



PATH Collaborative Planning & Implementation (CPI)

Welcome! The CPI convening will begin shortly.

October 20, 2026 | 1:00-3:00 pm



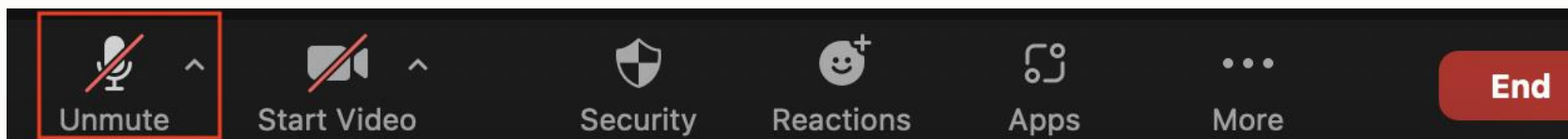


This event is being recorded and transcribed.

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)

October Convening for NW and SW Regions

October 20, 2026 | 1:00-3:00 pm





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, Native Hawaiian, 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.



Agenda for Today

- Welcome & Framing
- Data Dashboard Updates and Highlights
- Fee for Service Transition Overview
 - Presented by Partnership HealthPlan of California
- Managed Care Plan Updates
 - Partnership HealthPlan
 - Kaiser Permanente
- CalAIM Updates
- Regional Breakout Conversations



Population Health Innovation Lab (PHIL)

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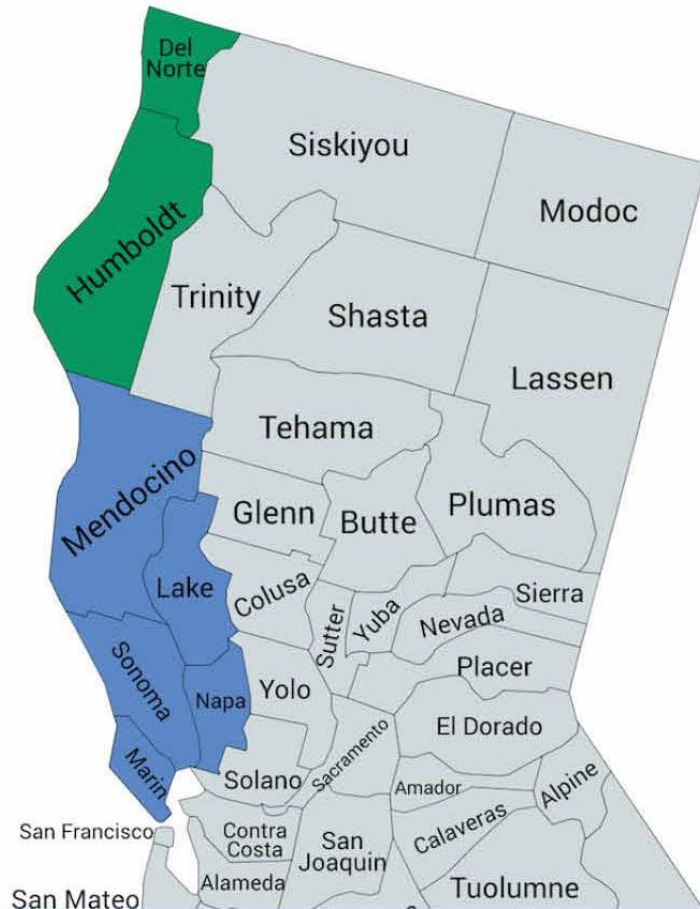


Erin Brown
Communications Specialist
ebrown@phi.org

Collaborative Planning & Implementation Overview



CPI REGIONS SUPPORTED BY PHIL



ABOUT CPI

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



QUICK LINKS



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](#).

Virtual Monthly Meeting Time:

The third Tuesday of the month from 1:00-3:00 pm PT



Reminder: Register on the DHCS PATH CPI Website

Why Register?

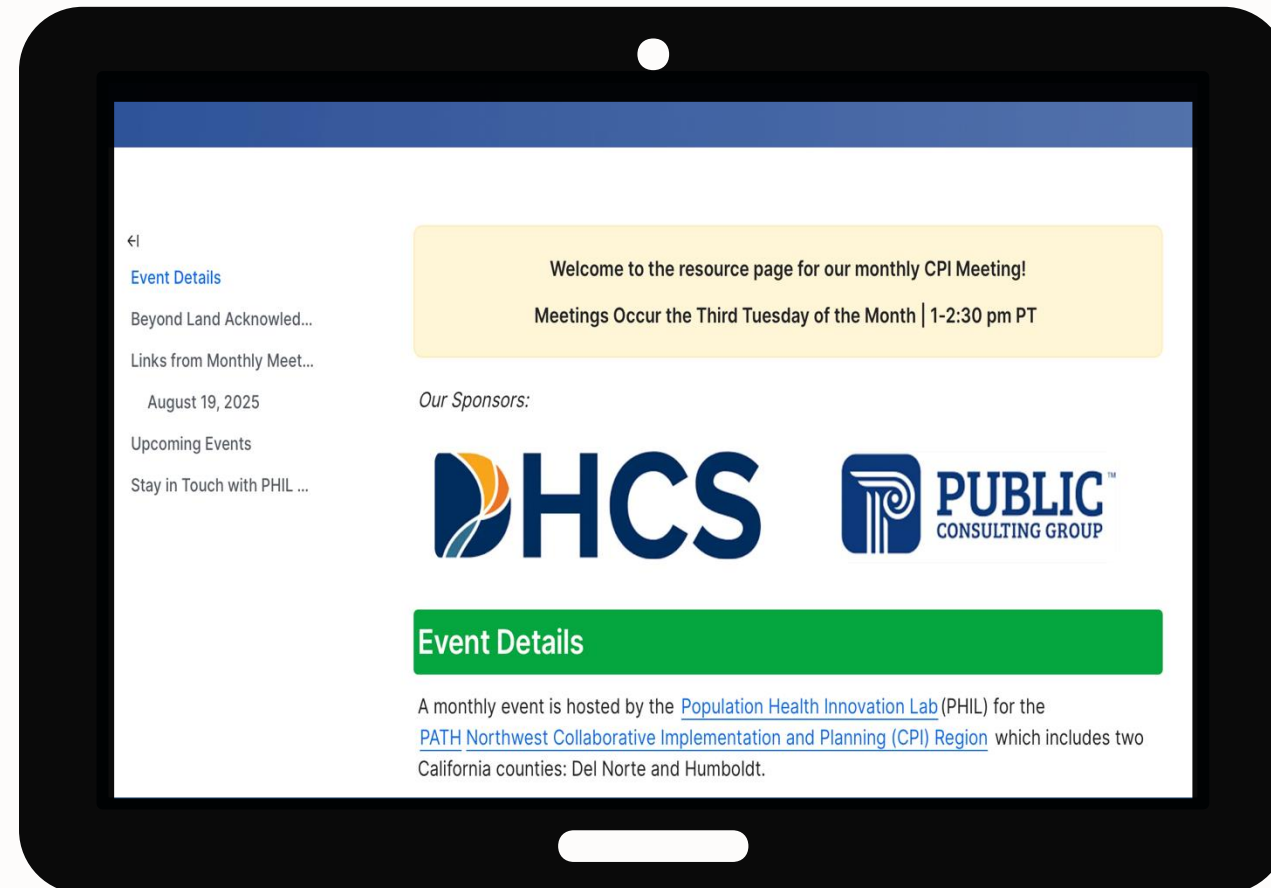
Receive regular policy and implementation updates directly from DHCS related to ECM and Community Supports.

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





Joint CPI Resource Hub (Zoom Docs)



Scan to Access the
Resource Hub!



Or Click the Link in the
Chat



Welcome & Housekeeping



Roll Call

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



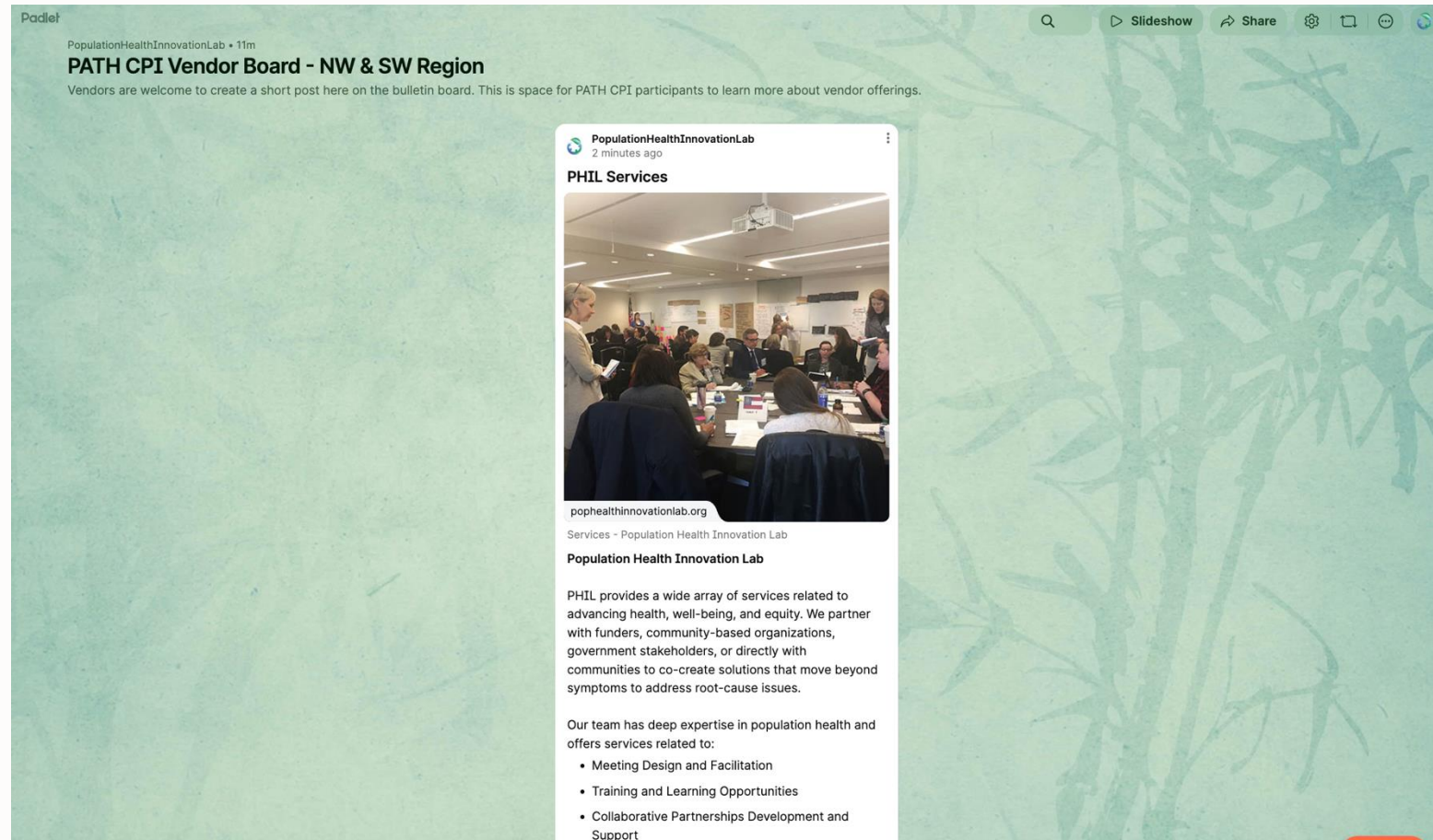
Request for Vendors

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

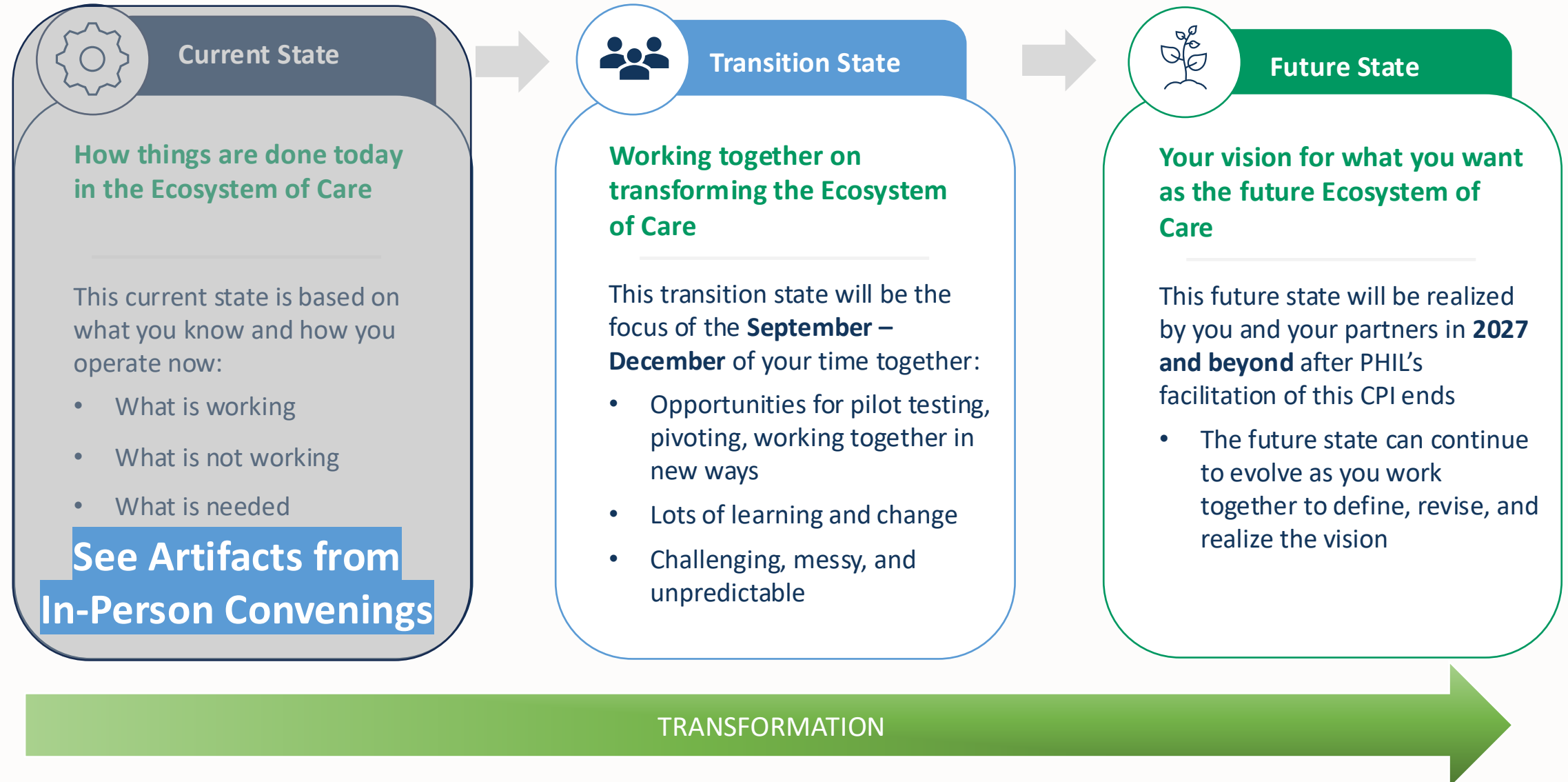


New! Vendor Bulletin Board

- Vendors are welcome to create a short [post here on the bulletin board](#).
- This is space for PATH CPI participants to learn more about vendor offerings.



Applying the Transformation Framework to the Ecosystem of Care





PATH NW + SW CPI Meeting Plans

- October 20
 - Virtual Tribal Roundtable
 - Virtual NW & SW Convening
- November 17
 - Virtual Tribal Roundtable
 - Virtual NW & SW Convening
- December 15
 - Virtual Tribal Roundtable
 - Virtual NW & SW Convening
- 2027 and Beyond: Continued Collaboration with your Local Partners / PATH CPI Sunsets





Stay in touch with your local partners!

- As PHIL's facilitator role ends along with the PATH initiative in December 2026, local partners are hoping to continue bringing people together.
- To continue to support this community network into 2027, do you consent to sharing your contact information with the local community integrator organization?

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**



Data Dashboard Updates and Highlights



PHIL County-Level Dashboard

Updated for all 7 counties



DHCS Behavioral Health Public County Profile

A new statewide resource



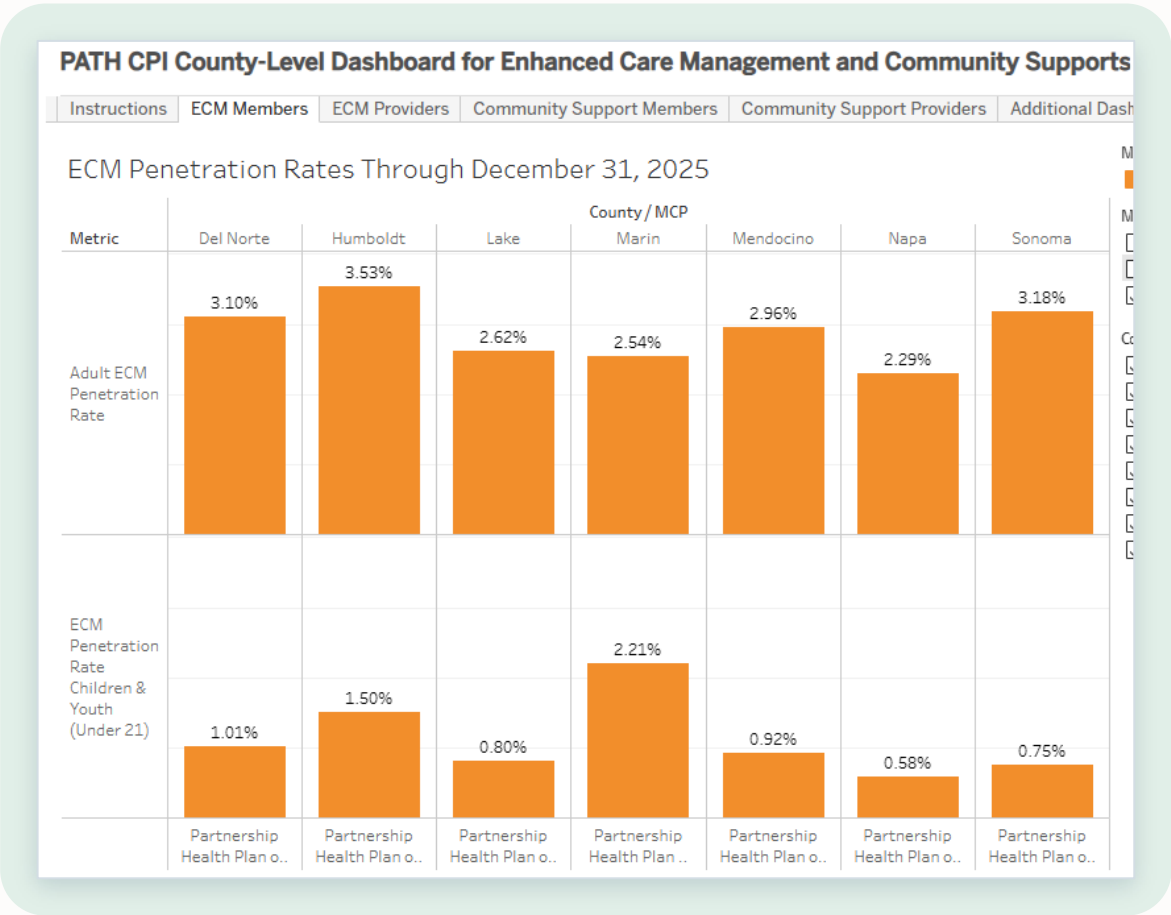
Looking Ahead to 2027

PHIL's Community Data Dashboard



PHIL County-Level Dashboard Is Updated

Enhanced Care Management (ECM) and Community Supports provider services and utilization, by county



7

Counties updated

Del Norte, Humboldt, Lake, Marin, Mendocino, Napa, and Sonoma

Q4 2025

Latest data release

Department of Health Care Services (DHCS) data through December 31, 2025

1st

New DHCS data model

First dashboard update built on the new model

Open the Dashboard



DHCS Behavioral Health Public County Profile

"California's first unified, public-facing tool that brings county behavioral health data together into one easy-to-use place."

California Department of Health Care Services



Overview

County behavioral health contacts and the Medi-Cal managed care plans in the county



Demographics

Population, Medi-Cal enrollment, and behavioral health penetration rates



Integrated Plan

Status and timeline of each county's Behavioral Health Services Act (BHSA) Integrated Plan



Homeless/Housing

Medi-Cal members who received housing-related Community Supports and ECM

[Open the County Profile](#)

[Learn More from DHCS](#)

Built on data counties report under BHSA



Why This Tool Matters for Your Work



One public view of how your county plans, funds, and delivers behavioral health services.



Links to Your Work

Housing-related ECM and Community Supports data appear alongside county behavioral health data.



Shows County Priorities

Integrated Plans describe how counties will use behavioral health funding to meet goals, improve outcomes, and reduce disparities.



Grows in 2027

Counties begin reporting data on non-Medi-Cal behavioral health services in January 2027.



PHIL's Community Data Dashboard for 2027

As PATH CPI concludes in December 2026, PHIL is developing a Community Data Dashboard that brings California Advancing and Innovating Medi-Cal (CalAIM) data together with other relevant community metrics.

BRINGS TOGETHER



ECM and
Community
Supports data



Relevant metrics
beyond CalAIM





**Community Data
Dashboard**
Developed by PHIL



IN SERVICE OF



Supporting your
work



Understanding your
county



Join Us for a Data Pop Up in December



DECEMBER

2026

DATA POP UP

Community Data Dashboard

PHIL will host a Data Pop Up on the Community Data Dashboard in December. Details to follow!



Fee-for-Service Transition

Partnership HealthPlan of California

Fee-for-Service Transition: Updates and Next-steps

October 20, 2026

Carolyn Sandine, Program Manager II
Administration



Discussion Topics

- Fee For Service Transition
- Information for Members and Providers
- Next Steps for Partnership
 - Care Coordination
 - Specialty Network

Transition to Fee-For-Service (FFS)



Implementation Timeline

Medi-Cal and Medicaid Changes

January 2026

- Asset Limits
- UIS Enrollment Freeze

March 2027

Six-Month Eligibility Checks

July 2027

- Asset limit lowered to \$21k/individual
 - Full scope Medi-Cal Dental ends for UIS members
 - Monthly premiums for UIS members
- Immigration Status Changes - limited scope Medi-Cal (Federal re-classification of some immigration statuses)

January 2027

- UIS members transition to FFS
- Work and Community Engagement Requirements begin
- Every 6 month redeterminations begin
- Reduction of retro Medi-Cal coverage

October 2028

Medicaid Cost Sharing

Why This is Happening

- Federal Medicaid funding for members with Unsatisfactory Immigration Status (UIS) is allowed only for emergency services.
- Per federal regulation, managed care monthly payments (capitation) cannot be used for this population because those payments are not tied to specific services.
- To maintain federal funding, California must move these members to FFS, where providers are paid per service.



Who is Impacted

Starting **January 1, 2027**, some members will get their Medi-Cal care through Fee-for-Service (FFS) Medi-Cal instead of a health plan.

This is a change in how people **get** care and who manages their benefits, not whether they have Medi-Cal. **Coverage is transitioning, not ending.** The state will manage FFS benefits, instead of a health plan.

Who this applies to

- People with unsatisfactory immigration status (UIS).
- Some people with green cards who are in the five-year waiting period before they can get full-scope federal Medicaid.
- People considered Permanently Residing in the U.S. Under Color of Law (PRUCOL), meaning they are allowed to stay in the U.S. even without formal immigration status.

What is Changing

- Members will not be in a Medi-Cal health plan.
- In FFS, they may see any doctor, clinic, or hospital that accepts Medi-Cal FFS.
- Enhanced Care Management and Community Supports are not available in Medi-Cal FFS.
 - Enhanced Care Management: Comprehensive care management for people with complex health or social needs.
 - Community Supports: Non-medical services such as housing navigation and medically tailored meals.

What is Changing

- **Members may still receive supports in Medi-Cal FFS, such as chronic care management, doula services, and Community Health Worker services** that provide health education, navigation support, renewal support, and help connecting to resources.
- Beginning in January 2027, DHCS will add new coordination and navigation services for members transitioning to Medi-Cal FFS, including a Nurse Advice Line and clinic- and community-based navigators who can help members understand benefits and find Medi-Cal FFS providers.
 - Additional details about this resource are to be announced

What is Not Changing

- Specialty mental health and substance use disorder treatment will continue through County Behavioral Health Plans.
- Non-specialty mental health services such as therapy, counseling, medication follow-up, and psychological testing, will continue in Medi-Cal FFS. Members can get these services from any Medi-Cal FFS provider who offers them.
- Members enrolled in the Program of All-Inclusive Care for the Elderly (PACE), which provides coordinated care for eligible older adults, will remain in PACE.
- Home- and community-based programs that help people remain safely at home will not change.

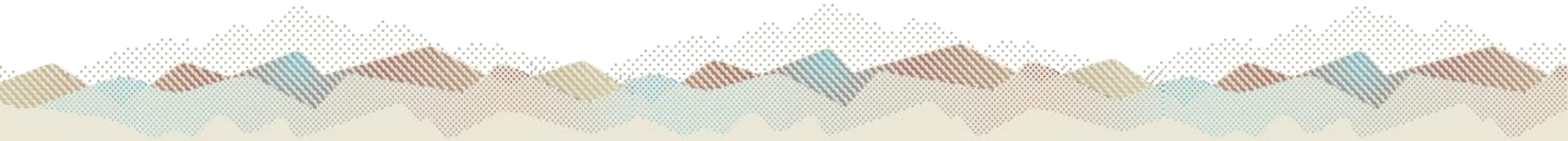


What is Not Changing

- Primary care, specialty care, and hospital care benefits remain the same. Members will get these services from any clinic, doctor, or hospital that accepts Medi-Cal FFS.
- Pharmacy services will still be covered by Medi-Cal Rx.
- Dental coverage through Medi-Cal Dental and Smile, California will still be available until July 1, 2027.



Communication to Members



Member Communication

- Managed Care Plans and the Department of Healthcare Services will both outreach to members on the transition
- DHCS to send a notification letter via mail on or before December 1, 2026, in addition to text campaign; and has mobilized Health Navigator program
- Partnership will also send a member communication with similar language and links to resources, via both mail and text message

What Members Can Do

- **Ask their current doctors and clinics if they accept Medi-Cal FFS.**
 - The [Find a Fee-for-Service Doctor or Service](#) online tool is continuously being updated with more user-friendly features.
- Keep contact information updated in the Medi-Cal system online through [BenefitsCal.com](#) or through their county office.
- **Watch for mail from Medi-Cal about the change.** When they receive a notice from Medi-Cal or their county, open it right away and respond quickly.

What Members Can Do

Members can call the Medi-Cal Help Line

1-800-541-5555

for help understanding the change or finding Medi-Cal FFS providers.

DHCS FFS Provider Directory



Services Individuals Providers & Partners Resources ▾ About

Home > Medi-Cal > Find Care

Find Care

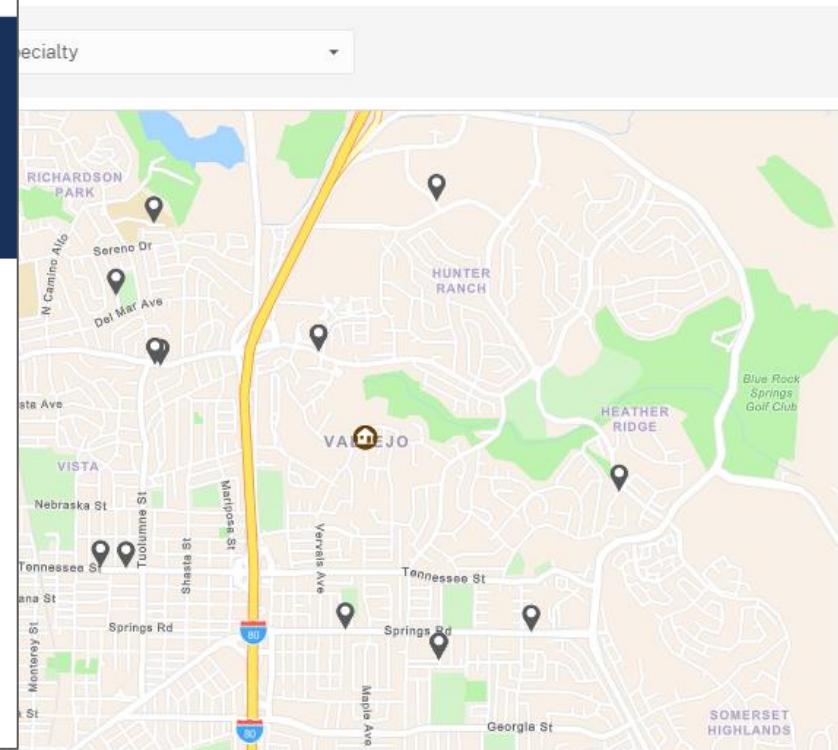
Find a Fee-for-Service Doctor or Service

Learn about the [Fee-for-Service Transition](#).



We are working to make this search tool better. Some information is not here yet. For now, please call to make sure the doctor or service takes Fee-for-Service Medi-Cal.

Filter by: Distance: 5 miles ▾ Type ▾ Specialty ▾



Nest-Steps: What Partnership is doing to assist with the transition

For Providers

- Making resources on FFS enrollment available to entire provider network
- Examining utilization data and network gaps to have up to date information on services provided by our network
- Providing member renewal date in provider portal

For Members

- Sharing care coordination data with DHCS for transitioning members, especially those with high need or complex conditions*
- Member informative sessions
- Additional communication to UIS members who will no longer receive ECM and CS services

Keep Your Medi-Cal Campaign - Member

- Member Services
 - Text message and mail renewal campaign to members
 - Member Informative Sessions
- [Partnership Website](#)
 - Information on changes to Medi-Cal and Medicaid
 - Fact sheets and other resources available for members and providers
- Engagement toolkit
 - Talking points and member-facing handouts and FAQs
 - Social media posts
 - Press releases, public service announcements, other media resources

How to Keep Your Medi-Cal

- Affected members will get letters by mail, text, or email. Make sure to keep your [Medi-Cal information updated](#) so you don't miss important notices.
- Watch your mail and respond quickly to Medi-Cal renewal packets or letters from your health plan or local county Medi-Cal office.
- Know [your renewal date](#) so you can renew your Medi-Cal online or work with your local county Medi-Cal office if you do not receive notifications.
- Keep going to the doctor and other medical appointments, and ask about available telehealth services.
- Visit our website and follow our social media channels for updates.
- [Ask questions](#) if you're unsure.

Resources

- [DHCS Member Notice](#)
- [Immigration Status Chart](#)
- [Find a Fee-for-Service Doctor or Service](#)
- Update information and view notices: [BenefitsCal.com](#)
- Stay informed about [DHCS Medi-Cal changes and updates](#)

Is your organization interested in becoming a Medi-Cal FFS Provider?



Would you like to learn more about the eligibility requirements and PAVE enrollment?

Pop Up Event: Becoming a Medi-Cal FFS Provider through PAVE Enrollment



November 3rd

12pm PT

Join the PHIL team with special guest Rebekah Kharrazi, MPH, CPH for real time experience and examples with state Medi-Cal.

- What is PAVE?
- Enrollment Process
- Common Denial Reasons
- Resources
- Q&A

[Register here for the Pop Up!](#)



MCP CalAIM Updates October 2026



Partnership HealthPlan of California (PHC)

Managed Care Plan CalAIM Updates
October 2026

Gary Salovino

Agenda



Department of Health Care Services (DHCS) updates



Enhanced Health Services Updates



ECM Referral Form & TAR Submission Update



Community Supports Updates



Medi-Cal Changes



Current State of ECM and Community Supports



Upcoming Webinars



ECM Policy Guide 2026

DHCS ECM Policy Updates Released in September 2026

Key ECM Policy Changes include:

- Updated guidance for Dual Eligible Members
- Added Utilization Management authority to MCPs
- Revision of JSON monitoring and Reporting process
- Clarified administrative and oversight expectations for ECM providers

Partnership is waiting for the DHCS ECM Payment Resources that will detail the rate development process and service delivery assumptions for ECM.

The updated policy can be found on the DHCS website: [ECM Policy Guide](#)



Enhanced Health Services

Provider ACD Line Go-live

The Enhanced Health Services (EHS) ACD Line is now available for provider related inquiries Monday to Friday from 8 a.m. – 5:00 p.m. This line does not receive member calls and members should be directed to member services or care coordination teams.



- ☐ TAR or referral status (up to 5)
- ☐ Urgent or expedited TAR requests
- ☐ General TAR or referral submission questions



- ☐ Claims or billing inquiries
- ☐ Member calls for reassignment
- ☐ ECM and CS program inquiries

EHS Department Phone Line: (866) 894-0489 Ext. 0490



OLS Redetermination Indicator

Partnership HealthPlan of California is pleased to announce that providers can now view a member's Medi-Cal redetermination date directly from the eligibility screen in the Online Services Portal!

Eligibility Details:

Member Eligible:	<input checked="" type="button" value="Yes"/>
Program:	Medi-Cal
AID Code:	1H [AGED, DISABLED, BUT NOT IN LTC (DERIVATIVED OF 17, 27, 67)]
COUNTY	NEVADA
CCS Eligible	No
American Indian:	No
DSNP	No
 Member Redetermination:	<input checked="" type="button" value="Yes (Due 05/31/2026) (90-day grace period from due date.)"/>

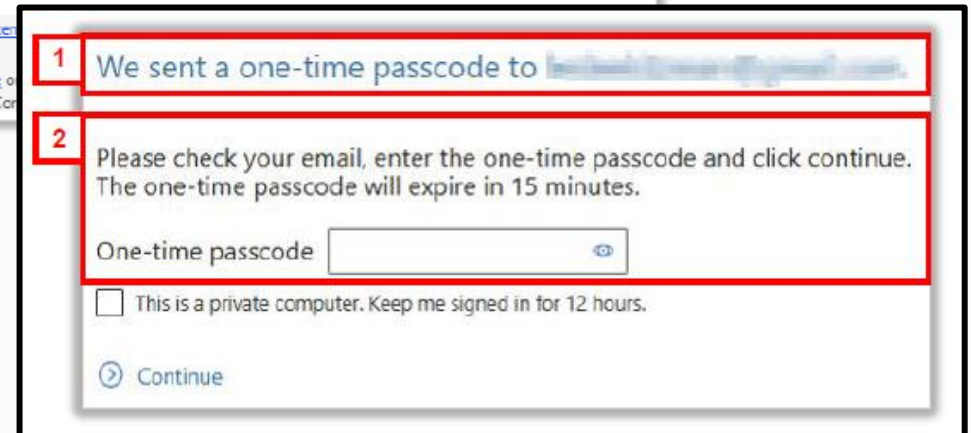
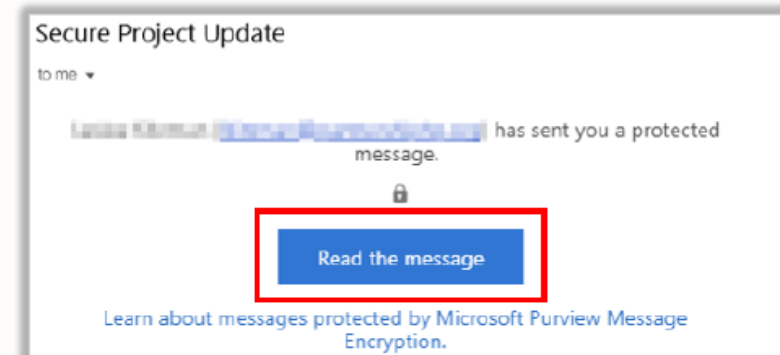
If you have any questions about the new member redetermination indicator, please feel free to reach out to PartnershipProviderEducation@partnershiphp.org



Email Encryption

Partnership is transitioning from Cisco Secure Email Encryption Service to Microsoft Purview Message Encryption for all company email encryption.

New Experience (Microsoft Purview):





ECM Referral Form and TAR Submission Update

Beginning July 1, 2026, providers will be required to attach an ECM Referral Form with each initial ECM TAR submission. This does not apply to re-authorization TARs unless the member's PoF has changed.

Any initial TAR submissions that do not include an ECM Referral Form will be “Pended” for 14 days. Providers will be required to attach a referral form to the TAR. If a referral form is not received within 14 days, the TAR will be voided.

[ECM Referral Form – Adult Members](#)

[ECM Referral Form – Youth Members](#)

[Provider Relations: Authorization Module](#)



Short-Term Post-Hospitalization and Recuperative Care

Short-Term Post-Hospitalization Housing

- DHCS has provided language to Managed Care Plans (MCPs) that will be sent to members about Short-Term Post-Hospitalization (STPHH) sunsetting as a Community Supports Service
- As of 7/1/2026 no STPHH TARs will be approved past 12/31/2026
- No STPHH TARs will be reviewed after 12/01/2026

[CMS Waiver Document](#)

Recuperative Care (Medical Respite)

- Ensure providers meet standards that align with National Institute for Medical Respite Care (NIMRC) certification standards to the extent applicable.
- DHCS has indicated a Policy Guide specific to Recuperative Care will be released in early October and a CS Policy Guide for all other services will be released in late October. We will update our providers once the guidance has been released.

[Standards for Medical Respite Care Programs](#)



Keep Your Medi-Cal Resources

Starting January 1, 2026, Medi-Cal will be changing for some undocumented adults. Partnership launched the *Keep Your Medi-Cal* campaign to provide timely information and resources to our community regarding these changes. We have developed the following webpages:

The *Keep Your Medi-Cal* webpage includes:

- Links to county offices
- Information on keeping Medi-Cal benefits
- Future Medi-Cal changes
- Resources



To visit the *Keep Your Medi-Cal* webpage scan the QR code.

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- Links to county offices
- Information on keeping Medi-Cal benefits
- Future Medi-Cal changes
- Resources



To visit the *Keep Your Medi-Cal* webpage scan the QR code.





Medi-Cal Changes January 1, 2027

- **Unsatisfactory Immigration Status (UIS) transition**
 - ☐ 2 Million members statewide, including approximately 80,000 Partnership Members
 - ☐ Transition from Medi-Cal Managed Care to Medi-Cal Fee-for-Service (FFS)
 - ☐ Members will no longer be eligible for ECM or CS services
- **Work and Community Engagement Requirements**
 - ☐ H.R. 1
 - ☐ Adults in the ACA Medi-Cal expansion group must work, attend school/job training, or volunteer at least 80 hours per month unless they qualify for an exemption
 - ☐ 3.5 Million Medi-Cal enrollees subject to Work/Community Requirements
- **Six-Month Medi-Cal Renewals**
 - ☐ H.R. 1
 - ☐ Requires the New Adult Group members to renew Medi-Cal every six months instead of once a year.
- **Retroactive Medi-Cal timeframes**
 - ☐ H.R. 1
 - ☐ Limits retroactive coverage timelines
 - ☐ Reduces retroactive coverage from three months to one month for New Adult Group members and two months for all other Medi-Cal members



<https://www.dhcs.ca.gov/tracking-federal-policy-impacts-on-medi-cal/>



Current State of ECM and Community Supports

What's working

- Strong provider commitment and partnerships
- Effective connections to community resources
- Meaningful impact on member outcomes

What's most utilized?

- Enhanced Care Management (ECM) – 23,674 members enrolled as of July 2026
- Community Supports – 14,201 members enrolled as of July 2026
 - Housing Transition & Navigation Services
 - Housing Tenancy & Sustaining Services
 - Medically Tailored Meals/Medically Supportive Foods

Current Challenges

- Poor documentation or lack of documentation of activities
- Providers struggling with basic workflow and referral process challenges
- Lack of intensive services being delivered – or delivered and not documented



CalAIM: What We Know

What We Know

- DHCS is refining ECM and Community Supports policies; final guidance is still pending.
- Increased focus on service intensity, documentation, program integrity, and outcomes. DHCS has indicated ECM should be more intensive, with expectations generally moving toward 3+ member encounters per month.
- Community Supports will continue in 2027, though service definitions and eligibility criteria will change.
- All providers should prepare for greater accountability, stronger documentation expectations, and a more intensive service model.



Upcoming Webinars

Color Legend

■ ECM

■ CS

■ CalAIM

■ Observed Holiday

October						
S	M	T	W	T	F	S
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

November						
S	M	T	W	T	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
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December						
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6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		



Questions

Contacts:

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



Kaiser Permanente

Managed Care Plan CalAIM Updates October 2026

Tamar Kurlaender



Southwest October PATH CPI

Tamar Kurlaender, Medi-Cal Local Engagement

October 2026

More Information on Medi-Cal Changes and Medi-Cal Support



Department of Health Care Services



<https://www.dhcs.ca.gov/medi-cal/updates/medi-cal-changes/>



Medicaid Assistance Center

1-800-557-4515 (toll-free)

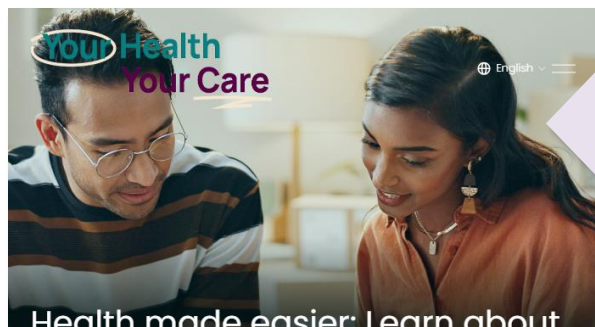
or

711 (TTY)

Monday through Friday, 8 a.m.
to 5 p.m. PST.

For help in Spanish, 1-800-545-7263.

Your Health Your Care



Health made easier: Learn about free support that fits your need



Help is here

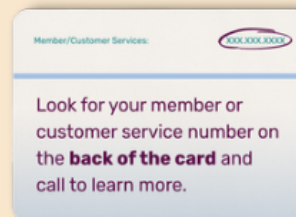
Medi-Cal insurance plans offer free support that many people might not know about. Enhanced Care Management is available right now to those who qualify. Select an option below to learn more.

Our New Campaign Website –
Your Health Your Care

Call to Action:

Have questions? Call
your Medi-Cal health
insurance plan.

If you have your Medi-Cal health insurance card handy, use that number to call for more information. You can also use the dropdown below to learn more on your plan's website.



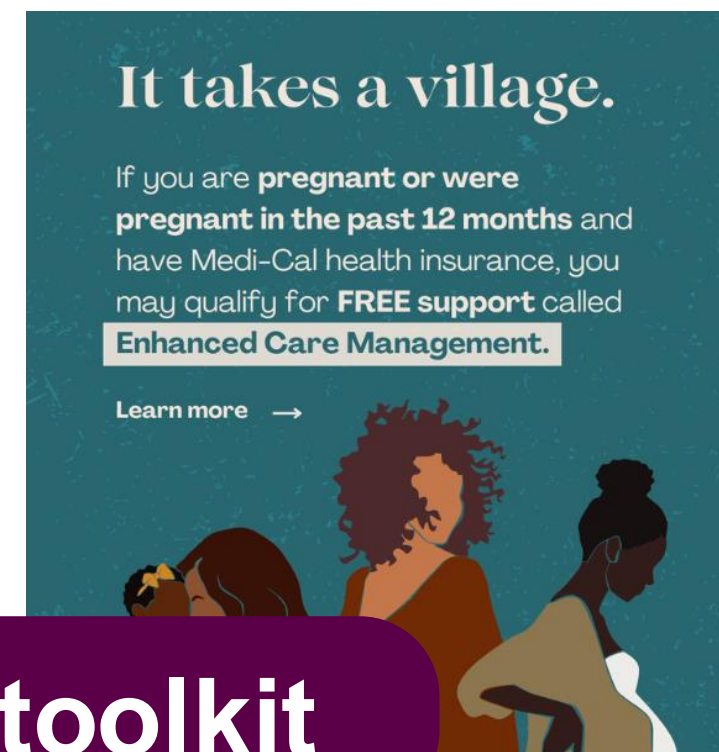
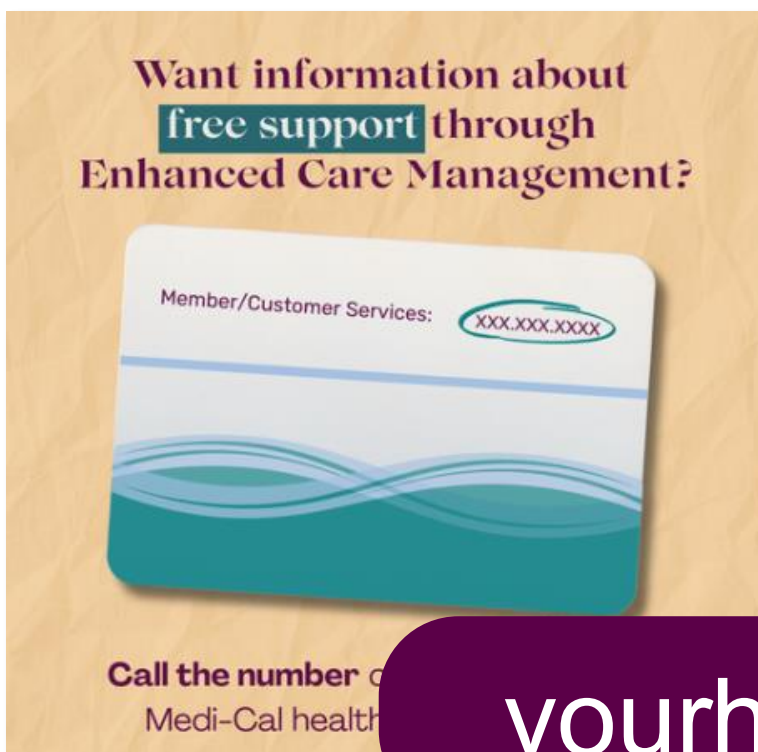
Social Media

KP has identified Community Based Organizations & PGP has identified micro-influencers to post and share resources.



Share Materials

Download one of the toolkits on the campaign website—tailored to pregnancy/postpartum or foster youth—for social media graphics and flyers to share in your community.



yourhealthyourcare.org/toolkit

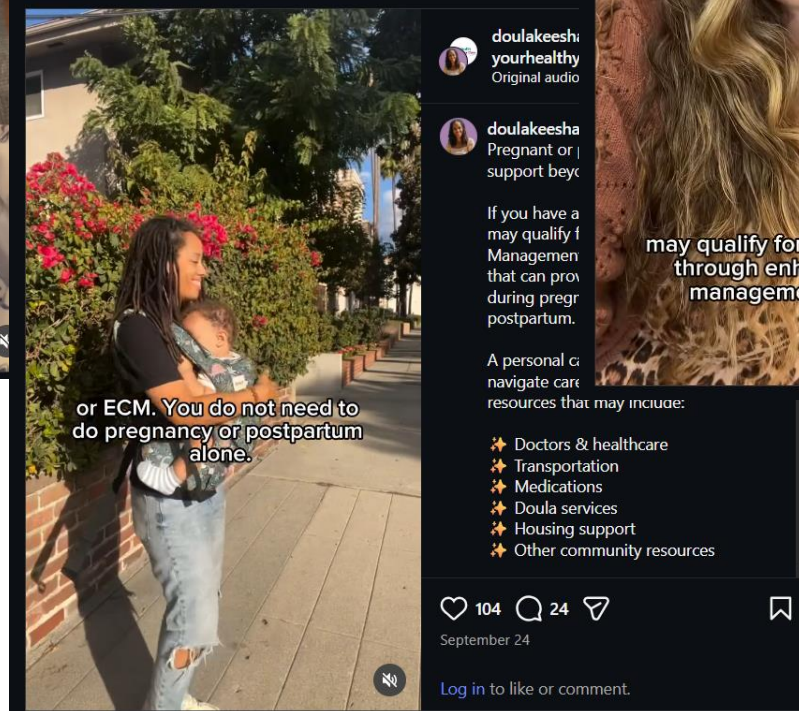
The information on this site is reviewed by health and legal experts. However, the information is not intended or implied to be a substitute for professional legal or medical advice, diagnosis, or treatment. All content, including text, graphics, images, and information, contained on or available through this website is for general information purposes only.

Your Health Your Care

Check Out our Recent Influencer Posts!



@glowdewitup



@doulakeesha



@kelliebsbusybees

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.



Questions?



Reflections?



Ideas?

Contact your Medi-Cal Local Engagement Representative!

Tamar Kurlaender

tamar.x.kurlaender@kp.org



CalAIM Updates



CalAIM Announcements

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



Event Registration

Stay up to date on upcoming events



Resources

Tools, guides, and materials



Announcements

Latest news, and updates

Scan to Visit the Joint CPI Resource Hub!



Or Click the Link in the Chat



STPHH and Recuperative Care

Community Supports Policy Update (10/1): Recuperative Care and Short-Term Post-Hospitalization Housing (STPHH) Sunset



Policy Guide Updates

Includes Information on:

- STPHH Sunset Plan
- New Recuperative Care Service Definition
- Update on the Global Cap of Room and Board Services

Recuperative Care Standalone Pricing Resource

- Guidance about how MCPs and providers may use this resource to support contracting discussions
- A high-level overview of the pricing methodology
- A midpoint service price benchmark
- The applicable pricing unit and Healthcare Common Procedure Coding System (HCPCS) code

Table 1 — Recuperative Care Service Pricing Benchmark

Service Type	Recuperative Care
Midpoint Service Benchmark	\$216.86
Unit of Service	Per diem
HCPCS Billing Code	T2033 U6



ECM Policy Guide

Updated September 2026

Updates in 3 Main Areas:

1. MCP Oversight
2. Service Expectation Clarifications
3. Reporting Changes / Data Systems Updates

[DHCS Website for Enhanced Care Management Policy Guide](#)

[Partnership HealthPlan ECM Office Hours Q and A \(Oct. 2026\)](#)





Resources for Upcoming Medi-Cal Changes

Transition of UIS Population from Managed Care to Fee-for-Service Medi-Cal

Medi-Cal Coverage Answers Quick Reference

Webinar Slides

1. [UIS to Fee-for-Service Transition](#)
2. [Six-Month Medi-Cal Renewals: Understanding Who Is Impacted and When](#)
3. [Behavioral Health Stakeholder Advisory Committee Meeting](#)

[DHCS Coverage Webinar Page](#)

Supporting Clients Through Medi-Cal Change

Practical Resources

1. [Keep Your Medi-Cal](#) — Client-friendly instructions for keeping information updated and safely seeking help.
2. [Medi-Cal Changes: What Members Need to Know](#) — Plain-language overview and timeline covering work requirements, six-month renewals, immigrant coverage, premiums, dental benefits, and other changes.
3. [Medi-Cal Changes Toolkit](#) — Downloadable flyers, social media content, presentations, and multilingual materials to share with clients.



If you want to get updates at the same time as the MCPs, keep this [page](#) bookmarked.

They include everything you need to get ahead of the curve and have your questions answered.

[Medi-Cal Changes DHCS](#)



GETTING CLEAR, TOGETHER

PUBLIC CHARGE 101

WEBINAR NOW AVAILABLE ON-DEMAND

Watch the On-Demand Webinar Now

This on-demand webinar is available in English, Spanish, Cantonese, Mandarin, and Vietnamese.

[View the Slide Deck Here](#)

Whom Does Public Charge Apply To?

APPLIES TO:

Immigrants applying for:

- a family-based green card (lawful permanent residence), or
- a visa to enter the United States.

DOES NOT APPLY TO:

- U.S. Citizens
- Citizenship applications
- Green card renewals
- Refugees/Asylees
- VAWA visas
- T/U visas
- SIJ visas
- DACA applications or renewals
- TPS applications or renewals
- Liberian DED eligible for LRIF

KNOW YOUR RIGHTS - Many immigrants are NOT subject to public charge. It does not apply to all immigrants.



Statewide CalAIM Provider Forum

Continuing into 2027

The monthly peer-learning and networking meeting, CalAIM Provider Forum, will now continue through at least June 2027.

You're invited to join CalAIM providers from throughout the state at the CalAIM Provider Forum.

Hosted by:



Future Provider Forum Dates:

October 21, 2026
November 18, 2026
January 20, 2027
February 17, 2027
March 17, 2027
April 21, 2027
May 19, 2027
June 16, 2027

*Register here: [Meeting Registration](#) *[Linktree](#) with resources shared in other forum meetings

WEBINAR

REGISTER TODAY!



CHW/P/R Best Practices Framework Overview

**Tuesday, October 27, 2026
11:30 AM to 1:00 PM PT**

Join state and community leaders to explore how the [CHW/P/R Training Best Practices Framework](#) can support the development, implementation, and continuous improvement of training programs for Community Health Workers, Promotores, and Representatives across California.

What You'll Learn

- Understand the purpose and key components of the CHW/P/R Training Best Practices Framework.
- Identify resources and strategies for incorporating the Framework into CHW/P/R training program design, implementation, and continuous improvement.
- Explore examples and considerations for applying the Framework within CHW/P/R training organizations and programs.

Live Spanish interpretation will be available.

Register Today!



<https://tinyurl.com/3jdzxb4s>



PATH CPI Updates and Reminders

Webinar: Practical Applications of the CalAIM Best Practices and Sustainability Toolkits

On **October 30, from 10 to 11 a.m. PDT**, DHCS will host a public webinar, “Practical Applications of the CalAIM Best Practices and Sustainability Toolkits” (advance registration required).

PHIL and Native Spirit Consulting will present on the Readiness Roadmap, CalAIM implementation, and best practices learned from Tribal partners.

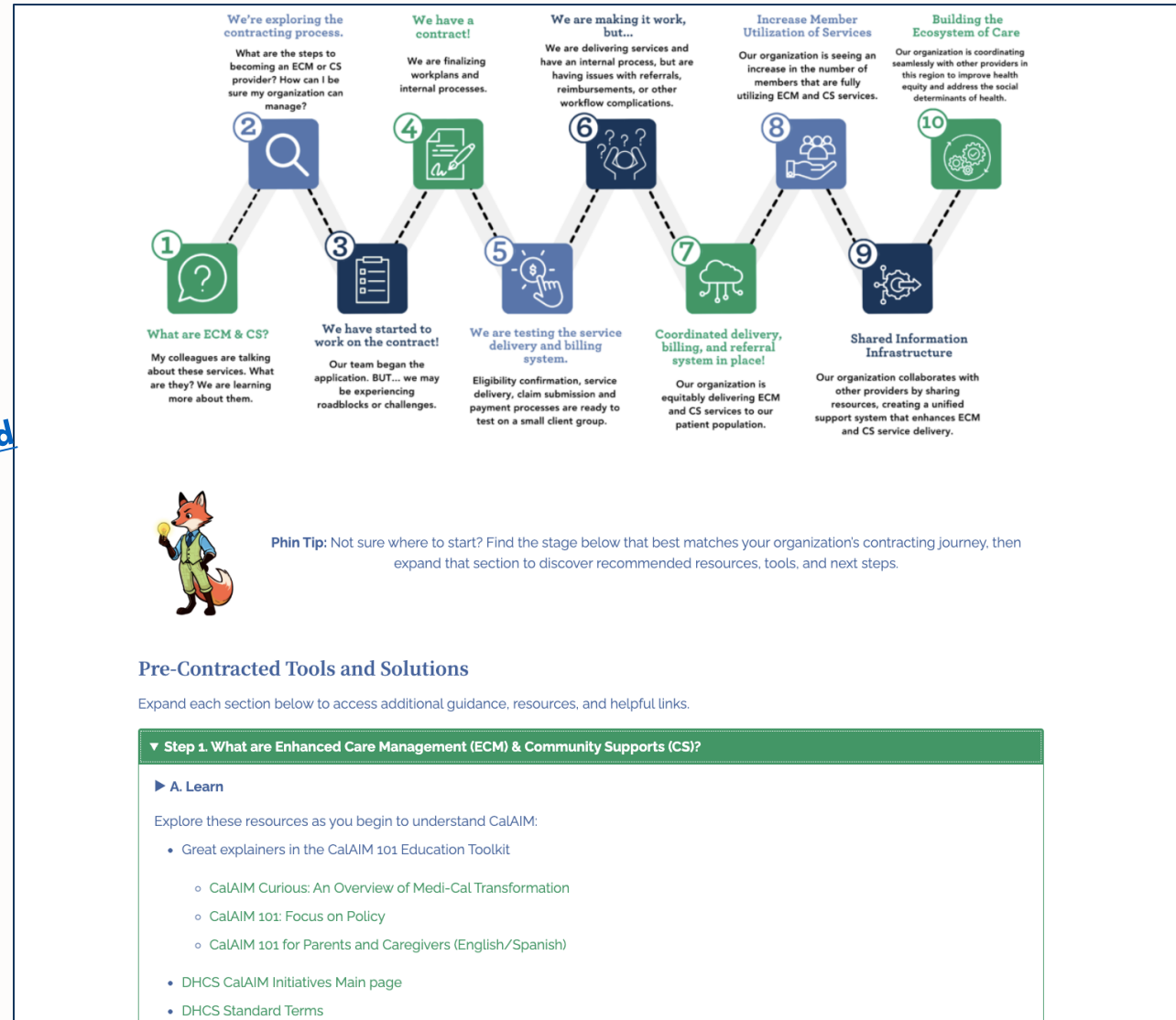
Register Today!



<https://tinyurl.com/8dhwu7f5>



Readiness Roadmap Interactive Tool



[Click here to explore PHIL's updated Readiness Roadmap!](#)



New Sustainability Toolkits from DHCS

Revised with feedback from all of you! The PATH facilitators from throughout California are sharing tools and best practices to support implementing ECM and Community Supports and building local networks of care for Medi-Cal members with complex needs.



Sustaining and Spreading Medi-Cal Transformation: The Revised Sustainability Toolkit

A Toolkit for Providers

and

A Toolkit for Community Integrators



View and download toolkits and resources here:

<https://www.ca-path.com/on-demand-resource-library>





Is your organization interested in becoming a Medi-Cal FFS Provider?

Would you like to learn more about the eligibility requirements and PAVE enrollment?

Pop Up Event: Becoming a Medi-Cal FFS Provider through PAVE Enrollment



November 3rd

12pm PT

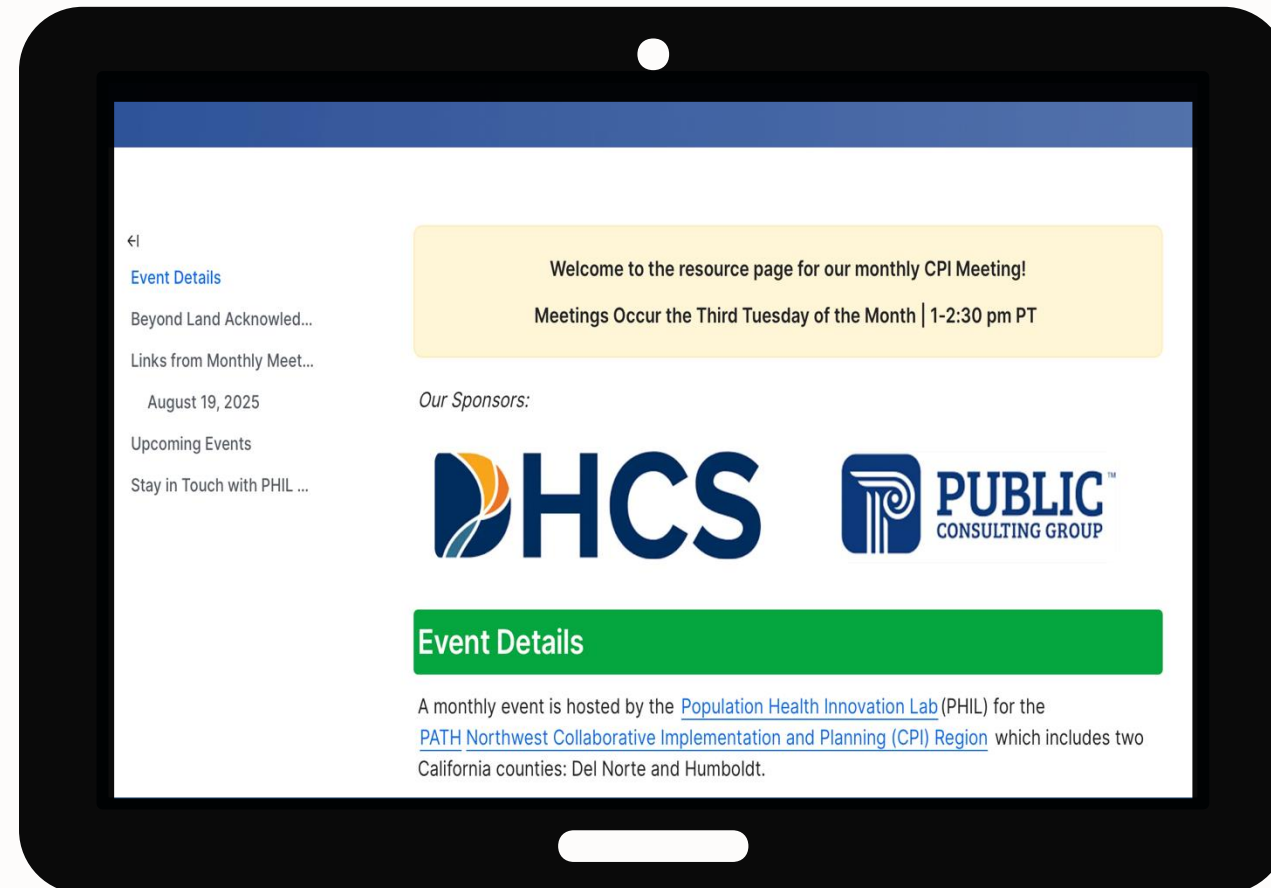
Join the PHIL team with special guest Rebekah Kharrazi, MPH, CPH for real time experience and examples with state Medi-Cal.

- What is PAVE?
- Enrollment Process
- Common Denial Reasons
- Resources
- Q&A

[Register here for the Pop Up!](#)



Joint CPI Resource Hub (Zoom Docs)



Scan to Access the
Resource Hub!

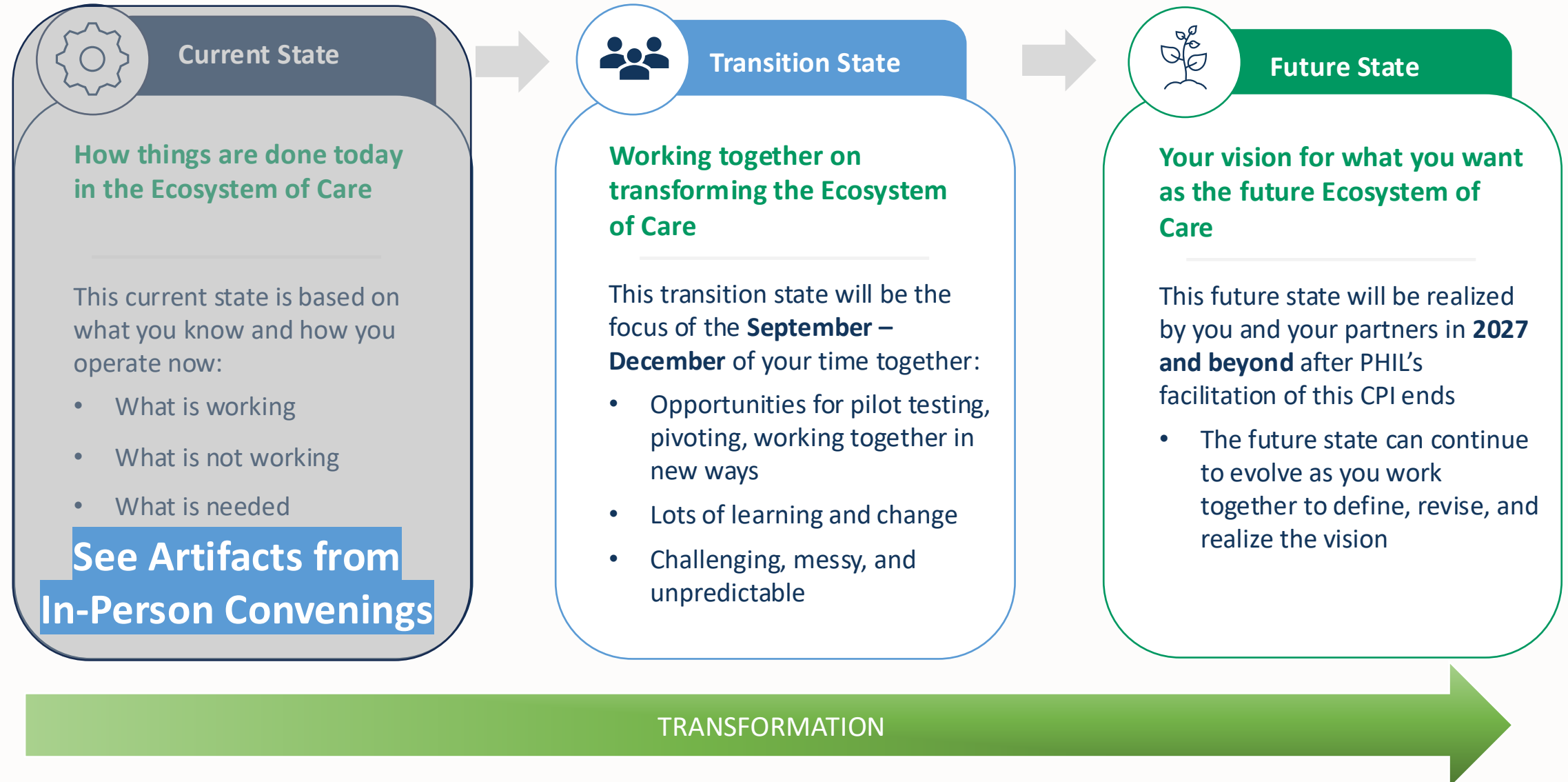


Or Click the Link in the
Chat



Transition Planning for PATH CPI and Local Collaboratives

Applying the Transformation Framework to the Ecosystem of Care





PATH NW + SW CPI Meeting Plans

- October 20
 - Virtual Tribal Roundtable
 - Virtual NW & SW Convening
- November 17
 - Virtual Tribal Roundtable
 - Virtual NW & SW Convening
- December 15
 - Virtual Tribal Roundtable
 - Virtual NW & SW Convening
- 2027 and Beyond: Continued Collaboration with your Local Partners / PATH CPI Sunsets





Stay in touch with your local partners!

If you missed the earlier poll, please complete the survey linked in the chat.

- As PHIL's facilitator role ends along with the PATH initiative in December 2026, local partners are hoping to continue bringing people together.
- To continue to support this community network into 2027, do you consent to sharing your contact information with the local community integrator organization?



Continuing the Ecosystem Action Planning

Time to Connect with Other Providers on
Next Steps and Requests to Sustain Your CalAIM Services



Breakout Conversations



Thank You!

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