



CalAIM Community Supports Spotlight:  
**Children, Youth, and  
Community Supports**

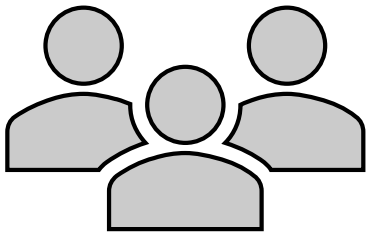
# Agenda

- » Welcome and Introductions
- » Review of Community Supports and Child and Youth Populations
- » Review of Related Child and Youth Programs and Services
- » Promising Practices
- » Q&A

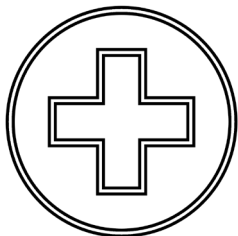
# CalAIM and Community Supports



CalAIM Community Supports are **optional services** that health plans can opt to provide in lieu of higher-cost services covered by Medicaid.



CalAIM includes **14** Community Supports.



MCPs selected Community Supports to offer when CalAIM went-live on January 1, 2022 and have the **option to add new Community Supports every six months.**

# In Lieu of Services (ILOS) Authority 101

## What Are “In-Lieu-Of” Services?

ILOS are **medically appropriate** and **cost-effective services or settings** offered by a managed care plan as a **substitute** for a Medicaid state plan-covered service or setting.

States to date have covered various targeted ILOS. California’s recent approval, however, establishes that ILOS authority can be used to offer a **comprehensive menu** of health-related services in Medicaid.

*Example: Offering **home asthma remediation** in lieu of **future emergency department visits**.*

**Regulatory requirements:** ILOS are authorized through federal regulation<sup>1)</sup> which specifies that services must be:

- Medically appropriate and cost-effective substitutes for a covered service or setting under the Medicaid State Plan
- Authorized and identified in the plan contract
- Offered at plan and enrollee option

The regulation also specifies that the cost of ILOS is taken into account in rate setting.

1) 42 CFR §438.3(e)(2)

# Community Supports Services Approved in California

- Housing Transition Navigation Services
- Housing Deposits
- Housing Tenancy and Sustaining Services
- Respite Services (for Caregivers)
- Day Habilitation Programs
- 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
- Medically Tailored Meals/Medically-Supportive Food
- Sobering Centers
- Asthma Remediation
- Short-Term Post-Hospitalization Housing
- Recuperative Care (Medical Respite)

# Children, Youth, and Community Supports

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## *Overview*

# Defining Child and Youth Populations in Medi-Cal

- » Pediatric populations generally include those up to 21 years old
- » Pediatrics age range overlaps with transitional-age youth (TAY)
  - » General range for TAY is ages 16-26
  - » Variety of definitions for TAY exist
  - » Some entities may define TAY more broadly depending on the individual's lived experiences and needs
- » Children and young adults may access Medi-Cal under various programs:
  - » Traditional Medi-Cal
  - » Medi-Cal for All Children
  - » California Healthy Families (SCHIP)
  - » California Children's Services

# Child and Youth Populations and Medi-Cal



## Access to Medi-Cal

- 41% of all Medi-Cal enrollees are children<sup>1</sup>
- 57% of children ages 0-5 statewide are enrolled in Medi-Cal<sup>2</sup>



## Key Issues Community Supports Can Help Address

- Asthma affects about 7% of all children in California<sup>3</sup>
- 8,030 family households and 12,172 unaccompanied young adults experiencing homelessness in California<sup>4</sup>
- In California, nearly 1 in 7 children are estimated to have special health care needs and require special health and support services<sup>5</sup>



# Social Drivers of Health for Children and Youth

**2x**

Children experiencing homelessness get sick at twice the rate of other children<sup>6,7</sup>

**4x**

The rate of asthma among children experiencing homelessness is four times higher than among other children<sup>6,7</sup>

**5x**

Children who live below the federal poverty line are five times more likely to experience four or more adverse childhood experiences<sup>8</sup>

# Which Community Supports are Children and Youth Most Likely to Benefit From?

- » Asthma Remediation
- » Housing Navigation
- » Housing Tenancy and Sustaining Services
- » Housing Deposits
- » Caregiver Respite



# Community Supports Services

- » Asthma Remediation
  - » Physical modifications to home environment to address asthma triggers
- » Housing Supports
  - » Help accessing and setting up housing and remaining housed
- » Respite Services for Caregivers
  - » Episodic relief for caregivers to help Medi-Cal members continue living at home

# Possible Service Providers

Examples include:

Hospital systems

Clinics and health centers

Community-based organizations

Counties and local governments and entities

# Community Supports and ECM

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## *Overview*

# Overview: Enhanced Care Management

- » Enhanced Care Management (ECM) provides coordination of health and social services for the highest-need populations
- » Whole-person focused and meets members where they are
- » Available to select Populations of Focus

**Children and Youth Populations of Focus go live July 2023**

# ECM Populations of Focus

ECM POFs are not mutually exclusive; an individual might qualify for ECM via more than one POF

ECM Populations of Focus (POFs)		Adults	Children & Youth
1	Individuals and Their Families Experiencing Homelessness	✓	✓
2	Individuals At Risk for Avoidable Hospital or ED Utilization ( <i>formerly called "High Utilizers"</i> )	✓	✓
3	Individuals with Serious Mental Health and/or SUD Needs	✓	✓
4	Individuals Transitioning from Incarceration	✓	✓
	Adults Living in the Community and At Risk for LTC Institutionalization	✓	
	Adult Nursing Facility Residents Transitioning to the Community	✓	
5	Children and Youth Enrolled in California Children's Services (CCS) or CCS Whole Child Model (WCM) with Additional Needs Beyond the CCS Condition		✓
6	Children and Youth Involved in Child Welfare		✓
7	Individuals with Intellectual or Developmental Disabilities	✓	✓
8	Pregnant and Postpartum Individuals At Risk for Adverse Perinatal Outcomes	✓	✓

# Program overlaps

- » ECM is a benefit available to individuals who meet specific Population of Focus criteria
- » Community Supports are electively offered and accepted by plans and members
- » Each Community Support has its own eligibility criteria detailed in the [DHCS Community Supports Policy Guidance](#)
- » Some members will be eligible for either or both ECM and a given Community Support depending on multiple factors



# **ECM, Community Supports, and Other State and Local Pediatric Programs**

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## ***Overview***

# State and Local Health Programs and Services Available to Child and Youth Populations

California Healthy Families (SCHIP)

California Children's Services

CCS Whole Child Model

Department of Developmental Services Regional Centers

Pediatric Palliative Care Services

# California Children's Services Program

- » The CCS program provides diagnostic and treatment services, medical case management, and physical and occupational therapy services to children under age 21 with CCS-eligible medical conditions
- » Examples include:
  - » Cystic fibrosis
  - » Hemophilia
  - » Cerebral palsy
  - » Heart disease
  - » Cancer
  - » Traumatic injuries
  - » Some infectious diseases

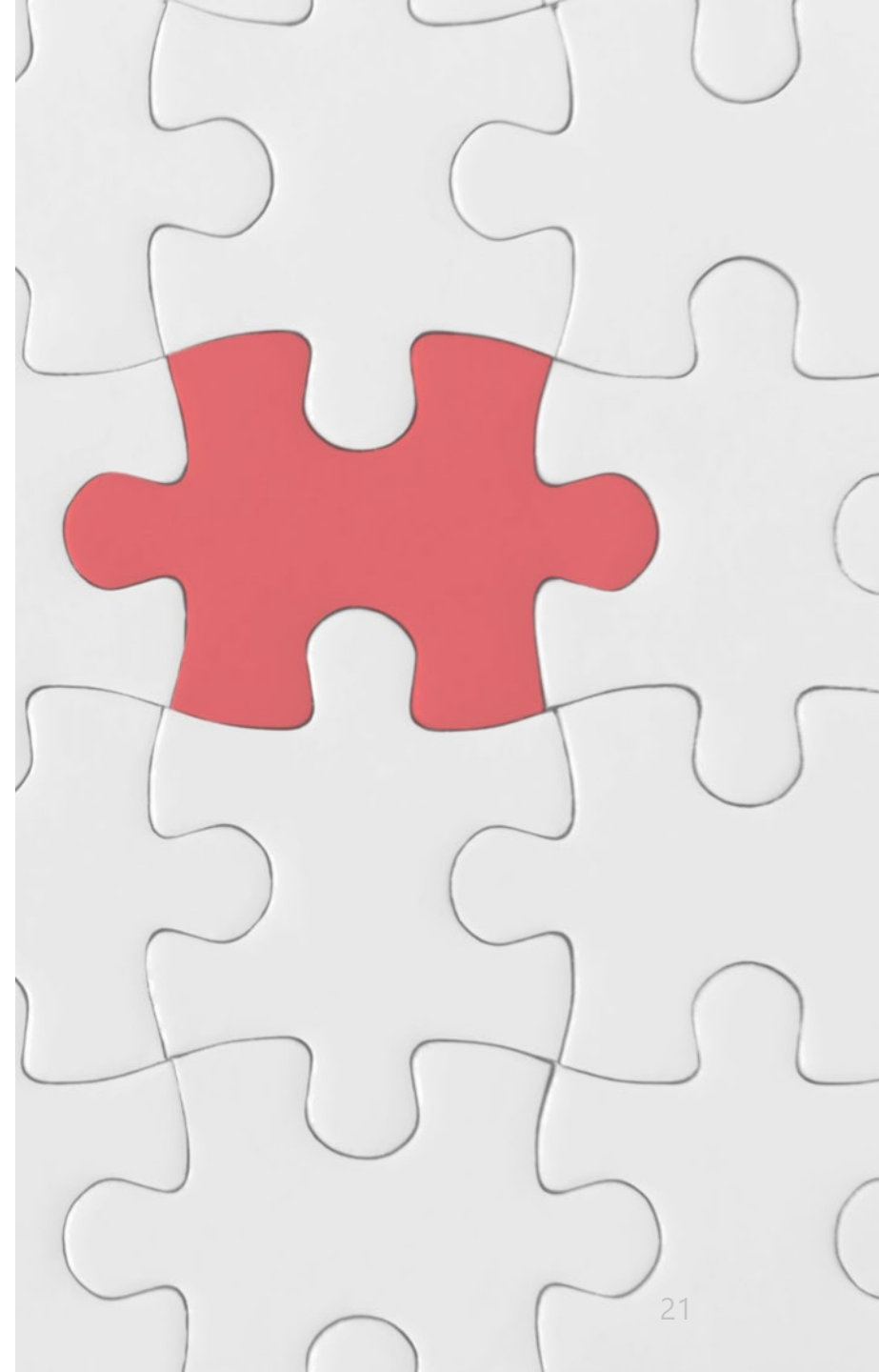


# California Children's Services Program Administration

- » The CCS program is administered as a partnership between county health departments and the California Department of Health Care Services (DHCS)
- » Approximately 70% of CCS-eligible children are also Medi-Cal eligible
  - » The Medi-Cal program reimburses these patients' care

# California Children's Services: Whole Child Model

- » Whole Child Model (WCM) program established in 2018 across 21 counties and 5 health plans
- » In WCM counties, CCS program-covered services for Medi-Cal-eligible CCS children and youth are incorporated into a Medi-Cal managed care plan (MCP) contract
- » Aims for improved care coordination for primary, specialty, and behavioral health services for CCS and non-CCS conditions



# Community Supports, ECM, and CCS/CCS Whole Child Model

- » ECM acts as a wrap program for CCS and CCS Whole Child Case Management
- » CCS-enrolled children who are Medi-Cal eligible and enrolled in Medi-Cal managed care may be eligible for Community Supports depending on county, health plan, and individual Community Supports eligibility criteria
- » Whole Child Model enrollees may be eligible depending on county, health plan, and individual Community Supports eligibility criteria

# Pediatric Palliative Care Services

- » Through Pediatric Palliative Care Services, children with life-limiting or life-threatening medical conditions receive supportive services at home and in the community
- » PPC services are administered by managed care plans and the FFS delivery system
- » PPC services offered through Early and Periodic Screening, Diagnostic, and Treatment Services, a Medi-Cal benefit



# Regional Centers

The Department of Developmental Services is responsible for designing and coordinating services for Californians with developmental disabilities. DDS contracts with regional centers to plan, access, coordinate and monitor these services.

» Some of the services and supports provided by the regional centers include:

- Information and referral
- Assessment and diagnosis
- Counseling
- Lifelong individualized planning and service coordination
- Outreach
- Assistance in finding and using community and other resources
- Advocacy and Family support
- Planning, placement, and monitoring for 24-hour out-of-home care

More information on the [Regional Centers homepage](#)





# How Do these Programs Fit Together?

- » Community Supports are meant to supplement, and not supplant, programs and services through other state, local, or federally-funded programs.
- » If a member is receiving services through other pediatric-focused programs, they may still be eligible for Community Supports, depending on individual Medi-Cal eligibility and managed care plan enrollment, Community Supports program criteria, and county of residence.

# Special Considerations for Serving Children and Youth

- » Caregivers may be included in service delivery
- » Specialized training recommended
- » Providers may need to work across multiple systems to deliver services (e.g., local housing services, child welfare, behavioral health)



# Community Supports and Pediatric Populations Background and Promising Practices

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Alexandra Parma, Senior Policy Research Associate, First 5 Center for Children's Policy

# Community Supports and Early Childhood



# About First 5



- First 5 Association is the membership organization supporting the 58 First 5 county commissions.
- Grounded in the experience of First 5s, the First 5 Center researches best practices and solutions in early childhood policy development.

**FIRST 5 CENTER FOR  
CHILDREN'S POLICY**

**FIRST**  **5**  
ASSOCIATION OF CALIFORNIA

# **A whole-child, whole-family approach to service delivery**

- Community Supports address the needs of members with the most complex challenges affecting health.
- Children, especially infants and toddlers, are acutely impacted by the social drivers of health affecting their caregivers and families.
- A whole-child, whole-family approach considers a child's physical, developmental, and mental health, the child-parent/caregiver relationship, and the family's social and economic circumstances.

# Connection between caregiver and child wellness

- Brain development is most rapid during early childhood. Earliest relationships and experiences shape the architecture of infant and toddler brains.
- Healthy development requires nurturing and responsive relationships with adults.
- Things like caregiver stress, poor mental health, poverty, domestic violence, or substance abuse can significantly impact young children's health and development.



# Community Supports intersection with other whole-child, whole-family services

- Medi-Cal family therapy benefit
- Medi-Cal dyadic services benefit
- Home Visiting
- Care coordination supports like Help Me Grow





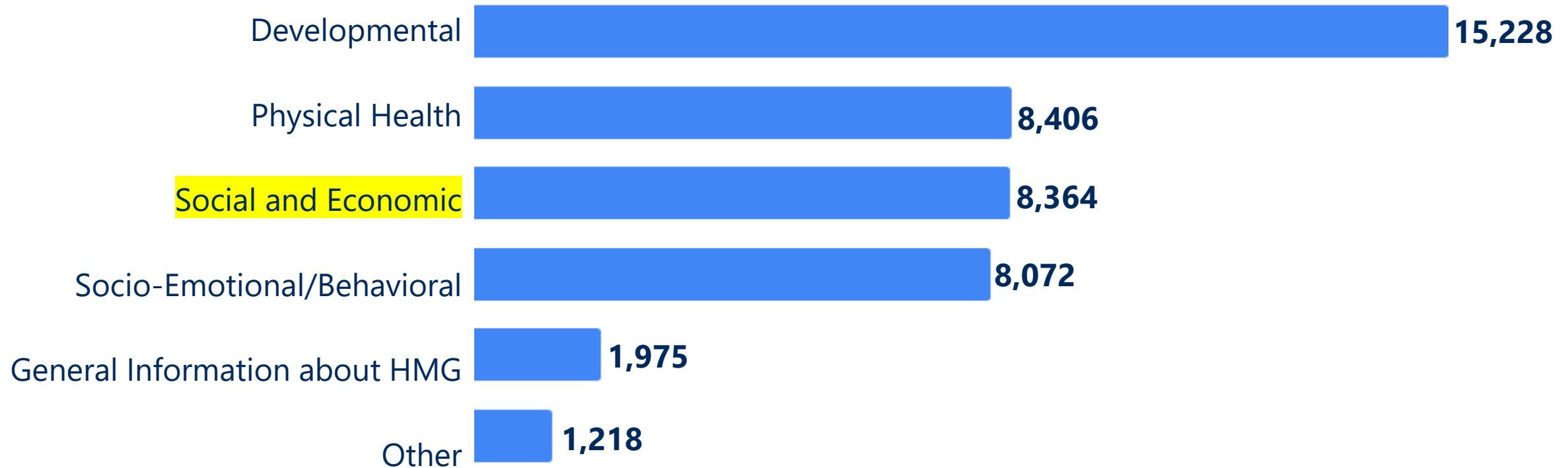
# Spotlight on Help Me Grow



Help Me Grow systems were built at the county level by First 5s to improve developmental screening rates, educate parents about developmental milestones, and link children to services quickly and efficiently.

# Spotlight on Help Me Grow

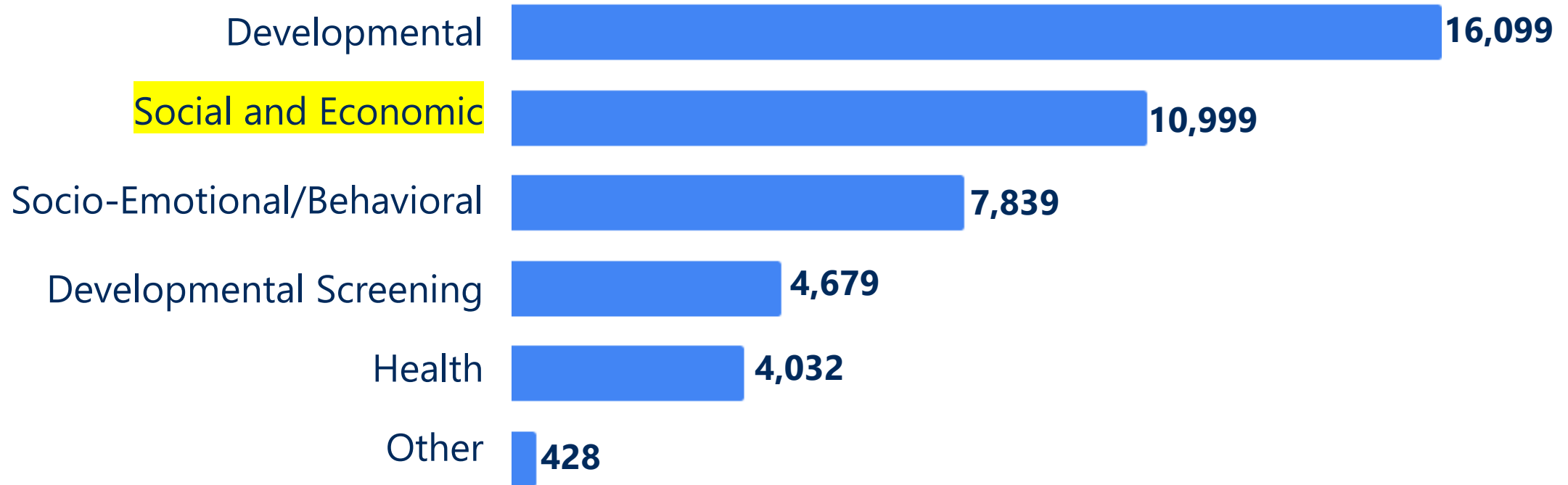
Most common presenting issue among families contacting Help Me Grow: FY 18-19



Although most families contacting Help Me Grow across the state need support with developmental concerns, many families report concerns about social and economic issues, including basic needs, family functioning, and living conditions.

# Spotlight on Help Me Grow

Most common referrals made for families contacting Help Me Grow: FY 18-19



# Thanks!

- For more information please visit [First 5 Center's Website](#)
- Or e-mail Alexandra @ [Alexandra@first5center.org](mailto:Alexandra@first5center.org)



# Community Supports for Children and Youth Plan Promising Practices

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Nancy Shipman, Director of Special Programs, Anthem Blue Cross

# Community Supports

Focus on Children and Youth

# Community Supports Implementations

- » Offering all 14 Community Supports
- » Phasing in throughout 29 counties\*
- » Ongoing education to providers, community, members

\*\*Alameda, Alpine, Amador, Alpine, Butte, Calaveras, Colusa, Contra Costa, El Dorado, Fresno, Glenn, Inyo, Kings, Los Angeles, Madera, Mariposa, Mono, Nevada, Placer, Plumas, Sacramento, San Benito, San Francisco, Santa Clara, Sierra, Tehama, Tulare, Tuolumne, Yuba

# Approach to Referrals

- » No Wrong Door
- » Role of the LTSS Service Coordinator
- » Role of Enhance Care Management Lead Care Manager
- » Sharing of Information



# Community Support Utilization-What is being requested?

Asthma Remediation	55	Medically Supportive Food/Meals/Medically Tailored Meals	901
Community Transition Services/NF Transition to a Home	103	Nursing Facility Transition/Diversion to ALF	114
Day Habilitation Programs	170	Personal Care & Homemaker Services	152
Environmental Accessibility Adaptations (Home Modifications)	147	Recuperative Care (Medical Respite)	237
Housing Deposits	524	Respite Services	98
Housing Tenancy & Sustaining Services	770	Short-term Post Hospitalization Housing	153
Housing Transition/Navigation	1828	Sobering Centers	39

# Utilization by Children and Youth

- » Housing Transition Navigation
- » Asthma Remediation
- » Medically Tailored Meals

# Children and Youth – Housing Transition Navigation

**Sources of referrals:** Internal Case Managers, School Clinics, Hospital Social Workers

**Age Ranges:** Newborn to 7

**Examples of medical issues:**

- » Less than 1 year old with hypoxic ischemic encephalopathy, feeding issues, feeding tube
- » 4-year-old with ADHD, autism
- » 7-year-old with asthma, adjustment disorder
- » 4-year-old with autism, anxiety, depression

# Challenges and Successes

## **Challenges:**

- » Parent's chronic homelessness issues
- » Temporary housing provisions
- » Information sharing

## **Successes:**

- » Engagement with parents
- » Increased awareness of services
- » Housing vouchers

# Community Supports and Pediatric Populations Provider Promising Practices

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Tiffany Miotla-Metz, Program Manager, American Family Housing



# American Family Housing

Tiffany Metz, Program Manager

# American Family Housing

- Supportive Housing

- The simplest solution is the best and most cost effective. Permanent rental housing for formerly homeless families and individuals, with just the right amount of supportive services.

- Affordable Housing

- We envision strong Southern California communities where an affordable home is available to everyone, where all children have a place at home to study, and where everyone has a decent kitchen where they can cook.



# Takeaways

- The increase of children enrolled into CalAIM
- The process on matching clients with children to housing
- Future goals



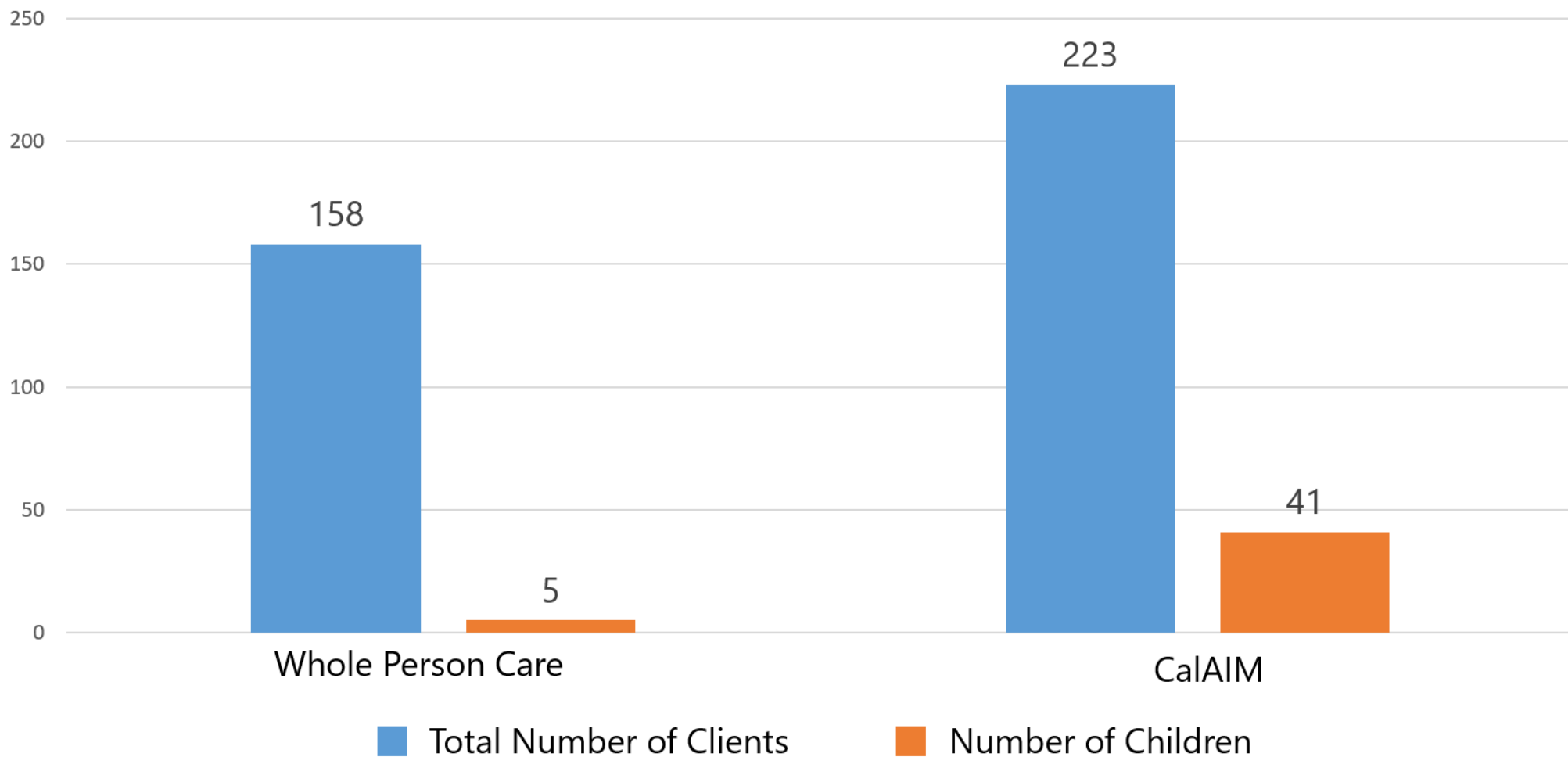
# Services Provided

- **Housing Navigation:** Assist with obtaining housing by creating a housing plan, providing housing-focused case management to address barriers such as income or health needs, searching for housing to identify available options, and working with landlords to help you secure housing.
- **Housing Deposits:** One-time financial assistance to secure housing and establish a basic household. Examples of eligible expenses include security deposits, basic furnishings, and moving costs. All payments will be provided directly to a vendor and never to the participant.
- **Housing Tenancy:** Assist with maintaining housing by creating a housing stability plan, providing housing-focused case management to address barriers such as income or health needs, increasing independent living skills, and mediating relationships with landlords.

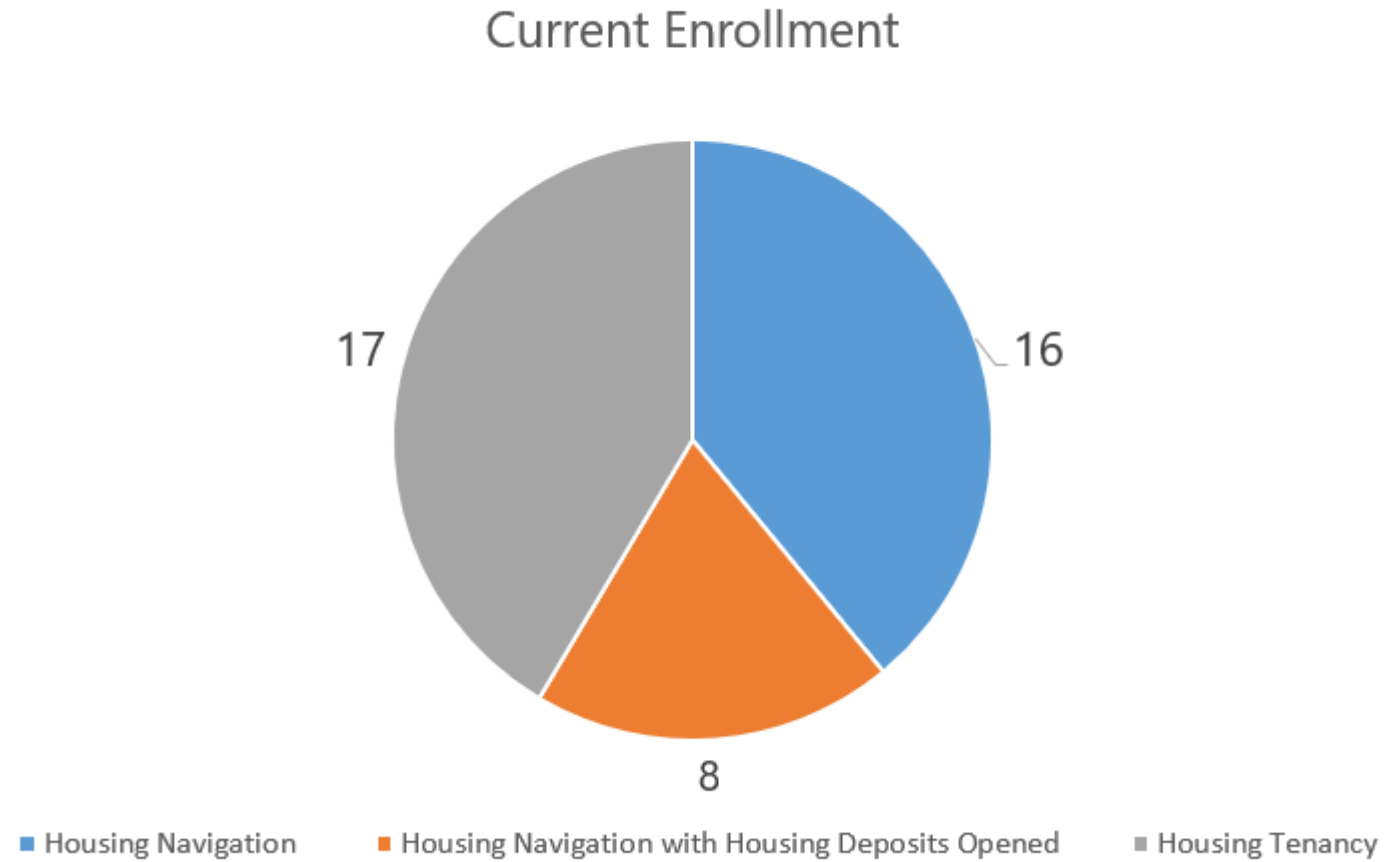
# Transition from Whole Person Care to CalAIM



# Transition from Whole Person Care to CalAIM

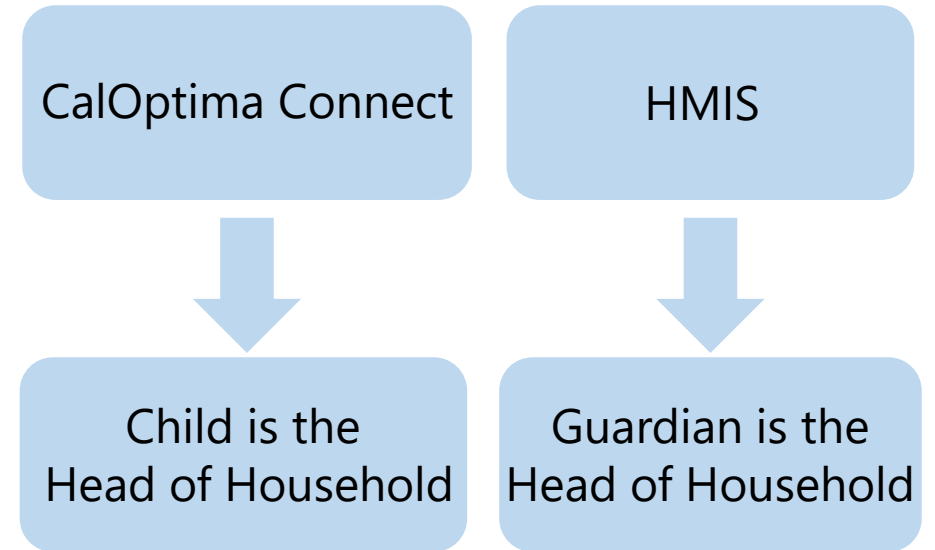


# Current Enrollment



# Children's Hospital of Orange County Referrals

- CHOC referrals come straight from CalOptima Connect.
- AFH currently has 6 active CHOC referrals.



# Matching Clients to Housing Opportunities

Clients with income



Finding low-income housing

Enrolling Clients into  
Family Coordinated Entry  
System



Client gets matched to a housing opportunity

1. Rapid Rehousing
2. Permanent Supportive Housing
3. Permanent Housing

# Success Story

- Client M has been dealing with homelessness since 2014 with her two children.
- Client M has struggled to juggle keeping a full-time job and raising her 2 children as a single parent.
- Client M was referred to AFH in June of 2022.
- AFH helped connect Client M and her family to housing.
- Client M and her family moved in last month.

# Future Plans

- Completing the homework room in Casa Paloma
- Starting up the Children's Program
- Day Habilitation





Thank you!

# FAQs

- » Billing and rates
- » How to become a provider
- » Who can refer patients and how to make a referral
- » How eligibility is determined

# Questions?

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# Closing

» Please send questions to: [CalAIMECMILOS@dhcs.ca.gov](mailto:CalAIMECMILOS@dhcs.ca.gov).

# Citations

- 1) [DHCS Medi-Cal Eligibility Statistics Data](#)
- 2) [DHCS Statistical Briefs](#)
- 3) [CDC Asthma in California Fact Sheet](#)
- 4) [US Interagency Council on Homelessness California Homelessness Statistics](#)
- 5) [CA Department of Public Health Children and Youth With Special Health Care Needs](#)
- 6) [First Five LA Child Homelessness and Trauma](#)
- 7) [National Child Traumatic Stress Network Facts on Trauma and Homeless Children](#)
- 8) [Income Inequality and the Differential Effect of Adverse Childhood Experiences in US Children](#)

# Resources

- » [DHCS Community Supports Policy Guidance](#)
- » [Non-Binding ILOS Pricing Guidance](#)