

# Enhanced Care Management (ECM) Implementation Timeline & Updated Populations of Focus

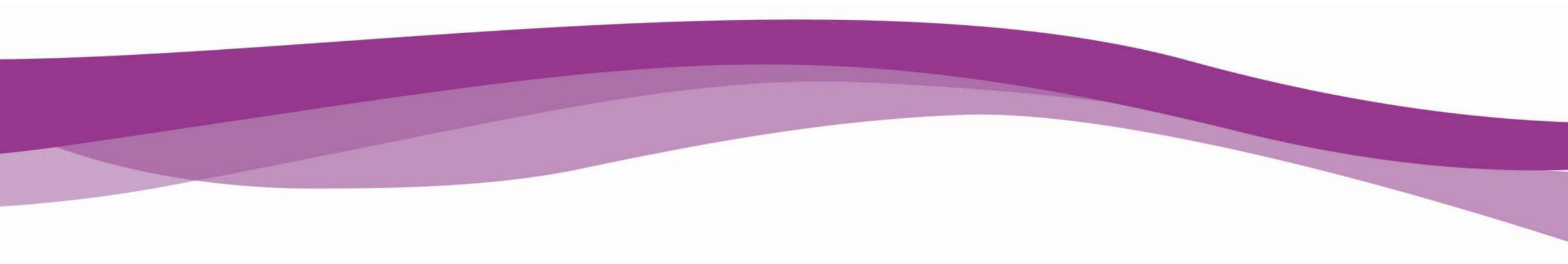
*Updated December 2022*



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# ECM Overview & Context

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# ECM Overview

- » **ECM is part of a broader Population Health Management (PHM) Program** within CalAIM, under which managed care plans (MCPs) systematically risk-stratify their enrolled populations and offer a menu of care management interventions at different levels of intensity, with ECM at the highest intensity level.
  - The combination of ECM and Community Supports represents an opportunity for MCPs to work with Providers, counties, and community-based organizations (CBOs) to deliver a strong set of integrated supports for those who need them most.
  - For more information on the PHM Program, visit [DHCS' PHM webpage](#).
  
- » **This slide deck summarizes the timeline and Populations of Focus in the ECM Policy Guide** (see [DHCS' ECM webpage](#)).
  - The ECM Policy Guide is intended to serve as a resource for MCPs administering ECM, as well as for other key stakeholders involved in ECM, including Providers, counties, and CBOs.
  - Updates will be published on [DHCS' ECM webpage](#), where stakeholders can also find other resources, including [FAQs](#).

# CalAIM Care Management Continuum

MCPs are required to have a broad range of programs and services to meet the needs of all Members organized into the following three areas, at different levels of intensity.



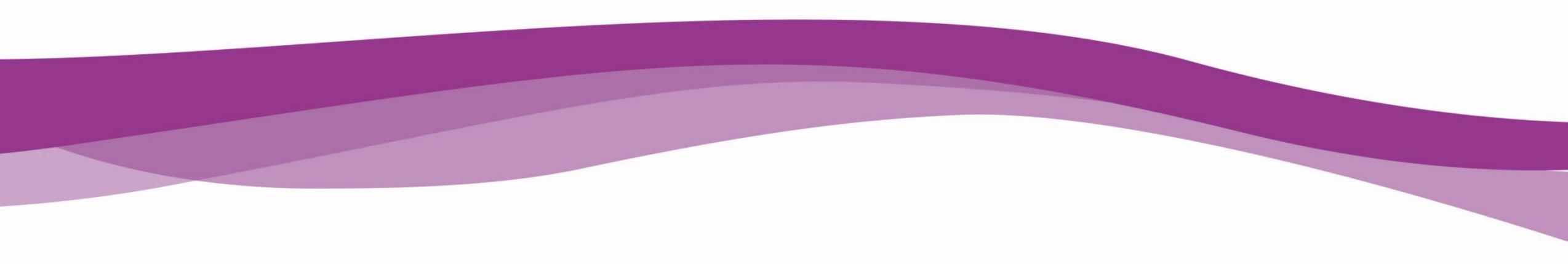
**Enhanced Care Management (ECM)** is for the **highest-need Members** and provides intensive coordination of health and health-related services.

**Complex Care Management (CCM)** is for Members at **higher- and medium-rising risk** and provides ongoing chronic care coordination, interventions for temporary needs, and disease-specific management interventions.

**Basic Population Health Management (BPHM).** BPHM is the array of programs and services for **all** MCP Members, including care coordination and comprehensive wellness and prevention programs, all of which require a strong connection to primary care.

**Transitional Care Services** are also available for all MCP Members transferring from one setting or level of care to another.

# ECM Implementation Timeline

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**Note:** MCPs may begin offering ECM to Populations of Focus earlier than the indicated start dates on the following slides; however, rates will not be adjusted to reflect these Populations of Focus until the indicated start dates.

# ECM Implementation Timeline:

## Former Whole Person Care (WPC) Pilot Counties

<b>Jan 1, 2022</b>	<ul style="list-style-type: none"><li>» Transition and automatically authorize all Members enrolled in a WPC Pilot who are identified by the WPC Lead Entity as belonging to a Population of Focus (includes children/youth served by WPC);</li><li>» ECM goes live for the following ECM Populations of Focus:<ul style="list-style-type: none"><li>▪ Adults and Their Families Experiencing Homelessness;</li><li>▪ Adults At Risk for Avoidable Hospital or Emergency Department (ED) Utilization;</li><li>▪ Adults with Serious Mental Health and/or Substance Use Disorder (SUD) Needs;</li><li>▪ Individuals Transitioning from Incarceration (some WPC counties);</li><li>▪ Adults with Intellectual or Developmental Disabilities (I/DD);</li><li>▪ Adults who are Pregnant or Postpartum.</li></ul></li></ul>
<b>Jan 1, 2023</b>	<ul style="list-style-type: none"><li>» ECM goes live for the following ECM Populations of Focus:<ul style="list-style-type: none"><li>▪ Adults Living in the Community and At Risk for Long Term Care (LTC) Institutionalization;</li><li>▪ Adult Nursing Facility Residents Transitioning to the Community.</li></ul></li></ul>
<b>Jul 1, 2023</b>	<ul style="list-style-type: none"><li>» ECM goes live for the following ECM Populations of Focus:<ul style="list-style-type: none"><li>▪ Adults without Dependent Children/Youth Living with Them Experiencing Homelessness;</li><li>▪ Children &amp; Youth Populations of Focus.</li></ul></li></ul>
<b>Jan 1, 2024</b>	<ul style="list-style-type: none"><li>» ECM goes live for the following ECM Populations of Focus:<ul style="list-style-type: none"><li>▪ Birth Equity Population of Focus;</li><li>▪ Individuals Transitioning from Incarceration (<i>statewide, inclusive of the former WPC counties that already went live on January 1, 2022</i>).</li></ul></li></ul>

# ECM Implementation Timeline:

## Former Health Home Program (HHP) Counties

Jan 1, 2022

- » Transition and automatically authorize ECM for all Members of ECM Populations of Focus who are enrolled in or are in the process of being enrolled in HHP (includes children/youth served by HHP);
- » ECM goes live for the following ECM Populations of Focus:
  - Adults and Their Families Experiencing Homelessness;
  - Adults At Risk of Avoidable Hospital or ED Utilization;
  - Adults with Serious Mental Health and/or SUD Needs;
  - Adults with I/DD;
  - Adults who are Pregnant or Postpartum.

Jan 1, 2023

- » ECM goes live for the following ECM Populations of Focus:
  - Adults Living in the Community and At Risk for LTC Institutionalization;
  - Adult Nursing Facility Residents Transitioning to the Community.

Jul 1, 2023

- » ECM goes live for the following ECM Populations of Focus:
  - Adults without Dependent Children/Youth Living with Them Experiencing Homelessness;
  - Children & Youth Populations of Focus.

Jan 1, 2024

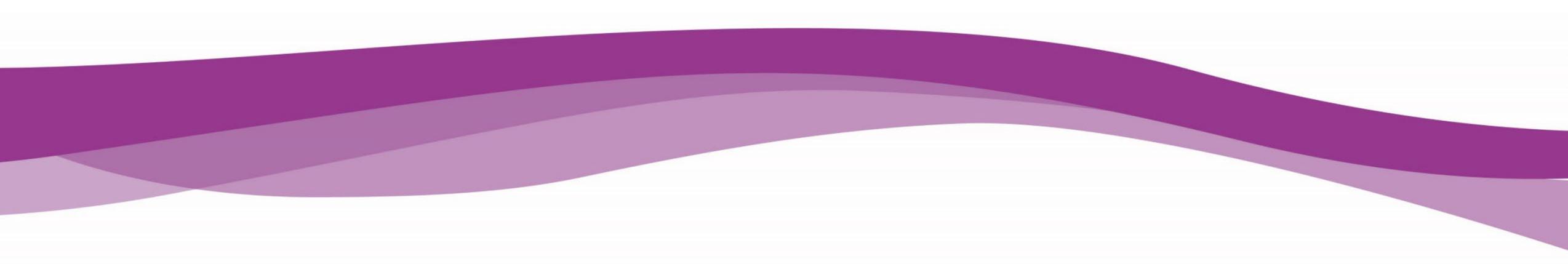
- » ECM goes live for the following ECM Populations of Focus:
  - Birth Equity Population of Focus;
  - Individuals Transitioning from Incarceration (*statewide, inclusive of the former WPC counties that already went live on January 1, 2022*).

# ECM Implementation Timeline:

## Counties with Neither WPC or HHP

<b>Jul 1, 2022</b>	<ul style="list-style-type: none"><li>» ECM goes live for the following ECM Populations of Focus:<ul style="list-style-type: none"><li>▪ Adults and Their Families Experiencing Homelessness;</li><li>▪ Adults At Risk of Avoidable Hospital or ED Utilization;</li><li>▪ Adults with Serious Mental Health and/or SUD Needs;</li><li>▪ Adults with I/DD;</li><li>▪ Adults who are Pregnant or Postpartum.</li></ul></li></ul>
<b>Jan 1, 2023</b>	<ul style="list-style-type: none"><li>» ECM goes live for the following ECM Populations of Focus:<ul style="list-style-type: none"><li>▪ Adults Living in the Community and At Risk for LTC Institutionalization;</li><li>▪ Adult Nursing Facility Residents Transitioning to the Community.</li></ul></li></ul>
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# Updated ECM Populations of Focus



# ECM Populations of Focus

ECM Population of Focus (POFs)	Adults	Children & Youth
 1 Individuals Experiencing Homelessness	✓	✓
 2 Individuals At Risk for Avoidable Hospital or ED Utilization (Formerly "High Utilizers")	✓	✓
 3 Individuals with Serious Mental Health and/or SUD 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 and Youth Enrolled in California Children's Services (CCS) or CCS Whole Child Model (WCM) with Additional Needs Beyond the CCS Condition		✓
 8 Children and Youth Involved in Child Welfare		✓
 9 Individuals with I/DD	✓	✓
 10 Pregnant and Postpartum Individuals; Birth Equity Population of Focus	✓	✓

# Definition of Adults and Children & Youth

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- » In the Populations of Focus definitions, “**adult**” is defined as an individual who is 21 years of age or older, and a “**child or youth**” is defined as an individual under 21. Consequently, the Children and Youth-specific definitions for ECM apply up to age 21, with limited exceptions as called out in following slides.
- » When a Member under 21 is served in ECM and does meet adult ECM criteria upon turning 21, the Member should not be disenrolled from ECM; rather, the ECM Provider and MCP should apply the MCP’s usual, DHCS-approved “graduation” criteria to determine when the Member is ready to disenroll.

# ECM Population of Focus #1: Individuals Experiencing Homelessness



## » **Adults and their families who:**

1. Are experiencing homelessness, defined as meeting one or more of the following conditions:
  - i. Lacking a fixed, regular, and adequate nighttime residence;
  - ii. Having a primary residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground;
  - iii. Living in a supervised publicly or privately operated shelter, designed to provide temporary living arrangements (including hotels and motels paid for by federal, state, or local government programs for low-income individuals or by charitable organizations, congregate shelters, and transitional housing);
  - iv. Exiting an institution into homelessness (regardless of length of stay in the institution);
  - v. Will imminently lose housing in the next 30 days;
  - vi. Fleeing domestic violence, dating violence, sexual assault, stalking, and other dangerous, traumatic, or life-threatening conditions relating to such violence;**and**
2. Have at least one complex physical, behavioral, or developmental health need with inability to successfully self-manage, for whom coordination of services would likely result in improved health outcomes **and/or** decreased utilization of high-cost services.

These eligibility criteria in effect from January 2022 until the launch of ECM for Children & Youth on July 1, 2023.

# ECM Population of Focus #1: *NEW* Individuals Experiencing Homelessness



## (a) **Adults without Dependent Children/Youth Living with Them** who:

1. Are experiencing homelessness, defined as meeting one or more of the following conditions:
  - i. Lacking a fixed, regular, and adequate nighttime residence;
  - ii. Having a primary residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground;
  - iii. Living in a supervised publicly or privately operated shelter, designed to provide temporary living arrangements (including hotels and motels paid for by federal, state, or local government programs for low-income individuals or by charitable organizations, congregate shelters, and transitional housing);
  - iv. Exiting an institution into homelessness (regardless of length of stay in the institution);
  - v. Will imminently lose housing in the next 30 days;
  - vi. Fleeing domestic violence, dating violence, sexual assault, stalking, and other dangerous, traumatic, or life-threatening conditions relating to such violence;**and**
2. Have at least one complex physical, behavioral, or developmental health need with inability to successfully self-manage, for whom coordination of services would likely result in improved health outcomes **and/or** decreased utilization of high-cost services.

These eligibility criteria are the same as the criteria on the last slide.

From the date of launch of ECM for Children & Youth (July 1, 2023), these criteria apply to adults without dependent children or youth living with them. Revised criteria for children, youth and families are on the next slide.

# ECM Population of Focus #1: *NEW* Individuals Experiencing Homelessness



## **(b) Homeless families or Unaccompanied Children/Youth Experiencing Homelessness who:**

1. Are experiencing homelessness, as defined above in (a) (*see prior slide*) under the modified HHS 42 CFR Section 11302 "Homeless" definition; **or**
2. Are sharing the housing of other persons (i.e., couch surfing) due to loss of housing, economic hardship, or a similar reason; are living in motels, hotels, trailer parks, or camping grounds due to the lack of alternative adequate accommodations; are living in emergency or transitional shelters; or are abandoned in hospitals (in hospital without a safe place to be discharged to).

### **Notes on the Definition:**

- » Children, youth, and families do **not** need to meet the additional "complex physical, behavioral, or developmental need" criteria noted above in Clause (2) for adults in (a) (*see prior slide*).
- » Clause 2 for children, youth, and families in (b) is modified from the 45 CFR 11434a [McKinney-Vento Homeless Assistance Act](#) and is included in this POF to ensure ECM captures the breadth of unsafe, substandard, and insecure living conditions that Members, particularly children and youth, may experience.

# ECM Population of Focus #2:

## Individuals At Risk for Avoidable Hospital or ED Utilization



### (a) Adults who meet one or more of the following conditions:

1. **Five or more** emergency room visits in a **six-month** period that could have been avoided with appropriate outpatient care or improved treatment adherence;
2. **Three or more** unplanned hospital and/or short-term skilled nursing facility (SNF) stays in a **six-month** period that could have been avoided with appropriate outpatient care or improved treatment adherence.

# ECM Population of Focus #2: *NEW*

## Individuals At Risk for Avoidable Hospital or ED Utilization



### **(b) Children and youth who meet one or more of the following conditions:**

1. **Three or more** emergency room visits in a **12-month** period that could have been avoided with appropriate outpatient care or improved treatment adherence;
2. **Two or more** unplanned hospital and/or short-term SNF stays in a **12-month** period that could have been avoided with appropriate outpatient care or improved treatment adherence.

# ECM Population of Focus #3: *UPDATED*

## Individuals with Serious Mental Health and/or SUD Needs



### (a) Adults who:

1. Meet the eligibility criteria for participation in, or obtaining services through:
  - i. Specialty Mental Health Services (SMHS) delivered by Mental Health Plans (MHPs);
  - ii. The Drug Medi-Cal Organization Delivery System (DMC-ODS) **or** the Drug Medi-Cal (DMC) program;**and**
2. Are actively experiencing at least one complex social factor influencing their health (e.g., lack of access to food, lack of access to stable housing, inability to work or engage in the community, high measure (four or more) of Adverse Childhood Experiences (ACEs) based on screening, former foster youth, history of recent contacts with law enforcement related to mental health and/or substance use symptoms);  
**and**
3. Meet one or more of the following criteria:
  - i. Are at high risk for institutionalization, overdose, and/or suicide;
  - ii. Use crisis services, EDs, urgent care, or inpatient stays as the primary source of care;
  - iii. Experienced two or more ED visits or two or more hospitalizations due to serious mental health or SUD in the past 12 months;
  - iv. Are pregnant and postpartum (12 months from delivery).

# ECM Population of Focus #3: *NEW*

## Individuals with Serious Mental Health and/or SUD Needs



### **(b) Children and youth who:**

1. Meet the eligibility criteria for participation in, or obtaining services through one or more of:
  - i. SMHS delivered by MHPs;
  - ii. The DMC-ODS **or** the DMC program.

### **Notes on the Definition:**

- » No further criteria are required to be met for children and youth to qualify for this ECM POF. Children and youth do **not** need to meet the additional criteria noted for adults (Clauses (2) and (3) of (a) on the prior slide).
- » Children and youth are **not** required to be enrolled in or have accessed services through SMHS, DMC-ODS, or DMC to be eligible for ECM.

# ECM Population of Focus #4: Individuals Transitioning from Incarceration



## (a) Adults who:

1. Are transitioning from a correctional setting (e.g., prison, jail, or youth correctional facility) or transitioned from a correctional setting within the past 12 months;  
**and**
2. Have at least one of the following conditions (see forthcoming ECM Policy Guide for definitions):
  - i. Mental Illness;
  - ii. SUD;
  - iii. Chronic Condition/Significant Clinical Condition;
  - iv. I/DD;
  - v. Traumatic Brain Injury;
  - vi. HIV/AIDS;
  - vii. Pregnant or Postpartum.

These eligibility criteria align with the eligibility criteria for targeted pre-release services that will be available to Members in correctional facilities as requested in California's 1115 Demonstration Amendment and Renewal Application. As such, all Members who receive pre-release Medi-Cal services will be eligible to receive ECM until reassessment is conducted by the MCP, which may occur up to six months after release. **As of December 2022, the 1115 Demonstration remains under consideration by the Centers for Medicare & Medicaid Services (CMS); as such, the above criteria are subject to change.**

# ECM Population of Focus #4: Individuals Transitioning from Incarceration



## **(b) Children and youth who:**

Are transitioning from a youth correctional facility or transitioned from being in a youth correctional facility within the past 12 months.

### **Notes on the Definition:**

- » Children and youth who are transitioning from a youth correctional facility or transitioned from a youth correctional facility within the past 12 months do **not** need to meet the additional criteria noted for adults (Clause (2) of (a) on the prior slide).

*(Eligibility criteria are subject to CMS approval of California's 1115 Demonstration. See prior slide for further detail.)*

# ECM Population of Focus #5:

## Adults Living in the Community and At Risk for LTC Institutionalization



### » **Adults who:**

1. Are living in the community who meet the SNF Level of Care (LOC) criteria; **or** who require lower-acuity skilled nursing, such as time-limited and/or intermittent medical and nursing services, support, and/or equipment for prevention, diagnosis, or treatment of acute illness or injury;  
**and**
2. Are actively experiencing at least one complex social or environmental factor influencing their health (including, but not limited to, needing assistance with activities of daily living (ADLs), communication difficulties, access to food, access to stable housing, living alone, the need for conservatorship or guided decision-making, poor or inadequate caregiving which may appear as a lack of safety monitoring;  
**and**
3. Are able to reside continuously in the community with wraparound supports (i.e., some individuals may not be eligible because they have high-acuity needs or conditions that are not suitable for home-based care due to safety or other concerns.

# ECM Population of Focus #6:

## Adult Nursing Facility Residents Transitioning to the Community



### » **Adult nursing facility residents who:**

1. Are interested in moving out of the institution; **and**
2. Are likely candidates to do so successfully; **and**
3. Are able to reside continuously in the community.

### **Notes on the Definition:**

- » Members transitioning to the community may need to return to the hospital or SNF intermittently for short admissions (potentially due to changes in medical conditions or other acute episodes). They should not be precluded from being considered able to reside continuously in the community.
- » Individuals residing in Intermediate Care Facilities (ICF) and subacute care facilities are excluded from this Population of Focus.



# ECM Population of Focus #7: *NEW* Children and Youth Enrolled in CCS or CCS WCM with Additional Needs Beyond the CCS Condition

## » **Children and youth who:**

1. Are enrolled in CCS **or** CCS WCM;  
**and**
2. Are experiencing at least one complex social factor influencing their health. Examples include (but are not limited to) lack of access to food; lack of access to stable housing; difficulty accessing transportation; high measure (four or more) of ACEs screening; history of recent contacts with law enforcement; or crisis intervention services related to mental health and/or substance use symptoms.

## **Notes on the Definition:**

- » Children in CCS or CCS WCM are eligible to receive ECM if they meet the criteria of any other ECM Population of Focus, even if they do not have a complex social factor that causes them to meet the criteria in Clause (2) of this Population of Focus. For example, many children in CCS have a co-occurring behavioral health need; these children would be eligible for ECM.



# ECM Population of Focus #8: *NEW* Children and Youth Involved in Child Welfare

## » Children and youth who meet one or more of the following conditions:

1. Are under age 21 and are currently receiving foster care in California;
2. Are under age 21 and previously received foster care in California or another state within the last 12 months;
3. Have aged out of foster care up to age 26 (having been in foster care on their 18<sup>th</sup> birthday or later) in California or another state;
4. Are under age 18 and are eligible for and/or in California's Adoption Assistance Program;
5. Are under age 18 and are currently receiving or have received services from California's Family Maintenance program within the last 12 months.

### Notes on the Definition:

- » Foster care is defined in California by [WIC 11400\(f\)](#).
- » California's [Adoption Assistance Program](#) is defined by [WIC 16120](#) and provides financial and medical coverage with the goal of facilitating the adoption of children who otherwise may have remained in long-term foster care.
- » California's Family Maintenance program is defined by [WIC 16506](#) and designed to support a child or youth remaining in a safe, secure, stable home.

# ECM Population of Focus #9: *NEW*

## Individuals with I/DD



### (a) Adults who:

1. Have a diagnosed I/DD;  
**and**
2. Qualify for eligibility in any other adult ECM Population of Focus

### Notes on the Definition:

- » ECM is live, as of January 1, 2022, for adults with an I/DD that meet the eligibility criteria for any adult ECM POF.
- » Adults with an I/DD who are served by a Regional Center can qualify for ECM if they meet the eligibility criteria for any ECM POF. Regional Centers may contract with MCPs to serve as ECM Providers and they may refer Members they believe may be eligible for ECM.
- » Adults with an I/DD receiving 1915(c) waiver services and those residing in an ICF are **not** eligible for ECM.



# ECM Population of Focus #9: *NEW*

## Individuals with I/DD

### **(b) Children and youth who:**

1. Have a diagnosed I/DD;  
**and**
2. Qualify for eligibility in any other children and youth ECM Population of Focus

### **Notes on the Definition:**

- » ECM will be live, beginning July 1, 2023, for children/youth with an I/DD that they meet the eligibility for any children/youth ECM Population of Focus.
- » Children and youth with an I/DD who are served by a Regional Center can qualify for ECM if they meet the eligibility criteria for any ECM POF. Regional Centers may contract with MCPs to serve as ECM Providers and they may refer Members they believe may be eligible for ECM.
- » Children and youth with an I/DD receiving 1915(c) waiver services and those residing in an ICF are **not** eligible for ECM.

# ECM Population of Focus 10: *NEW*

## Pregnancy, Postpartum, & Birth Equity POF



### » Adults and youth who:

1. Are pregnant **or** are postpartum (through 12 months period);  
**and**
2. Meet one or more of the following conditions:
  - i. Qualify for eligibility in any other adult or youth ECM POF; **or**
  - ii. [***Birth Equity Population of Focus Effective January 1, 2024***] Are subject to racial and ethnic disparities as defined by California public health data on maternal morbidity and mortality.

### Notes on the Definition:

- » Clause (1) is defined as individuals who are currently pregnant or currently postpartum. For the purposes of this POF definition, “postpartum” means having delivered, whether a live birth or stillbirth; or a late term abortion.
- » Clause (2)(i) is already live statewide as of January 1, 2022, for adult POFs and will go live statewide starting July 1, 2023, for children/youth POFs.
- » Clause (2)(ii) will go-live statewide on January 1, 2024. Based on the California Department of Public Health’s most recent State public health data (including the [Prenatal Care Dashboard](#) and [Pregnancy-Related Mortality Dashboard](#)), the racial and ethnic groups experiencing disparities in care for maternal morbidity and mortality are Black, American Indian and Alaska Native, and Pacific Islander pregnant and postpartum individuals. This maternal morbidity and mortality data will be calculated at the State level (not county level) to guide ECM eligibility at the MCP and Member level.

# DHCS Resources

Send questions or comments to  
[CaAIMECMILOS@dhcs.ca.gov](mailto:CaAIMECMILOS@dhcs.ca.gov)

- » Learn more about ECM & Community Supports:
  - Policy Guides: [ECM](#) & [Community Supports](#)
  - [FAQs](#)
  - Fact Sheets: [ECM](#) & [Community Supports](#)
  
- » Review ECM & Community Supports guidance documents:
  - [Billing & Invoicing Guide](#)
  - [Coding Options](#)
  - [Community Supports Pricing Guide \(Non-Binding\)](#)
  - [Data Guidance for Member-Level Information Sharing](#)
  - [Contract Template Provisions](#)
  - [Standard Provider Terms & Conditions](#)
  - [ECM and Community Supports Model of Care Legacy Cover Note](#)
  - [ECM and Community Supports Model of Care Legacy Template](#)
  - [ECM Model of Care Addendum I](#)
  - [Community Supports Model of Care Template](#)