California Advancing and Innovating Medi-Cal (CalAIM) Milestones Calendar as of February 2022

CONTEXT:

California Advancing and Innovating Medi-Cal, or CalAIM, is a transformational plan to modernize the State's Medicaid program. It will improve the quality of life and health outcomes of Medi-Cal enrollees, including those with the most complex health and social needs. CalAIM includes a series of far-reaching initiatives that together represent broad reforms of Medi-Cal's programs and systems. The Department of Health Care Services (DHCS) is implementing CalAIM in partnership with Medi-Cal providers, Managed Care Plans (MCPs), Counties, Community-Based Organizations and other stakeholders. These changes will span a multi-year period, with the first reforms already underway effective January 1, 2022 and subsequent reforms to be phased in through 2027.[1]

This CalAIM Milestones Calendar is a dynamic document that reflects DHCS' expected timing of upcoming milestones through the second quarter of 2022 for CalAIM and key related initiatives. In some instances, program launch dates are contingent upon timely Centers for Medicare and Medicaid Services (CMS) approval. Because dates may shift as policies are finalized, the document will be updated regularly to reflect any changes. Stakeholders are encouraged to check the DHCS CalAIM website for updates to ensure access to the most up-to-date information.

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[1] See resources on the DHCS CalAIM Webpage and the Section 1115 Demonstration Application and 1915(b) Waiver Webpage for additional details.

CalAIM Milestone Calendar as of February 2022

To support stakeholders in their planning, this schedule is a dynamic document that reflects DHCS expected timing of upcoming milestones. Because these milestones may shift, the document will be updated regularly to reflect any changes. CalAIM Initiatives for which no major milestones are currently expected before Q2 2022 have been excluded from the table.

KEY: * = Document Release; ^ = Submission Deadline; + = Program or Advisory Group Launch

Initiatives[2]	CalAIM Major Milestones					
	Q1 2022			Q2 2022		
	January	February	March	April	May	June
Cross-Initiative Milestones[3]	• 1115 Demonstration and 1915(b) Waiver effective date+ (January 1)	• Final Managed Care Plan (MCP) Request for Proposals (RFP) for 2024 implementation year*	--	• MCP proposals for 2024 implementation year due^	--	--
Population Health Initiatives						
Population Health Management (including Service)	--	--	• 2023 PHM Update and PHM Advisory Group Launch+	• PHM Strategy & Roadmap Document+ 4	• Draft Guidance on 2023 PHM Program Requirements* • Request for Applications (RFA) for PHM Service Vendor released+5	--

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Enhanced Care Management (ECM)/ Community Supports	• Statewide launch of Community Supports[+] • ECM goes live in Whole Person Care (WPC) Pilot Counties for select Populations of Focus[6] • ECM goes live in Health Home Program (HHP) Counties for select ECM Populations of Focus[+7]	• WPC/HHP Counties: Updates to ECM/Community Supports Model of Care (MOC) Submissions due from MCPs^ • Non–WPC/HHP Counties: MOC Parts 1 and 2 for select ECM Populations of Focus due from MCPs^	--	• Non–WPC/HHP Counties: MOC Part 3 for select ECM Populations of Focus due from MCPs^	• One–time WPC/HHP Transition Report due from MCPs^ • First Quarterly Implementation Report due from MCPs^	• Updated ECM Policy Guide with guidance on Populations of Focus going live in 2023*
Incentive Payments	• Program Year 1 goes live[+]	--	--	• First incentive payments issued[+]	--	--

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[6] See ECM Key Design Implementation Decisions document for additional details.

[7] *Ibid.*

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Managed Care Initiatives						
Benefits Standardization	• Major Organ Transplant (MOT) Carve-In goes live+ • Multipurpose Senior Services Program (MSSP) Carve-Out goes live+	--	--	• MCP Ongoing Post Transition Monitoring Data Due^	• Final revised CalAIM Benefit Standardization All Plan Letter (APL) 21-015*	--
Mandatory Managed Care Enrollment (MMCE)	• Mandatory managed care enrollment goes live for Phase 1 populations+8 • Mandatory fee-for-service enrollment goes live for select Phase 1 populations+9	--	--	--	• Final revised CalAIM MMCE APL 21-015*	--

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[8] See Approved Section 1915(b) Waiver, Attachment II

[9] *Ibid.*

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Regional Capitation Rates and Shared Savings/Risk	• Regional Capitation Rates: Phase 1 Regional Rate Setting Methodology and Calendar Year (CY) 2022 Rates Go Live in Phase 1 counties+	--	--	--	--	--
Behavioral Health Initiatives						
SMI/SED IMD Waiver	--	--	--	--	• Concept paper on SMI/SED demonstration approach*	--
Behavioral Health Payment Reform	--	--	• Behavioral Health Information Notice on billing and coding transition*	--	--	--

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Specialty Mental Health Services – Criteria for Services	• Criteria for Specialty Mental Health Services (SMHS) Go Live+	--	--	--	--	--
Behavioral Health No Wrong Door	--	• Information Notice re: no wrong door and co-occurring treatment*	--	--	--	--
Behavioral Health Documentation Redesign	--	--	• Information Notice re: provider documentation requirements* • Updated reasons for recoupment released*	--	--	--

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Contingency Management (CM)	• RFA for DMC-ODS counties* • Contingency Management Pilot Policy Design Paper released*	--	• RFA for incentive manager vendors*	--	• Launch CM trainings with participating DMC-ODS counties and provider organizations	--
Drug Medi-Cal Organized Delivery System (DMC-ODS) Renewal and Policy Improvements	• Information Notice re: DMC-ODS*[10] • DMC-ODS renewal and policy improvements (2022-2026) go live+ • American Society of Addiction Medicine (ASAM) level of care determination guidance released*	--	--	--	--	--

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[10] Information Notice includes updates to DMC-ODS services (i.e., revise the definition of residential treatment; expansion of types of clinicians who can provide and claim for Clinician Consultation Services (formerly Physician Consultation Services); includes the new DMC-ODS criteria (per AB 133); and provides information and clarification regarding requirements for DMC-ODS services.

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Long-Term Care (LTC)/Managed Long-Term Services and Supports (MLTSS)/Duals Initiatives						
Transition to Statewide MLTSS and D-SNP (CCI ends)	• Release Dual Eligible Special Needs Plan (D-SNP) Policy Guide (Introduction and Chapter 1 – Care Coordination)* • Launch Plan Technical Assistance Calls+	--	• Draft State Medicaid Agency Contract (SMAC) to Plans, Sister Agencies, and Key Stakeholders*	--	--	• Publish Cal MediConnect draft phase-out plan for 30-day public comment period* • Release SMAC to DSNPs for signature*
County Initiatives						
County CCS Oversight	• Establish stakeholder workgroup to inform development of county California Children's Services (CCS) Memorandum of Understanding	--	--	--	--	--

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Other Initiatives						
Dental (new benefits and P4P)	• Dental policy goes live+[11]	--	--	--	--	--
Providing Access and Supporting Health (PATH) Funds (ECM, Community Supports, Justice-Involved)	--	• Guidance documents for WPC Services and Transition to Managed Care Mitigation*	• Registration period opens for Former WPC Lead Entities for WPC Services and Transition to Managed Care Mitigation Initiative^	--	• Guidance documents for PATH Technical Assistance Marketplace, Collaborative Planning and Implementation, and Capacity and Infrastructure Transition, Expansion, and Development Initiatives*	--

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[11] Includes new dental benefits (including a caries risk assessment bundle for young children and Silver Diamine Fluoride for children and certain high-risk and/or institutional populations) and pay-for-performance initiatives statewide to reward preventive services and continuity of care.