

Tri-Counties CalAIM PATH Collaborative

March 20, 2024

Welcome!

Please introduce yourself using Chat.

- Name
- Organization
- Your role in CalAIM implementation

March Collaborative Agenda

Topic	Time
Welcome and Introductions	5
Recuperative Care Deep Dive <ul style="list-style-type: none">• New DHCS Resource on Homelessness Services• National Health Foundation Presentation• CAPSLO Presentation	30
Breakout Rooms: MCP Updates <ul style="list-style-type: none">• Room 1: Santa Barbara and San Luis Obispo• Room 2: Ventura	15
Updates, Announcements, and Closing	10
Optional Office Hours	45

2024 Aim Statement and Drivers

The Collaborative will increase the number of members referred to ECM and Community Supports, and the number of those successfully enrolled in and utilizing services.

Build education and awareness of CalAIM among members, providers, and community partners

Strengthen the provider network to serve all Populations of Focus

Increase ECM & Community Supports referrals and care coordination among providers

March Spotlight: Recuperative Care

DHCS Spotlight on Individuals and Families Experiencing Homelessness

Highlights:

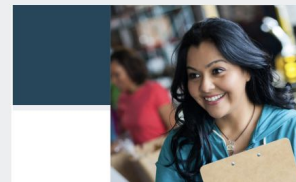
- ECM delivery strategies
- Approaches to outreach and engagement
- Example cases/vignettes

Access the resource [here](#)

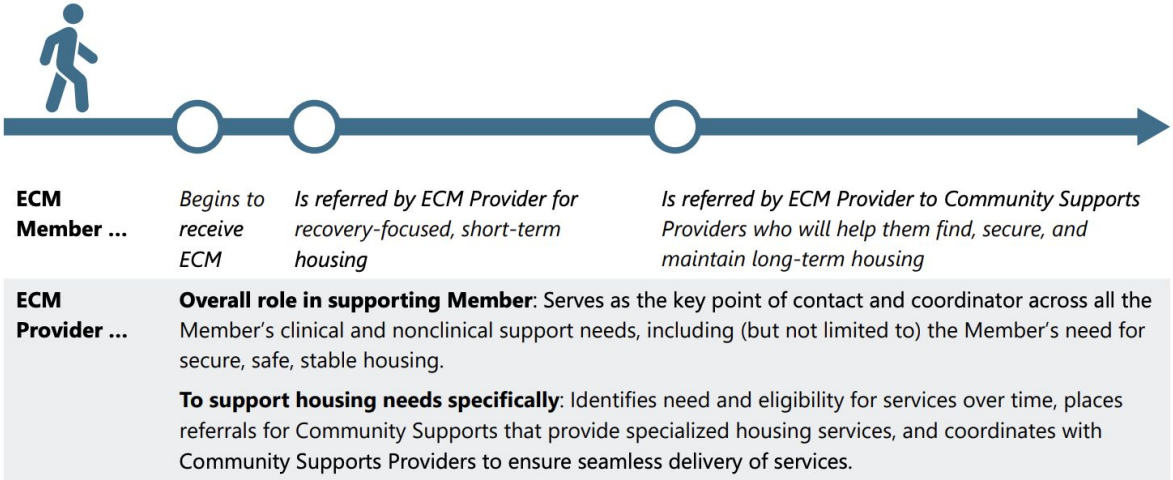
Outreach and Engagement for Individuals Experiencing Homelessness

Outreach is an essential—and complex—part of delivering ECM for the Individuals and Families Experiencing Homelessness POF. In order to successfully engage Members in the benefit, ECM Providers must engage with Members in their communities, which can include shelters and public spaces and may be complicated by frequent relocation.

ECM outreach teams may include community health workers (CHWs) and other staff with lived experience of homelessness and/or housing instability, especially for staff supporting field-based outreach and engagement. Moreover, street medicine providers and homeless navigation centers may be well-positioned to conduct outreach and engage with Members who are experiencing



This visual is intended to illustrate how ECM and six housing-focused Community Supports can work in concert to support a Member experiencing homelessness. Members' specific needs will vary, and the availability of specific Community Supports services varies by MCP and county.



Community Supports Provider ...

Recuperative Care

Provides interim housing, bed, meals, and ongoing monitoring of medical or behavioral health conditions.

Day Habilitation


Provides programmatic support to assist with socialization and adaptive skills.

Short-Term Post Hospitalization Housing

Provides interim housing and ongoing support needed to support recovery and recuperation.

DHCS

Resource: Individuals Experiencing Homelessness



“Housing Trio”

Housing Transition Navigation Services
Conducts a housing assessment and develops an individualized housing support plan for the Member. Presents housing options to the Member and helps coordinate financial support for security deposits and modifications.

Housing Deposits
Provides funds to establish household and assistance in spending those funds (e.g., deposits, utilities, air conditioner).

Housing Tenancy and Sustaining Services
Provides support with maintaining housing once secured (e.g., identifying and addressing hoarding and other lease violations, education, dispute resolution).

Recuperative Care (Medical Respite)

Members with unstable housing who no longer require hospitalization, but still need to heal from an injury or illness, receive short-term residential care. The residential care includes housing, meals, ongoing monitoring of the member's condition, and other services like coordination of transportation to appointments.

National Health Foundation (NHF) Recuperative Care Provider

Community Action Partnership of San Luis Obispo County (CAPSLO) Recuperative Care Provider

CAPSLO Recuperative Care



<https://capslo.org/40-prado/>

Recuperative Care Program

40 Prado provides 6 to 10 beds, for 24-hour per day Recuperative Care Program that provides a safe place to recuperate and convalesce for individuals who would otherwise be discharged to the streets. In addition to providing emergency shelter beds 24 hours a day – 7 days a week, the program also provides around the clock staffing, case management, and is staffed by an RN who helps coordinate appropriate follow-up care and ensures that discharge plans are followed and adjusted as needed. Clients are referred to the program by the discharging hospital or a skilled nursing facility only.

Discussion

Breakout Rooms: MCP Updates

- 1) Santa Barbara and San Luis Obispo**
- 2) Ventura**

Events and Announcements

Upcoming TA Marketplace Vendor Fairs



Hosted by DHCS, virtual vendor fairs feature approved vendors in specific TA Marketplace domains so you can learn more about their services

Domain 5: Promoting Health Equity; and

Domain 6: Supporting Cross-Sector Partnerships

April 25, 9 -10:30 a.m.

[Advance registration is required](#)

2024 Collaborative Schedule

May

Ventura In-Person:

SB/SLO in-person:

June

Full Collaborative

June 26 TIME ZOOM

**Full Collaboratives
(Virtual)**

**County-Specific
Working Groups
(Virtual)**

**County-Specific
In-Person Meetings**

Thank you!
Questions or suggestions?
pathinfo@bluepathhealth.com



Office Hours



Appendix

2024 Collaborative Aim Statement

The Collaborative will increase the number of members referred to ECM and Community Supports, and the number of those successfully enrolled in and utilizing services.

- **Measurement 1: Increased number of total referrals by 15% compared with 2023**
- **Measurement 2: Maintaining at least 25% enrollment rate**

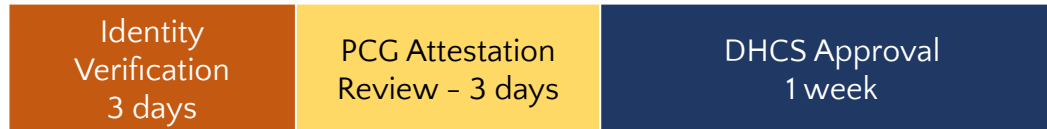
TA Marketplace Application Review Timeline

Two thick, wavy lines in shades of blue and teal sweep across the lower half of the slide, creating a modern, flowing design element.

Timeliness of Application Review

Recipient Eligibility Applications

Average review time was under 2 weeks, which was primarily dependent on the receipt of identity verification data and the quality of attestations submitted. Where an organization submitted a blank or incorrect attestation, the timeline from submission to approval was significantly longer.



Project Eligibility Applications

Average review by PCG staff was 5 business days, followed by 5 business days to receive DHCS approval. This process proceeded quickly for most applicants, as the majority of requests were for Off-the-Shelf projects, for which the project goals are clearly defined and outlined. Projects with longer reviews at the PEA step of the process were due to unclear goals or applications that contained requests for multiple disparate projects.



Timeliness of Application Review (cont.)

Scopes of Work and Budgets (standard review)

Average review by PCG staff was 5 business days, followed by 5 business days to receive DHCS approval. This process proceeded quickly for most applicants, as the majority of requests were for Off-the-Shelf projects, for which the review is expedited, as project goals are clearly defined and outlined.



Scopes of Work (SOW) and Budgets (heightened scrutiny)

SOW and Budgets may be flagged for heightened scrutiny by the DHCS Team, if concerns are raised at the PEA stage, if there is a concern about duplication of funding from CITED or another grant, or if the project will produce member facing materials.

TA Marketplace Resources

- For technical support or questions, please email ta-marketplace@ca-path.com
- [PATH TPA Website](#)
- [DHCS CalAIM PATH Webpage](#)