

CalAIM Services General FAQ

1. How do members start receiving Enhanced Care Management (ECM) and/or Community Supports?

Members can be referred through many avenues, including self-referral, referral by a health care provider or referral by a Community Supports provider. Referral forms can be found on CalOptima Health's CalAIM Referral Forms website.

2. Under CalAIM, will some or all specialty Medi-Cal mental health services managed by the county be integrated into a single managed care network overseen by CalOptima Health (e.g., Medi-Cal-funded children's outpatient mental health clinics)?

As stated in the CalAIM proposal, the full integration plan proposal will occur no sooner than January 1, 2027.

3. Will entities like emergency shelters and field-based teams that are currently access points for services be able to receive payment for making referrals?

Anyone can make a referral. However, there are no payments for referring members for ECM or Community Supports.

4. Do CalOptima Health members have the right to appeal?

Per guidance from the Department of Health Care Services (DHCS) and CalOptima Health policy, members have a right to appeal for ECM and Community Supports. For members who were not authorized to receive ECM, CalOptima Health must follow its standard Grievances and Appeals process outlined in Exhibit A, Attachment 14, Member Grievance and Appeal System and All-Plan Letter (APL) 17-006: Grievance and Appeal Requirements and Revised Notice Templates and "Your Rights" Attachments. Members always retain the right to file appeals and/or grievances if they request one or more Community Supports offered by CalOptima Health but are not authorized to receive the requested Community Supports because of a determination that it was not medically appropriate or cost-effective.

5. Do CalAIM members qualify for CalOptima Health's Pay for Value (P4V) program?

CalOptima Health's P4V program applies to all contracted networks and CalOptima Health Community Network (CHCN) primary care providers (PCPs). All members are included to the extent that they qualify for Healthcare Effectiveness Data and Information Set (HEDIS) measures. There are no measures specific to CalAIM, and the P4V program does not extend to providers who are not designated PCPs.

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