



**pop health**  
LEARNING  
CENTER

**August 13, 2026**

# **CaAIM 101:** **A Foundational Overview**

PART 1 of 3

*Presented by Noetic Consulting*





# Disclosure

CPCA staff and speakers have reviewed all financial relationships with ineligible companies and the presenters have no relevant financial relationships to disclose.



# Welcome

*While we're waiting, please rename yourself.*

## RENAME YOURSELF

- 1 Click** the Participants icon
- 2 Hover** over your name & click rename
- 3 Add** your name, pronouns, and organization
- 4 Click** OK

*\*Please no acronyms*

## ON PHONE AUDIO?

*Here's how to connect.*

- 1** Find your participant ID in the top-left of your Zoom window.
- 2** Press #number# (e.g., #24321#) to connect.
- 3** You'll see: "You are now using your audio for your meeting."

# Housekeeping Reminders



## Mute

We'll mute lines during the presentation to prevent background noise.



## Questions

Submit questions using the chat feature or unmute and ask!



## Slides + Recording

Slides and recording will be posted to PopHealth Website and emailed out after the session.



## Tech Issues

Private chat **Kathleen Figoni** for assistance.

# Continuing Education Credit

**In support of improving patient care, the Learning Center has partnered with the California Primary Care Association (CPCA) to provide continuing education for the healthcare team:**

- **Accreditation Council for Continuing Medical Education (ACCME)**
- **Accreditation Council for Pharmacy Education (ACPE)**
- **American Nurses Credentialing Center (ANCC)**



## TO RECEIVE CREDIT:

You will need to fill out the evaluation that will be shared at the end of this session.



# Continuing Education Credit

| Credit Type               | Profession     | Accreditation Statement                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|---------------------------|----------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| AMA PRA Category 1™ (CME) | Physicians     | In support of improving patient care, this activity has been planned and implemented by the Population Health Learning Center and the California Primary Care Association. The California Primary Care Association is jointly accredited by the Accreditation Council for Continuing Medical Education (ACCME), the Accreditation Council for Pharmacy Education (ACPE), and the American Nurses Credentialing Center (ANCC), to provide continuing education for the healthcare team. <b>This activity is approved for 1 AMA PRA Category 1™ Credit.</b>                                                          |
| Nursing ANCC              | Nurses         | In support of improving patient care, this activity has been planned and implemented by the Population Health Learning Center and the California Primary Care Association. The California Primary Care Association is jointly accredited by the Accreditation Council for Continuing Medical Education (ACCME), the Accreditation Council for Pharmacy Education (ACPE), and the American Nurses Credentialing Center (ANCC), to provide continuing education for the healthcare team. <b>This activity is approved for 1 ANCC contact hour.</b>                                                                   |
| ASWB ACE Credits          | Social Workers | In support of improving patient care, this activity has been planned and implemented by the Population Health Learning Center and the California Primary Care Association. The California Primary Care Association is approved to offer social work continuing education by the Association of Social Work Boards (ASWB) . Approved Continuing Education (ACE) program. Organizations, not individual courses, are approved under this program. Regulatory boards are the final authority on courses accepted for continuing education credit. <b>Social workers completing this course will receive 1 credit.</b> |



**TO RECEIVE CREDIT:**

You will need to fill out the evaluation that will be shared at the end of this session.

# Introduce Yourself in the Chat

|   |                                    |                                                        |
|---|------------------------------------|--------------------------------------------------------|
| 1 | <b>Your Name</b>                   | Type your first and last name                          |
| 2 | <b>Your Role</b>                   | E.g. Medical Director, Care Manager, Medical Assistant |
| 3 | <b>Your Organization</b>           | Practice Name                                          |
| 4 | <b>What brings you here today?</b> | Tell us one thing you're hoping to walk away with.     |



# Alison Tudor

MPH

---

CaAIM & Independent  
Consultant

[alison@noetic.consulting](mailto:alison@noetic.consulting)

Alison Tudor provides technical assistance and implementation support to county human services and behavioral health agencies, healthcare providers, and community-based organizations on CaAIM & CYBHI implementation.

Drawing on over 18 years of nonprofit leadership experience in behavioral health, foster youth services, and domestic violence programming, she brings an understanding of service delivery operations and the organizational capacity required for sustainable Medi-Cal integration.

She holds an MPA from University of Colorado Denver where her focus was on Gender-Based Violence.





# Agenda Overview

- What is CalAIM and how did it start?
- Enhanced Care Management, Community Supports, & CHW
- The role of the 1115 Waiver
- H.R. 1: What's changing and what providers need to know
- How Medi-Cal Managed Care Plans (MCPs) interface with your practice
- First Steps: How to engage with CalAIM programs

# Understanding CalAIM: What is it?

CalAIM is a System of Care,  
not just a list of programs.

## CalAIM: California Advancing & Innovating Medi-Cal

- Why Transform Medi-cal?
  - Members often have complex health conditions
  - Multiple delivery systems can be complicated
  - High need = High Cost

Address CA's  
physical &  
mental health  
needs

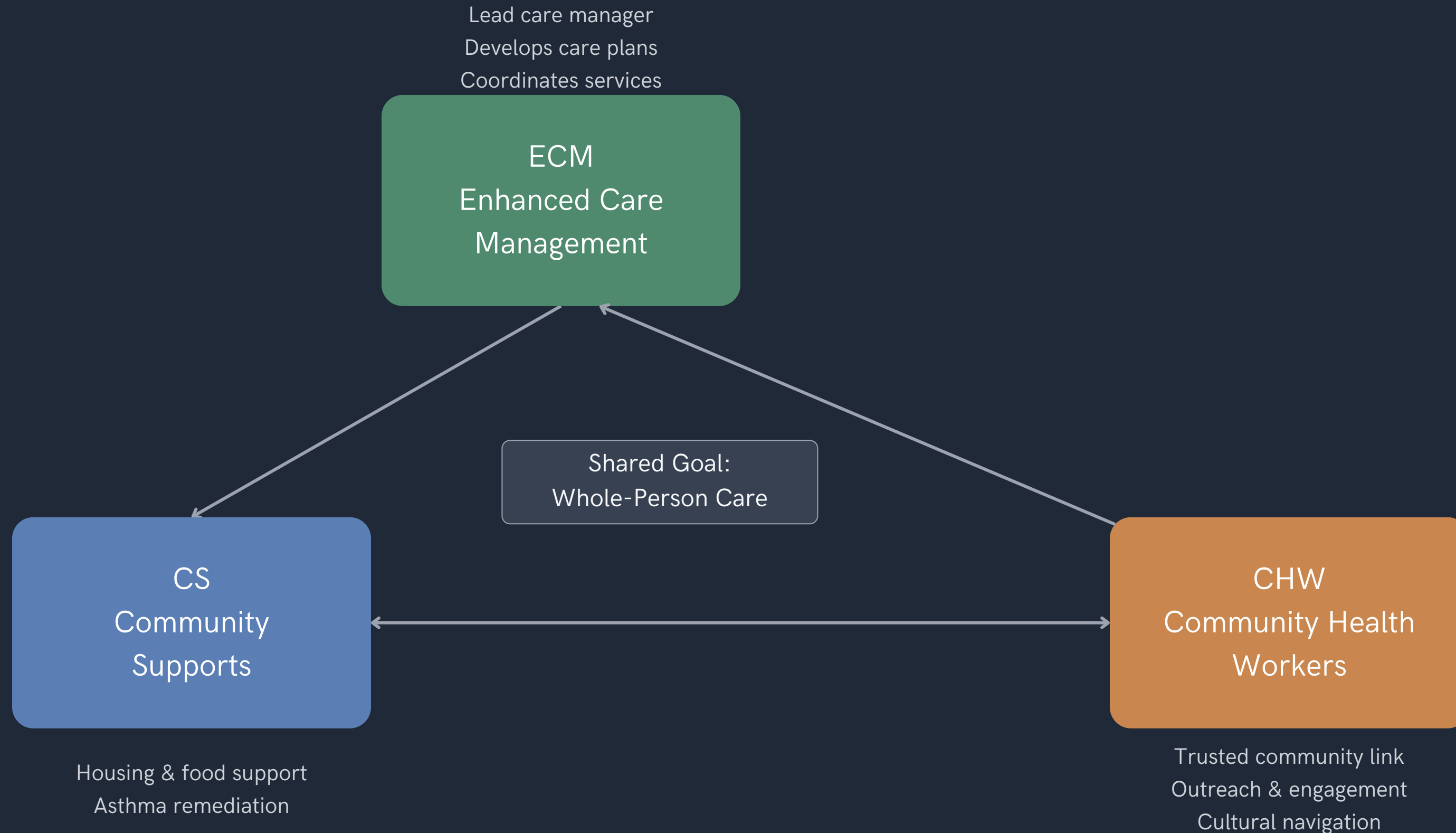
Improve &  
integrate care  
for  
Californians

Be a catalyst  
for equity &  
justice

Work together  
to build a  
healthier state

# ECM, CS & CHW Collaboration

How Enhanced Care Management, Community Supports, and Community Health Workers work together





# What Primary Care Needs to Know

- Your practice could be the entry point for screening and referring eligible patients
- You are NOT responsible for delivering services, though there are some your practice could deliver
- Your documentation and patient engagement creates the foundation for patient success

# Enhanced Care Management (ECM)



| ECM Populations of Focus |                                                                                                                                         | Adults | Children & Youth |
|--------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|--------|------------------|
| 1                        | Individuals Experiencing Homelessness                                                                                                   | ✓      | ✓                |
| 2                        | Individuals at Risk for Avoidable Hospitalization or ED Utilization                                                                     | ✓      | ✓                |
| 3                        | Individuals with Serious Mental Health and/or Substance Use Disorder Needs                                                              | ✓      | ✓                |
| 4                        | Individuals Transitioning from Incarceration                                                                                            | ✓      | ✓                |
| 5                        | Adults Living in the Community and At Risk for LTC Institutionalization                                                                 | ✓      |                  |
| 6                        | Adult Nursing Facility Residents Transitioning to the Community                                                                         | ✓      |                  |
| 7                        | Children & Youth Enrolled in CA Children's Services (CCS) or CCS Whole Child Model (WCM) with Additional Needs Beyond the CCS Condition |        | ✓                |
| 8                        | Children & Youth Involved in Child Welfare                                                                                              |        | ✓                |
| 9                        | Birth Equity Population of Focus                                                                                                        | ✓      | ✓                |

# Community Health Workers

- This service can be provided through an MCP or through Fee-for-Service
- Most Medi-Cal members qualify for the first 12 units without authorization
- CHWs can be part of the CalAIM continuum and refer for Community Supports or to and ECM provider if a higher level of care is needed.



Engagement with  
Underserved Communities



Screening & Assessments



Link to Community  
Resources



Health Navigation



# Community Supports

- Community Supports are services that address MCP Members' social drivers of health and help them avoid higher, costlier levels of care.
- DHCS has pre-approved 15 medically appropriate and cost-effective Community Supports that MCPs are strongly encouraged but not required to offer as substitutes for utilization of other services or settings.

## Pre-Approved DHCS Community Supports

- Housing Transition Navigation Services
- Housing Deposits
- Housing Tenancy and Sustaining Services
- Short-Term Post-Hospitalization Housing\*
- Recuperative Care (Medical Respite)\*
- Caregiver Respite Services
- Day Habilitation Programs
- Assisted Living Transitions
- Community or Home Transition Services
- Personal Care and Homemaker Services
- Environmental Accessibility Adaptations (Home Modifications)
- Medically-Tailored Meals or Medically-Supportive Foods
- Sobering Centers
- Asthma Remediation
- Transitional Rent\*\*

# How can my practice access CalAIM services for patients?



Providers & community referral partners identify individuals eligible for CalAIM services



Individuals & families can also access services through self-referrals



MCPs may also use member data to identify eligible individuals



Managed Care Plan

---

# The 1115 Demonstration Waiver & H.R. 1



# The 1115 Demonstration Waiver

- 1115 waivers is the mechanism in which states can receive Federal authorization allowing states to test new Medicaid delivery & payment models
- The current CalAIM waiver was approved by the Centers for Medicare & Medicaid Services (CMS) and expires December 31, 2026.
- A new 1115 waiver was submitted to CMS and will go into effect January 1, 2027.
- MOST CalAIM services will not be impacted by the current waiver expiring.



# H.R. 1 & Medi-Cal Eligibility Changes

Federal legislation affecting Medi-Cal eligibility & enrollment



Up to 1.4 million Medi-Cal members could lose coverage by June 2028

Work  
Requirements

6-Month  
Renewals

Immigration  
Restrictions

Cost Sharing

# H.R. 1 Implementation Timeline

## **Oct 1, 2026: Immigration Eligibility Narrowed**

Refugees, asylees, parolees move to restricted-scope

## **Jan 1, 2027: Work Reqs + 6-Month Renewals + UIS Transition**

80 hrs/month requirement; renewals every 6 months for expansion adults, UIS status individuals move to FFS

## **Jan 1, 2027: Retroactive Coverage Reduced**

Drops from 3 months to 1 month (expansion)/2 months (others)

## **Oct 1, 2028: Cost Sharing Begins**

Copays \$1-\$35 for expansion adults > 100% FPL

# Exemptions Your Patients May Qualify For



Medically Frail



Parents/Caregivers of child under 14



Recently Incarcerated (within 90 days)



In SUD Treatment



Enrolled in certain programs- HCBS, HCBA, etc



Veterans with 100% disability rating



Pregnant or Postpartum



Foster Youth under age 26



Students



Experiencing Short Term Hardship



American Indians/Alaska Natives/IHS members

---

# Medi-Cal in California



# Medi-Cal Options

| Feature              | Fee-For-Service (FFS) Medi-Cal                          | Managed Care Plan (MCP)                               |
|----------------------|---------------------------------------------------------|-------------------------------------------------------|
| How care is accessed | Patient can go to any Medi-Cal provider who accepts FFS | Patient uses the plan's network of providers          |
| Care coordination    | Benefits are usually not coordinated for patient        | The plan coordinates and manages patient's care       |
| Extra services       | NOT eligible for CalAIM, CHW eligible                   | Enhanced Care Management, Community Supports, CHW     |
| Network rules        | No health-plan network                                  | Network-based, with plan rules and provider directory |



---

# How can my practice connect to CalAIM services?



# Referral Pathways



# First Steps to Engage

## Step 1: Assess Your Current Status

- Does your practice accept both MCP and FFS plans?
- Do you have an approach in place to screen for complex needs/social barriers to health?

## Step 2: Connect with Your MCP(s)

- Connect to inquire about becoming an ECM provider
- Connect to get patient information on CalAIM
- Learn how to refer

## Step 3: Connect with Your Community

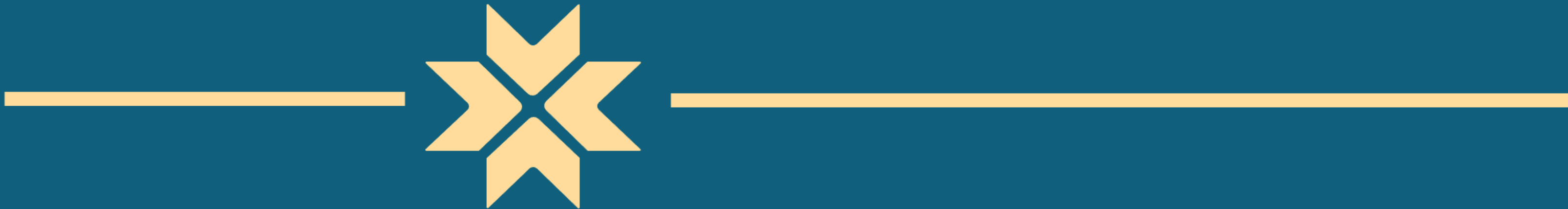
- Determine what local organizations are providing CalAIM services
- Set up a meeting to understand their workflows, populations they serve, and to create a direct referral pathway

# Questions?

- What do you want to know more about based on this content?
- What do you want to learn more about in the next webinar?



# Close & Next Steps





# Evaluation

Please fill out the evaluation.

Chose **Part 1** on  
**Thursday, August 13** as the  
date.

**When completing the  
evaluation, you will need to  
confirm that you would like to  
receive CECs and provide the  
necessary information to  
receive them.**

The link will be posted in  
the chat and shared in the  
follow up email.

Would you like Continuing Education Credits? \*

☒ Yes

☐ No

What type of CECs are you requesting? \*

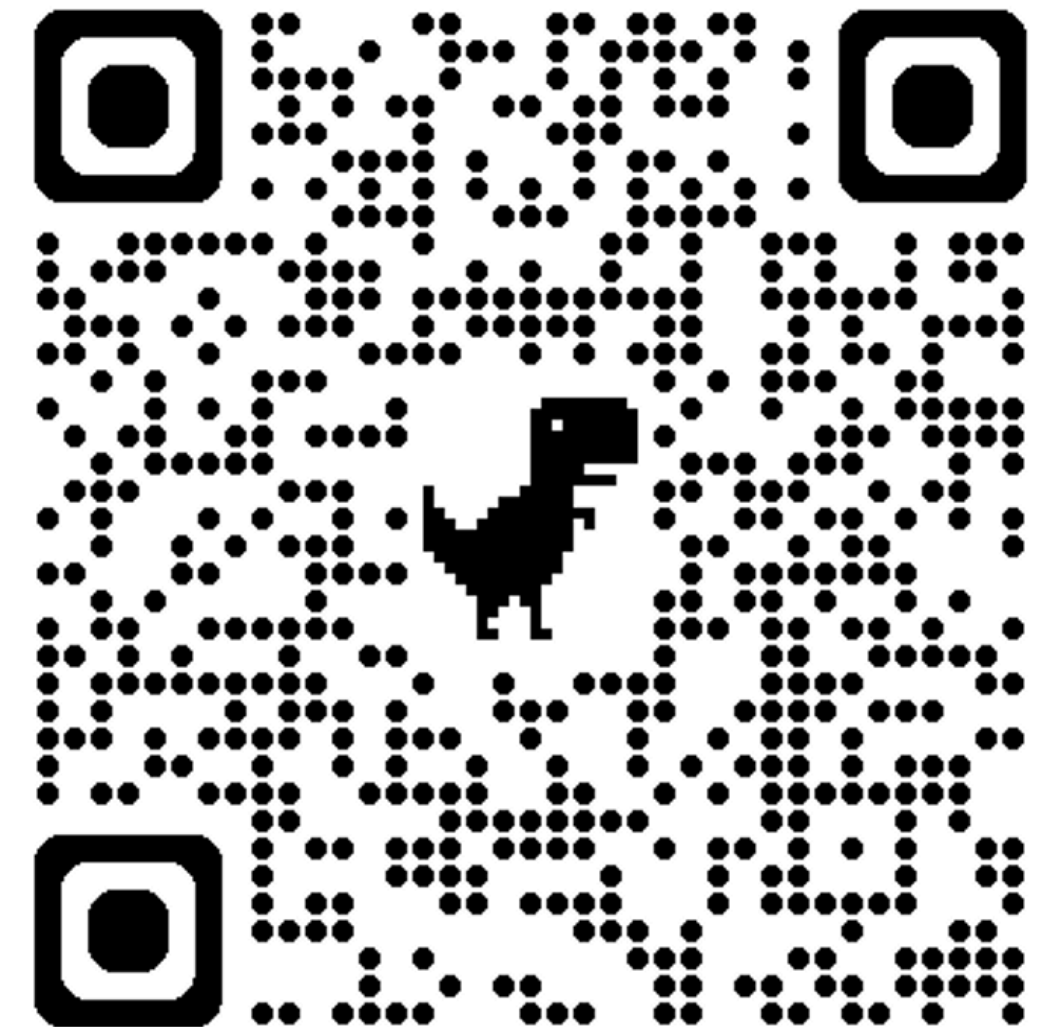
What is your license number? \*

First Name \*

Last Name \*

Email \*

Organization \*





# Key Reminders

01

## Interim Submission Window

The optional Interim Submission Window for BH & HRSN deliverables is now open in the portal and will remain active through August 31. Submitting early allows your practice to receive, direct non-binding feedback before the formal fall deadline.

02

## One-on-One Coaching

30-minute 1:1 coaching sessions, available for BH, HRSN and VBP only, run now through September. It can be tailored to whatever your practice needs most, refining a workflow, getting feedback on a deliverable draft, or troubleshooting an operational hurdle.

03

## Office Hours

Our August Office Hours session on **August 25 has been canceled**. For tailored support with your BH, HRSN, or VBP deliverables, please book a 1:1 coaching session.

04

## Final Learning Community

Please register for our Final Learning Community Part 1 & Part 2

### Part 1 (select one)

- Session A: Tuesday, September 29 | 3:00 – 5:00PM
- Session B: Thursday, October 1 | 11:00 – 1:00PM

### Part 2 (select one)

- Session A: Tuesday, October 6 | 3:00 – 5:00PM
- Session B: Thursday, October 8 | 11:00 – 1:00PM

# Connecting Patients to Services: Referral Pathways & Community Based Partnerships

## Part 2A: For FQHCs

**Thursday, August 18 | 12:00 – 1:00PM**

Practical, actionable guidance on navigating referral pathways and building CBO partnerships under CalAIM, tailored for FQHCs and practices with existing organizational infrastructure and MCP relationships.

This session focuses on operationalizing referral workflows and formalizing community partnerships at scale.

## Part 2B: For SIPs

**Thursday, August 27 | 12:00 – 1:00PM**

Covering the same core topic as Part 2A, this session is tailored to solo and independent practices – with a focus on lower-lift entry points and practical tools for teams with limited administrative capacity, smaller patient panels, and fewer existing MCP relationships.

# Resources

- [DHCS CalAIM Website](#)
- [DHCS CalAIM Resources Website](#) (where to find updated policy guides)
- [DHCS ECM Policy Guide](#)- Updated January 2026
- [DHCS CHW Website](#)
- [DHCS Community Supports Volume 1 & Volume 2](#)- Updated April 2025
- [CDSS MCP CalAIM Referral Pages](#)
- [1115 Waiver Information](#)
- [H.R. 1 Language](#)
- [DHCS H.R. 1 Implementation Fact Sheet](#)
- [DHCS MCP Directory](#)
- [DHCS Community Supports- MCP Elections](#)- Updated June 2026