

CalAIM ECM and ILOS Data Exchange Guidance Overview

California Advancing and Innovating Medi-Cal¹ (CalAIM) is a multi-year California Department of Health Care Services (DHCS) initiative to improve the quality of life and health outcomes for Medi-Cal beneficiaries through broad delivery system, program, and payment reform. To support CalAIM's Enhanced Care Management (ECM) and In Lieu of Services (ILOS) initiatives² and in response to noted stakeholder data exchange needs, DHCS is releasing the following guidance for public comment:

ECM and ILOS Billing and Invoicing Guidance

ECM and ILOS Providers that are unable to submit ANSI ASC X12N 837P claims to Managed Care Plans (MCPs) using DHCS-defined standard specifications and code sets may submit invoices to MCPs with minimum necessary data elements defined by DHCS. This guidance defines the standard, "minimum necessary" data elements MCPs will collect from ECM and ILOS Providers - including information about the Member, service(s) rendered, and the rendering Provider - as well as file formats, transmission methods, submission timing, and adjudication processes. ECM and ILOS Providers will be expected to bill using ECM and ILOS Coding Options³ and encouraged to use DHCS Priority SDOH Codes to document Member diagnoses.⁴ Invoices will be used by MCPs to pay Providers and develop DHCS-compliant encounters as part of their regular file submissions. MCPs will provide ECM and ILOS Providers with invoice submission instruction, training, and technical assistance in support of these reporting requirements.

ECM Member Information File Guidance

ECM Providers, particularly those unable to consume Member enrollment and encounter files in industry-standard file formats (e.g., ANSI ASC x12N 834/837), will benefit from receiving summary-level information about their assigned Members from MCPs to support ECM activities. MCPs will develop "Member Information Files" for all contracted ECM Providers to address this need. Member Information Files will comprise: a list of Members attributed to the contracted ECM Provider; information that may be used to reach and engage newly assigned Members; and information on Member service utilization and health needs to support care management. MCPs will use the Member Information File transmission process to also engage in bi-directional information sharing with ECM Providers, with ECM Providers transmitting Member engagement information back to MCPs in Return Transmission Files. This guidance

¹ "California Advancing and Innovating Medi-Cal," CA DHCS. Available [here](#).

² "Enhanced Care Management and In Lieu of Services," CA DHCS. Available [here](#).

³ "Enhanced Care Management and In Lieu of Services Coding Options," CA DHCS. Available [here](#).

⁴ "Collecting Social Determinants of Health Data," CA DHCS. Available [here](#).



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defines the standard “minimum necessary” data elements MCPs will share with ECM Providers in the Member Information Files and request back from ECM Providers in Return Transmission Files; and the file formats, transmission methods, and reporting frequencies for files exchanged between MCPs and ECM Providers. MCPs will provide ECM Providers with instruction, training, and technical assistance to support effective file exchange and use.

Please note: MCPs will use the information gathered from ECM Member Information File exchange to support ECM and ILOS Quarterly Implementation Reporting to DHCS. This separate reporting will allow DHCS to monitor MCP’s initial implementation of and compliance with ECM & ILOS requirements. The ECM and ILOS Quarterly Implementation Reporting framework is in development and scheduled to be released in late September or early October.

DHCS welcomes stakeholder feedback on this draft guidance, particularly specific suggestions on additional standards, data fields, and data field detail that may be specified to address program needs and support efficient and efficient information exchange in support of the ECM and ILOS initiatives.