



## Centralization of CalAIM Services FAQ

**1. Are all CalAIM providers required to utilize the CalOptima Health Connect system for referrals and authorization requests?**

Yes, as of January 1, 2023, all service providers of CalAIM Enhanced Care Management (ECM) and Community Supports are required to utilize the CalOptima Health Connect system for referral processes and authorization requests. This allows CalOptima Health to ensure a closed-loop referral system and a centralized repository for monitoring services.

**2. Did CalOptima Health take over all authorizations for both ECM and Community Supports services?**

All CalAIM service authorization requests made after January 1, 2023, are authorized solely by CalOptima Health regardless of health network (HN) assignment. For any questions or issues, please contact CalOptima Health via the CalOptima Health Connect messaging system or by calling **714-246-8444**.

**3. Who is responsible for creating authorizations, including modifications and terminations, for ECM and Community Supports authorizations created prior to January 1, 2023?**

The specific HN that authorized services in 2022, both for ECM and Community Supports, will continue to be responsible for those specific authorizations until they are discontinued or expire. CalOptima Health expects HNs to follow the newly created process within the CalOptima Health Connect system to request a termination and to terminate the authorization within the HN's own system. When those current authorizations end, CalOptima Health will be responsible for authorizing services moving forward.

**4. Who is responsible for creating authorizations, including modifications, of ECM and Community Supports authorizations that were created after January 1, 2023?**

CalOptima Health is responsible for creating and modifying authorizations created after January 1, 2023.

**5. How do HNs request authorization from CalOptima Health to provide ECM for the Department of Health Care Services (DHCS)-defined Population of Focus (POF) 1, Individuals Experiencing Homelessness, and POF 2, Individuals at Risk for Avoidable Hospital or Emergency Department Utilization?**

CalOptima Health utilizes a pathway through the CalOptima Health Connect system for HNs to receive referrals and request authorizations, just like how the Orange County Health Care Agency (HCA) currently requests authorizations for POF 3, Individuals with



Serious Mental Health and/or Substance Use Disorder Needs. HNs should submit ECM authorization requests via the CalOptima Health Connect system. SafetyNet Connect provides training on the specific pathways to request authorization.

**6. Who is responsible for members who are eligible for ECM services in POF 5, Adults Living in the Community and at Risk for Long-Term Care Institutionalization, and POF 6, Adult Nursing Facility Residents Transitioning to the Community?**

CalOptima Health and HNs are responsible for providing ECM services to POF 5. CalOptima Health has contracted with Libertana for POF 6. CalOptima Health is responsible for authorization and payment of contracted ECM providers, and Libertana is solely responsible for ECM services for POF 6, much like how HCA is for members who are eligible under POF 3.

**7. Will CalOptima Health share data about newly authorized services with each member's assigned HN?**

Yes, CalOptima Health will share this information with each member's assigned HN through the current reconciliation file-sharing process from data gathered via CalOptima Health Connect.

**8. Did the CalOptima Health Connect authorization request processes change for CalOptima Health-contracted Community Supports service providers after January 1, 2023?**

Despite the process regarding authorization being centralized, no current Community Supports authorization request processes in CalOptima Health Connect have changed. All authorization requests are the responsibility of CalOptima Health instead of each member's assigned HN via updates to CalOptima Health Connect. All inquiries related to the status of the authorization should be directed to CalOptima Health for assistance.

**9. Is HCA still responsible for assigning housing services referrals?**

The county is no longer be coordinating the housing services referrals as CalOptima Health has taken on this function. Please continue to send requests via the CalOptima Health Connect system, as outlined below, and expect CalOptima Health staff to respond instead of HCA staff. For reference, SafetyNet Connect created a training document titled "Sending a Housing Facilitation Service to CalOptima Health."

**10. As an ECM and/or Community Supports provider, how do I change/modify my authorization?**



All communications and/or requests from ECM and Community Supports providers should be conducted within the CalOptima Health Connect service closure and discharge process.

**11. How can I tell if an authorization is an HN’s responsibility or has transitioned to CalOptima Health?**

All authorizations with a start date prior to January 1, 2023, are the responsibility of the HNs and will continue until the authorization is discontinued or expires. CalOptima Health Connect will include a label identifying each authorization and the responsible party who created the authorization.

**12. As a Community Supports provider, should I continue to communicate with the member’s HN regarding care?**

Yes, all providers continue to be responsible for coordinating with the member’s HN to ensure proper care and to collaborate on activities including, but not limited to, Interdisciplinary Care Team meetings and ECM care team activities.

**13. Who do HNs, ECM or Community Supports providers contact to advocate for members who require a modification or a new authorization for services?**

Please utilize the CalOptima Health Connect service closure and discharge process for any authorization modification requests and the referral process for new member service authorization requests.

**14. An HN received a message in CalOptima Health Connect to end an authorization that has not transitioned to CalOptima Health; should the HN modify it in their own authorization system and will this change go to CalOptima Health?**

Please utilize the CalOptima Health Connect service closure and discharge process for any authorization modification requests and follow through with the usual HN authorization process of updating the daily authorization file.

**15. Who is responsible for sending a Notice of Action (NOA), the member’s assigned HN or CalOptima Health?**

Responsibility for the authorization process, including the NOA process, is dependent on the authorization creation date as specified below:

- Member’s assigned HN is responsible for all authorizations created before January 1, 2023, and the NOAs associated with those authorizations
- CalOptima Health is responsible for all authorizations created after January 1, 2023, and the NOAs associated with those authorizations.

**16. What should HNs do for referrals for ECM or Community Supports services for a member received after January 1, 2023?**



Please enter the referral into the CalOptima Health Connect system for CalOptima Health to review for eligibility and provider assignment. For housing navigation services referrals, please utilize the “CACS: Housing Transition Navigation Services” type within CalOptima Health Connect and select CalOptima Health as the provider. If it is a self-referral, include a note that the provider is submitting as a self-referral, this service will then be sent back to the Community Supports provider to fulfill. For all other service referral types, continue to use the Client Capacity tab to send the referral directly to the Community Supports or ECM provider.