



PATH Collaborative Planning & Implementation (CPI)

Welcome! The CPI convening will begin shortly.

April 21, 2026 | 1:00-3:00 pm



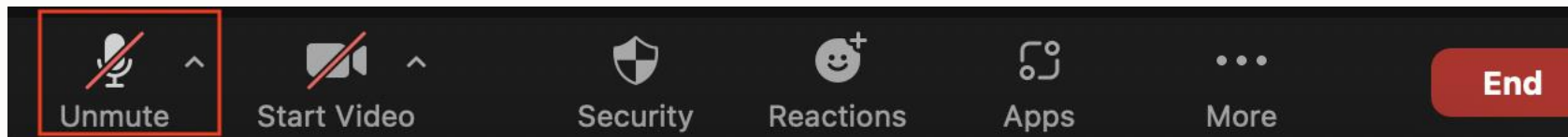


This event is being recorded and transcribed.

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)

Monthly CPI Convening:
County Plan Opportunities for Collaboration, Alignment, & Sustainability

April 21, 2026 | 1:00-3:00 pm





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



Tammy Chandler
PATH CPI Policy & Quality
Improvement Manager
tchandler@phi.org



Kathryn Stewart
Director of Strategy
& Operations
kastewart@phi.org



Sue Grinnell
Director of PHIL
sgrinnell@phi.org



Cassandra Mohan
Education & Training Specialist
cmohan2@phi.org



Seun Aluko
Director of Applied Research &
Implementation
saluko@phi.org



Esmeralda Salas
Research Associate III
esalas@phi.org



Zachary Ray
Consultant
zray@nativespiritconsulting.com



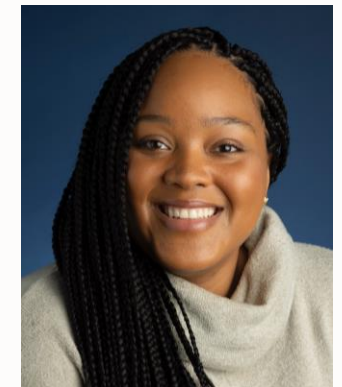
Stefani Hartsfield
Consultant
stefani@hartsfieldhealth.com



Christina Olson
PHIL Collective Director
colson@phi.org



Lizania Romero
Research Associate III
liromero@phi.org



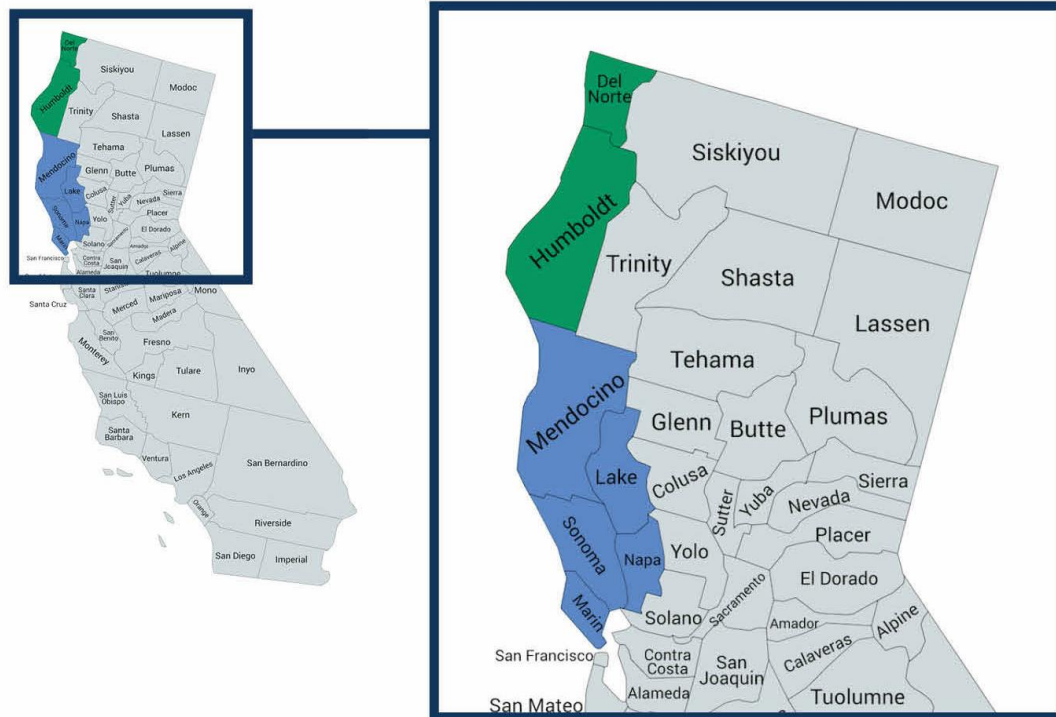
Erin Brown
Communications Specialist I
ebrown@phi.org



Collaborative Planning & Implementation Overview

Region Counties Supported by PHIL

-  Northwest
-  Southwest



CPI collaboratives 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 [Joint CPI Resource Hub](#).

Scan QR code for
Joint Resource
Hub (NW + SW)





First Joint PATH CPI Convening

Hello to BOTH Northwest and Southwest Providers!

Official Joint Meeting Time:
The third Tuesday of the
month from 1:00-2:30 pm PT





Agenda for Today

- Welcome & Framing
- CPI Plans
- CalAIM Announcements & Policy Updates
- Managed Care Plan Announcements & Updates: Partnership HealthPlan of California & Kaiser Permanente
- Collaboration & Sustainability Opportunities: Alignment with County Planning Processes
- Reflections
- County-Based Breakout Room – *“End when it naturally finishes” model*



PATH NW + SW CPI Meeting Plans

- **April 21** | County Plan Opportunities for Collaboration, Alignment, & Sustainability
- **April 24** | In-Person Tribal Roundtable
- **May 19** | Working with Your Community's Provider Ecosystem: Navigating Managed Care Plan Provider Lists
- **June 16** | Considerations for Planning: The Future of Services, a CalAIM Myths vs. Facts Session
- **July 21** | Practical Tools & Planning for Service Sustainability
- **August** | In-person Gathering – Dates TBD

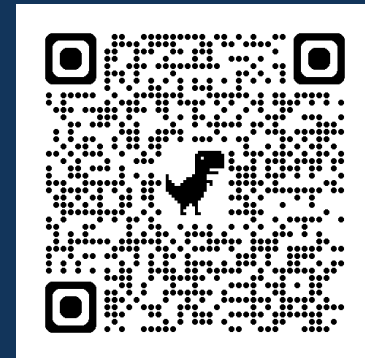


Tribal Roundtable Meetings

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

We still have space
for the April 24 in
person event!

Please register
today if you plan
to attend.





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**



CalAIM Announcements & Policy Updates

All event registration links and resources can be found in the Joint CPI Resource Hub





H.R.1 Impacts on Older Immigrants' Access to Health Care

- Check out this recently released [Fact Sheet by Justice in Aging](#) on how H.R.1 (the “One Big Beautiful Bill Act”) is impacting health care access for immigrants
- Immigrants **newly ineligible and losing coverage** for Medicare, Medicaid, and ACA Tax Credits include:
 - Refugees and people with granted asylum,
 - People granted withholding of removal,
 - Trafficking and domestic violence survivors,
 - People granted humanitarian parole, such as certain Afghans who aided U.S. military operations in Afghanistan or people fleeing violence in Ukraine,
 - People granted Temporary Protection Status (TPS)



Medi-Cal Coverage Ambassadors

Participate in discussions about ways to engage with your community and inform them about available health coverage options.

Upcoming Webinar

- **When:** Wednesday, May 27 | 11 am – 12 pm
- **Topic:** Overview of the Birthing Care Pathway
- [Register Now!](#)



Justice-Involved Reentry Initiative Impact Report

- DHCS [released](#) the first [impact report](#) on California's Justice-Involved Reentry Initiative. Highlights:
 - Statewide progress in launching pre-release services, cross-agency collaboration
 - Stories of affected members served by the initiative
- See the [Justice-Involved Reentry Initiative](#) webpage for more information

[New York Times article](#) recently examined how California is implementing coordinated, person-centered care through systemic changes to support individuals returning to their communities.



Webinar: Expanding Access to Care for Justice-Involved Youth

- **When:** May 7 from 3 to 4 p.m. PT - [Register here](#)
- **What DHCS Will Share:**
 - An overview of the Justice-Involved Reentry Initiative and Children and Youth Behavioral Health Initiative (CYBHI)
 - How these initiatives are reducing barriers to care for youth with justice involvement
 - New benefits for services delivered by peer support specialists, community health workers, and certified wellness coaches
 - Resources available to improve care and access for individuals reentering communities
- **What a Community Provider (Kindful Restoration) Will Share:**
 - The work they're doing in the Inland Empire and how these services are benefiting youth involved with the justice system



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 Free Trainings in Lake County with CYBHI Resource Partners

Expanding Access to Child & Youth Behavioral Health Resources for California Communities

FREE UPCOMING TRAINING EVENTS
Free continuing education (CE/CME) credits available for eligible professionals.

 <p>SAFE SPACES TRAIN-THE-TRAINER</p> <p>May 13, 2026 Lakeport, CA</p>	<p>7.5-Hour Interactive Training</p> <p>Learn how to implement and teach trauma-informed practices.</p> <ul style="list-style-type: none">• Foundation of trauma-informed care• Tools for educators and youth-serving staff• Become a certified Safe Spaces trainer <p>Learn More Apply by April 14</p>
 <p>OPEN DOORS TRAINING</p> <p>May 14, 2026 Lakeport, CA</p>	<p>7-Hour Interactive Training</p> <p>Build stronger relationships with youth and discuss behavioral health.</p> <ul style="list-style-type: none">• Authentic youth engagement• Conversations addressing substance use• Practical relationship-building tools <p>Learn More Register by April 14</p>

Click here to learn more about the partnership between The Northern ACEs Collaborative (NAC) and The California Children and Youth Behavioral Health Initiative (CYBHI)

May 13 & 14

Lakeport, CA

Registration ends today, 4/21!

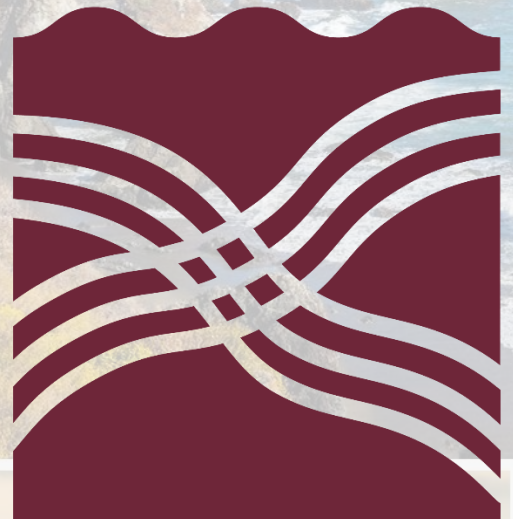


Partnership HealthPlan of California (PHC)

Managed Care Plan CalAIM Updates
April 2026

Alyssa Sawiris

PARTNERSHIP



HEALTHPLAN
of CALIFORNIA
A Public Agency



MCP CalAIM Updates April 2026





Agenda

New Provider Portal
Training

Office Ally Billing
Webinar

Reminders



New Provider Portal Training

- Partnership will be migrating the Provider Portal to the Jiva platform later this year.
- Providers will continue to have the same capabilities currently available.
- Provider Relations will be offering training on the new platform to support providers through the transition.
- Official flyer will be distributed for sign-ups when available.



Office Ally Open Office Hours

In collaboration with Office Ally, we're pleased to offer Enhanced Care Management, Community Supports, Community Health Workers, and Doula providers complimentary access to electronic claims billing.

Partnership is offering Office Ally office hours. These office hours will allow you to ask questions on topics that you need assistance with, including access and claims submissions

Office Hours will be held on:

Open Office Hours for Office Ally Questions
April 2 nd , 2026, at Noon – 1:00 p.m.
April 7 th , 2026, at 11:00 a.m. – Noon
April 14 th , 2026, at Noon – 1:00 p.m.
April 22 nd , 2026, at 1:00 p.m. – 2:00 p.m.

Please register using the [Office Ally & Open Office Registration Link](#)



Reminder: Correct TARs

Beginning **March 2, 2026**, any TARs containing the errors listed below will be **voided**, and providers will be required to submit a new TAR:

- Incorrect date spans (**with exception of STPHH and RC*)
- Incorrect HCPCS codes
- Incorrect modifiers
- Incorrect quantities/units
- Missing required documentation

Reminders

- **Partnership Logo:** providers must receive prior approval from Partnership's Communication team before using our logo on any materials or items.
- Providers should communicate with members how many days they are allowed under RC/STPHH per the approved TAR. MCPs are unable to extend beyond the 182 days per rolling period as noted in the DHCS Policy Guide.
- Partnership's Housing Support Plan template is available on our [website](#). Providers are welcome to utilize Partnership's template.
- ECM D-SNP Attestations are no longer required. If a Member is believed to not be enrolled in a D-SNP, Providers are able to submit a TAR.



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

April 2026

Tamar Kurlaender



CaAIM CPI Southwest Collaborative

Tamar Kurlaender

April 21, 2026

CalAIM Justice Involved Training | Probation 101

Probation 101 is a two-hour training designed for individuals looking to gain a baseline understanding of California Community Corrections, with an emphasis for system partners with limited exposure to the juvenile and criminal justice system.

COURSE DATES

Course 1: April 21 | 10:00 AM – 12:00 PM

[REGISTER HERE](#)

Course 2: April 22 | 10:00 AM – 12:00 PM

[REGISTER HERE](#)

Course 3: April 23 | 10:00 AM – 12:00 PM

[REGISTER HERE](#)

This training is offered in partnership with and funded by Health Net Community Solutions, Blue Cross of California Partnership, Molina Healthcare of California, and Kaiser Permanente.



CalAIM Justice Involved Trainings | Future training opportunities

COUNTY, STATE AND FEDERAL REQUIREMENTS OF CALAIM

One Day Training

May 28 | 10:00 AM – 12:00 PM
May 29 | 10:00 AM – 12:00 PM
June 4 | 10:00 AM – 12:00 PM
June 5 | 10:00 AM – 12:00 PM

WHAT IS CALAIM & WHO IS ELIGIBLE

One Day Training

May 12 | 10:00 AM – 12:00 PM
May 13 | 10:00 AM – 12:00 PM
May 14 | 10:00 AM – 12:00 PM

REENTRY PLANS AND TRANSITION PLANNING

One Day Training

September 15 | 10:00 AM – 12:00 PM
September 16 | 10:00 AM – 12:00 PM
September 17 | 10:00 AM – 12:00 PM
September 18 | 10:00 AM – 12:00 PM

ENHANCED CARE MANAGEMENT (ECM) – ADULT

Option 1 – 2 Day Course

June 16 | 9:00 AM – 12:00 PM
June 17 | 9:00 AM – 12:00 PM

Option 2 – 2 Day Course

June 16 | 1:00 PM – 4:00 PM
June 17 | 1:00 PM – 4:00 PM

Option 3 – 2 Day Course

June 23 | 9:00 AM – 12:00 PM
June 24 | 9:00 AM – 12:00 PM

Option 4 – 2 Day Course

June 23 | 1:00 PM – 4:00 PM
June 24 | 1:00 PM – 4:00 PM

Option 5 – 2 Day Course

June 30 | 9:00 AM – 12:00 PM
July 1 | 9:00 AM – 12:00 PM

Option 6 – 2 Day Course

June 30 | 1:00 PM – 4:00 PM
July 1 | 1:00 PM – 4:00 PM

ENHANCED CARE MANAGEMENT (ECM) – JUVENILE

Option 1 – 2 Day Course

July 28 | 9:00 AM – 12:00 PM
July 29 | 9:00 AM – 12:00 PM

Option 2 – 2 Day Course

July 28 | 1:00 PM – 4:00 PM
July 29 | 1:00 PM – 4:00 PM

Option 3 – 2 Day Course

August 5 | 9:00 AM – 12:00 PM
August 6 | 9:00 AM – 12:00 PM

Option 4 – 2 Day Course

August 5 | 1:00 PM – 4:00 PM
August 6 | 1:00 PM – 4:00 PM

Option 5 – 2 Day Course

August 12 | 9:00 AM – 12:00 PM
August 13 | 9:00 AM – 12:00 PM

Option 6 – 2 Day Course

August 12 | 1:00 PM – 4:00 PM
August 13 | 1:00 PM – 4:00 PM

This training is offered in partnership with and funded by Health Net Community Solutions, Blue Cross of California Partnership, Molina Healthcare of California, and Kaiser Permanente.



Community Supports | Overview

Community Supports (CS) are non-medical, wrap-around services provided as a substitute or support to avoid other Medi-Cal covered services such as emergency room visits, an avoidable hospital or skilled nursing facility admission, or a discharge delay. *As of 1/1/24, most of the counties KP serves offer all 15 of the Community Supports.**

Supports for Housing Insecurity 	Supports to Keep People at Home 	Supports to Improve a Chronic Condition 	Support to Recover from Acute Intoxication 
<p>Primary Audience: Individuals experiencing homelessness</p>	<p>Primary Audience: Individuals at risk for institutionalization in a nursing home</p>	<p>Primary Audience: Individuals who have certain chronic conditions and require support</p>	<p>Primary Audience: Individuals found publicly intoxicated to divert from jail or the Emergency Department</p>
<ol style="list-style-type: none"> 1. Housing Transition Navigation Services 2. Housing Deposits 3. Housing Tenancy & Sustaining Services 4. Recuperative Care (Medical Respite) 5. Short-Term Post Hospitalization Housing 6. Day Habilitation 7. Transitional Rent 	<ol style="list-style-type: none"> 8. Respite Services 9. Personal Care & Homemaker Services 10. Environmental Accessibility Adaptations (Home Modifications) 11. Assisted Living Facility Transitions* 12. Community or Home Transition Services** 	<ol style="list-style-type: none"> 13. Medically Tailored Meals/ Medically Supportive Food 14. Asthma Remediation 	<p>15. Sobering Centers***</p> <p><i>Note: majority of the referrals for this service are from law enforcement and stays must be less than 24 hours.</i></p>

* Formally known as “Nursing Facility Transition/Diversion to Assisted Living Facilities

** Formally known as “Community Transition Services/nursing Facility Transition to a Home”

*** Exceptions include the Sobering Centers, which are **not** offered in these counties: Contra Costa, Marin, Mariposa, Napa, Placer, San Mateo, Santa Cruz, Solano, Sonoma, Sutter, Ventura, Yolo

Who are the Network Lead Entities, and what is their expertise?



Geographic Footprint	<ul style="list-style-type: none"> All 32 counties 	<ul style="list-style-type: none"> All 32 counties 	<ul style="list-style-type: none"> SCAL Region 	<ul style="list-style-type: none"> All 32 counties
Areas of Expertise	<ul style="list-style-type: none"> Children Youth Young adults Families 	<ul style="list-style-type: none"> Adults Home and Community-Based Services Care Coordination 	<ul style="list-style-type: none"> High needs members 	<ul style="list-style-type: none"> Medically Tailored Meals
Services Provided for KP	<ul style="list-style-type: none"> ECM PoFs 7 CS services: Respite, Asthma Remediation, Housing Trio, Day Habilitation, Transitional Rent CHW services 	<ul style="list-style-type: none"> ECM PoFs 13 CS services (*excludes Medically Tailored Meals and Transitional Rent) CHW Services 	<ul style="list-style-type: none"> ECM PoFs 2 CS services: Personal Care and Homemaker Services and Respite Services 	<ul style="list-style-type: none"> 1 CS service: Medically Tailored Meals including nutrition assessment and nutrition education



Questions?



Reflections?



Ideas?

Contact your Medi-Cal Local Engagement Representative!

Tamar Kurlaender

tamar.x.kurlaender@kp.org

KAISER PERMANENTE

APPENDIX

Submitting ECM/CS/CHW Referrals

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](#)

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.
- Referrals are reviewed within 5 business days to determine if the Member is eligible.

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



County Plans Opportunities for Collaboration, Alignment, & Sustainability



Poll

Please take a moment to respond to the poll questions popping up on your screen.



Fierce Urgency for Community Driven Partnerships

Three Pillars of Community-Centered Transformation



Community- Anchored Accountability

Initiatives that lay the foundation for improved accountability, member involvement and transparency



Community Planning

Aligned community planning efforts across public health, managed care, and behavioral health



Community Investment

Efforts to strengthen community investments with community planning



Rural Resilience Related County Plans: Opportunities for Collaboration



CalAIM - Justice Systems - Behavioral Health - Public Health



2026: Transitions thru a Planning Lens

Plan Type	Responsible Local Agency	Required Partner	Dates
Community Health Assessment / Community Health Improvement Plans	Local Health Jurisdiction	Managed Care Plan	Every 3 Years
Juvenile Justice Realignment Plan	Probation	BH, Education, Community Organizations	May 1, 2026
Behavioral Health Services Act County Integrated Plan	County Behavioral Health	LHJs and MCPs	Draft March 31, 2026 Final June 30, 2026
CalAIM JI Re-Entry Initiative Readiness Assessment	County Behavioral Health	Probation, Sheriff, Jails, MCPs, Social Services	October 1, 2026

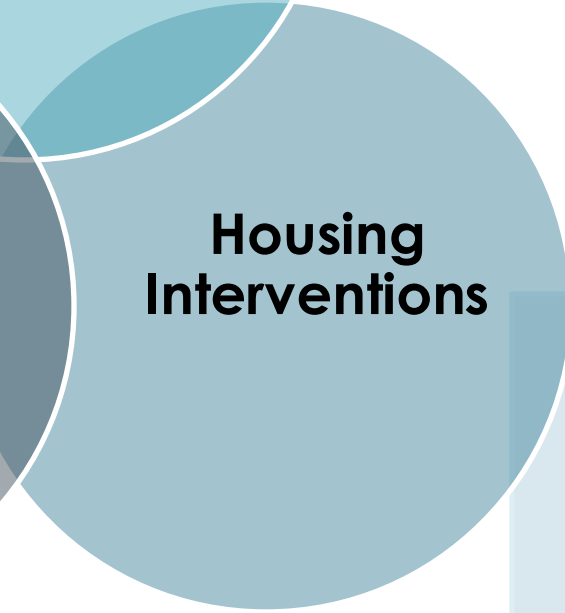
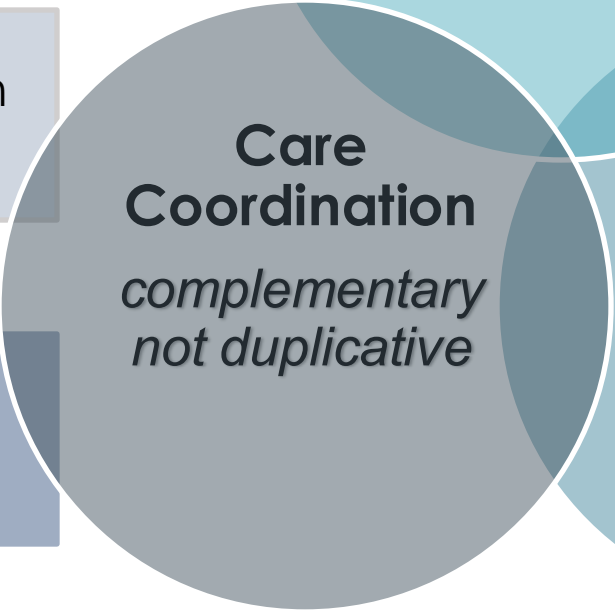
BHSA and CalAIM - Overlaps and Critical Communication



County Behavioral Health
FSP and HFW

AND

ECM **OR**
Complex Care
Management



Community Supports
in Coordination with
BHSA Housing
Interventions

Example Ecosystem of Partners in Youth Resilience Planning





Multisolving Mindset Approach: One Action, Many Benefits

Multisolving means designing one action that supports multiple goals at the same time — instead of working on each plan separately.

Why Try a Multisolving Approach?

1. Avoid solving one problem while making another worse
2. Use the wisdom of **multiple sectors and lived experience**
3. Make better use of time, energy, and partnerships
4. Strengthen solutions that are hard to move forward alone
5. Break from business-as-usual in siloed systems



As you review these plans, listen for:

- Where you recognize your own work.*
- Where you see overlap.*
- Where you could align to reduce burden or improve outcomes.*





Community Health Assessment (CHA) & Community Health Improvement Plan (CHIP)

What is it?

CHA:

- Identifies community needs, assets, and disparities in a defined region

CHIP:

- A long-term plan (3-5 years) that turns CHA findings into strategies and actions to improve population health.

Key Dates

New Alignment Required: January 1, 2028

LHJs required to conduct and align with a 3-year CHA/CHIP cycle to align with DHCS' Managed Care Plan Population Needs Assessment Requirement

LHJ CHA or Data Refresh Due: December 2028

LHJ CHIP or Data Refresh Due: June 30, 2029

Who is involved?

• Lead:

- Local Health Jurisdiction (Public Health Department) – *CHA/CHIP is required for LHJ accreditation*

• Engaged during Development:

- Medi-Cal Managed Care Plan (required)
- Community organizations (e.g., County agencies, CBOs, hospitals)
- Community members

• Local Approver:

- Local implementor (varies)

• No Official State-level Oversight

Why does this matter?



Not intended to be just a public health exercise—requires shared ownership, stewardship, and action anchored in diverse cross-sector planning to align and reduce duplication



New state requirements require Managed Care plans to contribute resources (funding, in-kind staffing) to support CHA/CHIP



Ongoing discussions occurring to further align non-profit hospitals' required Community Health Needs Assessment (CHNA) cycle

How to get involved

- Contact your local health department/jurisdiction [Directory of Local Health Departments - NACCHO](#)
- Use CHA/CHIP findings to inform other required plans



Juvenile Justice Realignment Block Grant County Plan

What is it?

An annual plan that:

- Describes how the County supports justice-involved youth via facilities, programs, placements, services, reentry strategies, etc. to provide appropriate rehabilitative services

Key Dates

Due Date: Annually by May 1

Subcommittee Meetings: At least two times a year to consider and update the plan

Who is involved?

- **Lead:**
 - County Probation Department – *Annual plan required to receive Juvenile Justice Realignment Block Grant*
- **Engaged during Development:**
 - Local Subcommittees:
Probation, District Attorney's Office, Public Defender's Office, Department of Social Services, Department of Mental Health, Office of Education, etc.
 - Community members and people with lived experienced
 - Public health
- **Approver/State-level Oversight:**
 - Office of Youth and Community Restoration (OYCR)

Why does this matter?

- Centers community-based, least restrictive alternatives
- Makes behavioral health coordination explicit
- Often serves as narrative evidence of CalAIM readiness

How to get involved

- Contact your local probation dept
<https://oycr.ca.gov/2025-county-plans/>
- Participate in subcommittee or planning discussions
- Use the plan to align youth justice and health strategies




Recall: March Deep Dive Into ECM Justice Involved Initiative

Speaker:

- **Ron Kinger, RN MSN**
Senior Manager of Justice Involved Systems,
Partnership HealthPlan of California

What was shared:

- Background on CalAIM Justice-Involved Reentry Initiative, eligibility requirements, requirements for organizations interested in participating as providers, and open Q&A



**Check Out
More on the
Resource Hub**



Behavioral Health Service Act (BHSA) County Behavioral Health Integrated Plan

What is it?

A 3-year integrated plan outlining how behavioral health funding will be used in the community to:

- Meet statewide and local outcome measures
- Reduce disparities
- Address unmet needs along the [Behavioral Health Care Continuum](#)

Key Dates

Draft Due: March 31, 2026

Final Due: June 1, 2026

Updated annually during 3-year cycle

Who is involved?

- **Lead:**
 - County Behavioral Health Department
- **Engaged during Development:**
 - Community members/People with lived experience
 - PH, Education, Public Safety, Housing, Tribal, CBOs, BH, Social Services
- **Local Approver:**
 - Local Behavioral Health Board/County Board of Supervisors
- **State-level Oversight:**
 - Department of Health Care Services (DHCS)

Why does this matter?

- ✓ Sets priorities for behavioral health access, equity, and outcomes
- ✓ Used locally to guide investments and services
- ✓ Alignment with data and priorities of Public Health's CHA/CHIP and Probation's youth justice planning can maximize impact and reduce siloed work

How to get involved

- Participate in community engagement processes
- Contact your [local BHSA Coordinator](#)



Poll

Please take a moment to respond to the poll questions popping up on your screen.

Which of the three plans have you heard of? Select all that apply.

- **Community Health Assessment/Community Health Improvement Plan (CHA/CHIP)**
- **Juvenile Justice Realignment Block Grant**
- **Behavioral Health Services Act (BHSA) County Integrated Plan**





Enhanced Care Management (ECM): The Through Line

- Enhanced Care Management is one of the primary ways MCPs respond to needs identified through:
 - CHA / CHIP
 - Behavioral Health plans
 - Youth justice planning
 - ECM operationalizes alignment for **high-need populations**, including justice-involved youth.

ECM is where alignment becomes visible to families and youth.



Shared Required Plan Elements

1. Data Collection

Behavioral Health
Needs & priorities

CHA/CHIP
Community needs

Juvenile Justice
Youth needs

2. Community Input

Behavioral Health
Stakeholder Input

CHA/CHIP
Community Voice

Juvenile Justice
Youth and
Community voice

3. Activities

Behavioral Health
Funding allocations
& priorities

CHA/CHIP
Strategies to fund
priorities

Juvenile Justice
Funded programs &
services

4. Quality Metrics

Behavioral Health
Outcomes,
Performance
measures

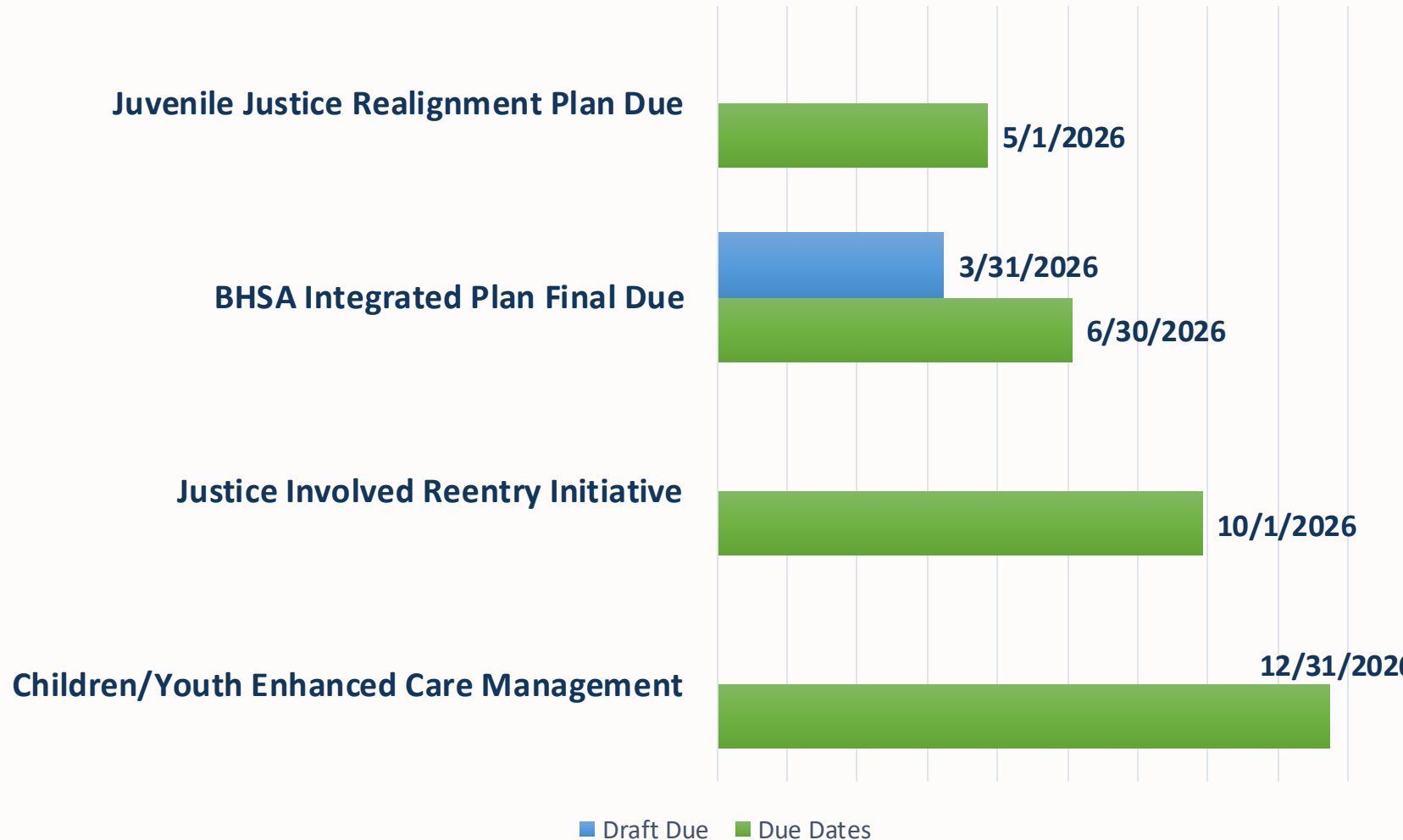
CHA/CHIP
Outcomes,
improvement
tracking

Juvenile Justice
Outcomes, Metrics



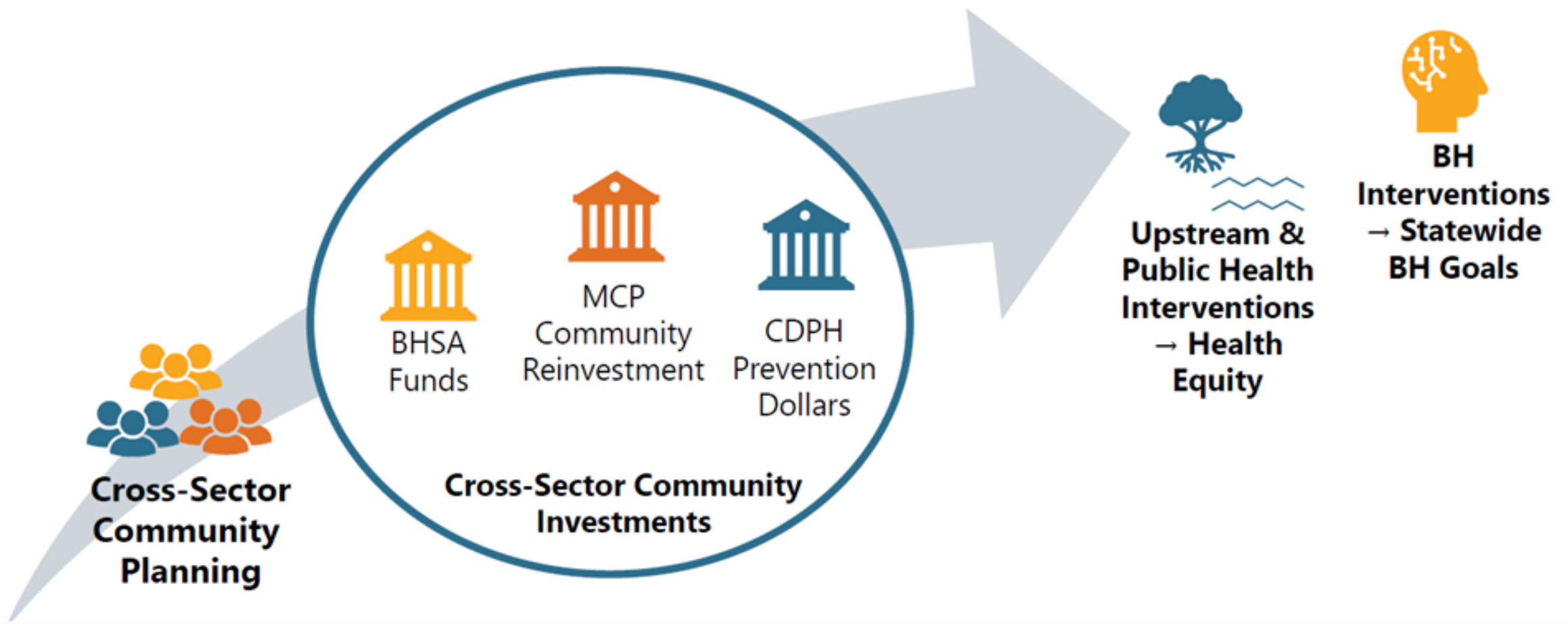
2026 Strategic Alignment of Due Dates

Key County Plans and Deadline Alignment in 2026





An Aligned Future for Multisolving Solutions





Joint CPI Resource Hub (Zoom Docs)

←

[Event Details](#)

Beyond Land Acknowledged...

Links from Monthly Meet...

August 19, 2025



Upcoming Events

Stay in Touch with PHIL ...

Welcome to the resource page for our monthly CPI Meeting!

Meetings Occur the Third Tuesday of the Month | 1-2:30 pm PT

Our Sponsors:



Event Details

A monthly event is hosted by the [Population Health Innovation Lab \(PHIL\)](#) for the [PATH Northwest Collaborative Implementation and Planning \(CPI\) Region](#) which includes two California counties: Del Norte and Humboldt.





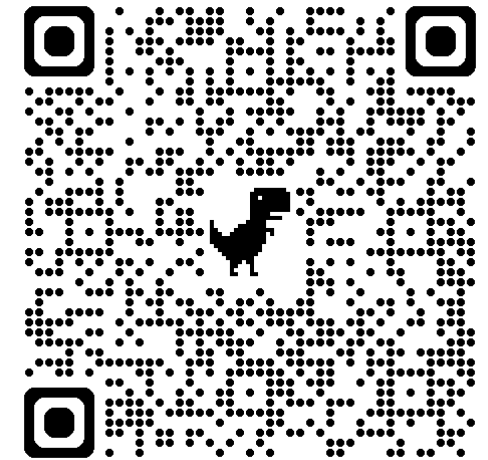
County-Based Breakouts

“End when it naturally finishes” model



Lake County Breakout: BHSA Discussion

- **Speaker:** Deputy Director Christine Andrus, Lake County Behavioral Health Services
- **What Will be Shared:**
 - An overview of the BHSA planning efforts and work in Lake County
 - Highlights of what is in the current draft plan
 - Sharing about how to be and stay engaged
 - Open time for questions and comments



Check out the
DRAFT Lake County
BHSA Integrated
Plan



Other Counties: Self-Guided Conversation

- **Intentions:**
 - Allow time for continued connection, relationship building, and conversation to sustain services
- See conversation guide for inspiration on topics to chat about with your colleagues.

Check out the conversation guide linked in the chat for ideas to spark conversation with other local providers



Thank You!

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

Thank you!

