join Your Peers in taking
by March



5-Year Renewal Application for California Advancing and Innovating Medi-Cal (CalAIM)

- **February 10-March 13: Public Comment Period**
 - Public and Tribal comment period for DHCS' 5-year renewal application for the CalAIM Section 1115 demonstration (currently expiring December 31, 2026) – *Check out more on [DHCS website](#)*
- **Public Hearings**
 - February 25, 2026 | 1:55-2:55 pm | Virtual or in person | [Register here](#)
 - March 3, 2026 | 11:30-12:30 pm | Virtual or in person | [Register here](#)
- **Written Comments – Indicate “CalAIM Section 1115 Demonstration Renewal Application” in subject line**
 - Email to 1115waiver@dhcs.ca.gov
 - Mail in option also available

ADVANCING SUBSTANCE USE DISORDER COUNSELOR EDUCATION AND DEVELOPMENT

COMPLETE YOUR 80-HOURS OF CORE COMPETENCY TRAINING WITH THE ASCEND PROGRAM

New! FREE Substance Use Counselor Competency Training

- Developed by DHCS and the University of California San Diego Division of Extended Studies
- Online, 12 Core Competencies
- Counselor Certification
- Meets new SUD Counselor Certification Requirements starting 1/1/26

Check it out!



Reminder: Register on the DHCS PATH CPI Website

Why Register?

Receive regular policy and implementation updates directly from DHCS related to ECM and Community Supports.

[Link to Register on DHCS PATH CPI site](#)

DHCS
CALIFORNIA DEPARTMENT OF
HEALTH CARE SERVICES

Introduction Instructions Contact Information Narrative Response Attestation

PATH COLLABORATIVE PLANNING AND IMPLEMENTATION PARTICIPANT REGISTRATION FORM

PATH Background

California Advancing and Innovating Medi-Cal (CalAIM) is designed to improve the quality of life and health outcomes of Medi-Cal Members by implementing broad delivery system, program, and payment reform across the Medi-Cal program. CalAIM establishes the framework to address social determinants of health and improve health equity statewide. As part of CalAIM, California received targeted expenditure authority for the Providing Access and Transforming Health (PATH) initiative as part of its [section 1115 demonstration renewal](#) to scale whole person approaches to care statewide with a clear equity lens, ensure a strong foundation for integrated, comprehensive care, and a smooth transition from Whole Person Care (WPC) and Health Home pilots that retains investments made by the state, local partners, and the federal government. PATH provides tools and resources to county and community-based providers including public hospitals, county, city and other government agencies, justice agencies, community-based organizations (CBOs), Tribes and Indian Health Care Providers and others to ensure a successful implementation of [Enhanced Care Management \(ECM\) and Community Supports](#).

PATH is comprised of multiple aligned initiatives that will support implementation of ECM and Community Support services in varying ways. The remainder of this document is focused on the PATH-funded [Collaborative Planning and Implementation Initiative](#), described at a high-level below.



Upcoming Events

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

February	March	April
19 Rural Resilience County Plans: Opportunities for Collaboration	17 CalAIM Deep Dive: Justice Involved Initiative– Open to All PATH CPIs and RRIH	21 First Joint Meeting of NW & SW PATH CPIs
27 Indian Health Collaborative 30-Minute Office Hours	19 Kno’Qoti Native Wellness Cultural Awareness Training (Nice, CA) Tribal Roundtable	23 RRIH Meeting
	25 Pop-up on Asthma Remediation	24 In-person Tribal Roundtable (Nice, CA)
	27 Indian Health Collaborative Meeting	24 Indian Health Collaborative 30-Minute Office Hours



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

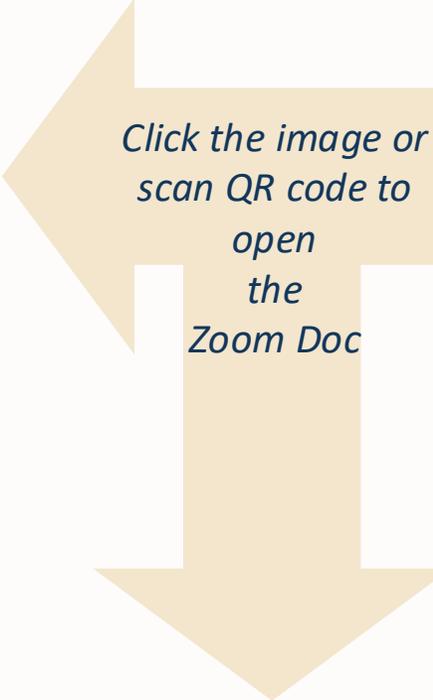
Our Sponsors:




Event Details

A monthly event is hosted by the [Population Health Innovation Lab \(PHIL\)](#) for the [PATH Southwest Collaborative Implementation and Planning \(CPI\) Region](#) which includes five California counties: Lake, Marin, Mendocino, Napa, and Sonoma.

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





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/bZInyuKaL>



Thank You!

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

Thank you!

