

From: ADRC@CDA
To: ADRC@CDA
Cc: ADRC Update: Opportunities to Expand Your ADRC Network
Subject: Thursday, April 29, 2021 11:57:58 AM
Date: [image001.png](#)
Attachments:

Updated to include an additional opportunity

Dear ADRC Partners:

We wanted to inform you about **five** significant opportunities to 1) form partnerships with health care entities and 2) sustain and expand our ADRC networks. If you have any questions, please refer to the weblinks and contact information provided and/or contact ADRC@aging.ca.gov for more information.

California Advancing and Innovating Medi-Cal (CalAIM)

The California Department of Health Care Services (DHCS) recently released resources that provide information about the Enhanced Case Management (ECM) and In-Lieu of Services (ILOS) components of the [CalAIM initiative](#). They included individual facts sheets on [ECM](#) and [ILOS](#) and [Frequently Asked Questions \(FAQ\)](#) that provide answers to some of the most common questions about ECM & ILOS, which has important relevance to our ADRC networks.

Key takeaways from the FAQ and fact sheets:

1. **ECM:** Managed Care Plans (MCP) are required to contract with CBO(s) to provide ECM; ECM cannot be provided directly by MCPs although there are limited exceptions. MCPs must begin offering ECM in January 2022 or July 2022.
2. **ILOS:** ILOS can optionally be provided by MCPs. If offered, MCPs are required to contract with CBOs to provide ILOS; ILOS cannot be provided directly by MCPs although there are limited exceptions. MCPs may begin offering ILOS in January 2022.
3. **Strategic ADRC Action Steps:**
 - Support ADRC network in understanding the CalAIM opportunities and build local ADRC capacity for contracting with MCPs to provide

ECM and ILOS

- Each MCP is required to provide a “Model of Care” plan detailing its policies and procedures and contract language for partnering with providers to provide ECM and ILOS – it would be strategic to initiate conversations with MCPs to develop plans in partnership.

Medicaid/Medi-Cal Administrative Claiming (MAC)

CDA has continued collaboration with DHCS to explore, develop, and implement MAC as an on-going financing mechanism for California’s ADRCs/No Wrong Door Systems (NWD). As demonstrated in other states, MAC provides a significant opportunity for sustaining ADRC/NWD partnerships. With the support of federal reimbursements available under MAC, ADRC partner organizations can receive federal dollars to assist individuals with navigating the maze of LTSS options through provision of “administrative functions” such as identifying and enrolling potential eligibles onto Medicaid or performing activities that directly support the provision of medical services under the State Medicaid Plan. Other benefits of MAC include linking health care with social supports, helping individuals avoid costly facility care whenever possible, and providing them with information that can avoid or delay spending down life savings.

CDA and DHCS is updating our implementation plan and resource materials and putting together an orientation for our local ADRC partners. We anticipate hosting the MAC Orientation in June 2021 and will send a follow-up update and calendar invitation shortly.

California Community Transitions (CCT)/Money Follows the Person (MFP)

The [California Community Transitions](#) Project fund local care transition providers (“CCT Lead Organizations”) to **support willing and eligible individuals, support networks, and providers to facilitate and monitor Medi-Cal beneficiaries' transitions from facilities to the community settings of their choice.** For more information about CCT services and/or how to become

a CCT Lead Organization, contact the Department of Health Care Services' Integrated Systems of Care Division at (833) 388-4551, or e-mail: California.CommunityTransitions@dhcs.ca.gov.

The federal and State government has recognized the importance of transitioning individuals out of facilities and have recently allocated additional funding to expand CCT/MFP.

- Federal: [Consolidated Appropriations Act of 2021](#) appropriated additional CCT/MFP funding for 2021 through 2023. As a result, CCT transitions have been authorized to continue through at least December 31, 2023, and potentially through 2027 if federal grant funding remains available.
- State: [CA Senate Bill 281](#) is proposed to further expand the CCT program.

No Wrong Door Community Infrastructure Grants: Scaling Network Lead Entities

Through this funding opportunity, the Administration for Community Living plans to award approximately 10 cooperative agreements to domestic public or private non-profit entities. The intent of these awards is to **provide funding directly to community-based organizations (CBOs) either serving or interested in serving as a Network Lead Entity to develop [Community Integrated Health Networks](#) that contract with health care sector entities** (e.g., accountable care organizations, health plans, managed care organizations, hospitals, health systems, and more) **for coordinated access and delivery of services that address social determinant of health**. This is further encouraged in the National Strategy for COVID Response and Pandemic Preparedness which highlights the need to facilitate linkages between clinical and social services given the increased need for social services during the COVID-19 pandemic, as well as the need to work with community-based, multi-sector organizations to align health and social interventions.

You may visit the [federal grants website](#) for more details about the grant opportunity and application process. **This grant opportunity closes on June 1, 2021.**

Medi-Cal Health Enrollment Navigators Project

DHCS is expanding and extending efforts to enroll hard-to-reach Medi-Cal populations. Effective July 1, 2019, Assembly Bill (AB) 74 (Chapter 23, Statutes of 2019) **appropriated \$59.7 million for DHCS to partner with counties and community-based organizations (CBOs) to conduct Medi-Cal outreach, enrollment, retention, and navigation services for hard-to-reach Medi-Cal and potentially eligible Medi-Cal populations.**

Due to the community health impacts of the COVID-19 public health emergency, navigator services are now more critical than ever. Project partners have implemented innovative and creative approaches to contact and enroll eligible populations in their local communities. As of April 2021, DHCS is partnering with **32 counties and 9 CBOs (serving an additional 20 counties)** to provide services to those 52 counties. The project is in the final phase to allow **CBO and county partners** to submit proposals for the remaining non-awarded counties and the counties open to a dual partnership with a CBO. This phase allows CBOs and counties to incorporate new or expand existing activities for all participants, extend their project performance period to March 31, 2022, and continue adjusting their **outreach and enrollment** approaches due to the challenges presented by the COVID-19 PHE. Information and updates related to the Medi-Cal Health Enrollment Navigators Project is available on the DHCS [website](#), including a helpful [one-page Request for Application Announcement](#) and [informational PowerPoint presentation](#). For more information, contact HealthNavigators@dhcs.ca.gov.

Thank you and please let us know how we can support the continued growth of your ADRC partnership,

ADRC Branch Team

California Department of Aging

