California Advancing and Innovating Medi-Cal (CalAIM)
Community Supports for Social Drivers of Health

The Issue

- Medi-Cal enrollees with complex health needs and unmet social needs are at high risk of hospitalization, institutionalization, and other higher cost services.

- People experiencing homelessness have higher rates of diabetes, hypertension, HIV, and mortality resulting in longer hospital stays and higher readmission rates than the general public.

- About 20 percent of Californians are food insecure. California spends approximately $7.2 billion annually on health care associated with food insecurity.

- More than 65 percent of Medi-Cal enrollees are from communities of color. Addressing social drivers of health is key to advancing health equity and helping people with high health care and social needs.

A key focus of CalAIM is addressing the challenges facing people with complex and unmet needs. One of the main tools for achieving that is Community Supports.

Faces of CalAIM: Meet Jackie

Jackie has diabetes and had a foot amputated. While recuperating in the hospital, Jackie was scared she wouldn’t be able to manage living alone in her townhouse. In CalAIM’s Community Supports services, Jackie’s Enhanced Care Manager will work with a Community Supports navigator to help arrange home improvements like a ramp to her front door, and grab bars in areas like the bathroom, so she can live independently despite her new limited mobility. CalAIM will help Jackie live a full and dignified life.
Key CalAIM Initiatives to Advance Community Supports for Social Drivers of Health

Community Supports are new statewide services provided by Medi-Cal managed care plans as cost-effective alternatives to traditional medical services or settings. Community Supports are designed to address social drivers of health (factors in people's lives that influence their health). These services are building on and scaling existing work in the Whole Person Care Pilots, the Health Homes Program, and Home and Community Based Service Waivers. All Medi-Cal managed care plans are encouraged to offer as many of the following 14 Community Supports as possible:

- Housing Transition Navigation Services
- Housing Deposits
- Housing Tenancy and Sustaining Services
- Short-Term Post-Hospitalization Housing
- Recuperative Care (Medical Respite)
- Day Habilitation Programs
- Caregiver Respite Services
- Nursing Facility Transition/Diversion to Assisted Living Facilities
- Community Transition Services/Nursing Facility Transition to a Home
- Personal Care and Homemaker Services
- Environmental Accessibility Adaptations (Home Modifications)
- Medically Supportive Food/Meals/Medically Tailored Meals
- Sobering Centers
- Asthma Remediation

Positive Impact of CalAIM's Community Supports

Statewide implementation of proven whole person health benefits and services.
Approximately 40,000 enrollees will transition into Community Supports from existing Whole Person Care Pilots and the Health Homes Program. Statewide, many high-need, complex populations will also gain access to these important services.

Improve whole person health for Medi-Cal enrollees.
- Safe and stable housing for homeless individuals can reduce health care utilization and costs, as can short-term supports that provide a safe and stable environment where individuals can recover upon discharge from a hospital.
- Los Angeles County saw a 71 percent reduction in hospital readmissions and 24 percent reduction in emergency department visits from the use of a psychiatric recuperative care service.
- Delivering meals to individuals recently discharged from a hospital or suffering from chronic conditions can reduce the need for emergency department visits, hospitalizations, and readmissions.
- A California pilot program that provided medically tailored meals to individuals with Type 2 diabetes, HIV, and comorbidities realized a 58 percent reduction in emergency department visits.
- Home modifications, adaptations, and remediation can support individuals in maintaining or improving their health and reduce emergency department visits and inpatient stays.
- A study of asthma remediation services for households with children with asthma-related hospitalizations or emergency department visits in the prior year showed an 85 percent reduction.