

CaAIM Enhanced Care Management (ECM)

ECM is a Medi-Cal benefit that provides a standardized set of case management services and interventions to improve the quality of life and health outcomes for Medi-Cal beneficiaries. ECM is a face-to-face interaction with members in the community and focuses on seven populations of focus.

Why become an ECM provider?

Partnership HealthPlan of California (PHC) and the Department of Health Care Services share the goal of building a robust network of ECM providers to implement a broad delivery system program and payment reforms across the Medi-Cal program. Your organization may already align with these initiatives, so this may be an optimal opportunity to expand your clientele and access additional funding!

ECM focuses on a standardized set of case management services



Medical



Dental



Behavioral Health



Long-Term Support Services



Transitions across settings



Referrals to community resources, social services, Community Supports (ILOS), etc.



Do you staff nurses, LCSWs, CHWs, and/or care navigators? As an ECM lead care manager, they can:

- Coordinate clinical and social services care
- Find and schedule members' medical appointments
- Arrange transportation services to and from required appointments
- Connect to programs and services around your community
- Assist in understanding and managing prescription drugs
- Provide support with care plan goals

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ECM providers must have:

- Experience in serving ECM population(s) of focus
- Medi-Cal enrolled status or PHC credentialing compliance
- A National Provider Identifier (NPI)
- Ability to submit Treatment Authorization Request (TAR) for ECM Services
- Bill or invoicing capabilities for ECM Services
- Submit necessary reports to PHC

ECM Implementation Timeline

County	Populations of Focus	Start Date
Napa, Marin, Sonoma, Mendocino, Shasta	<ul style="list-style-type: none"> • High utilizers • Homeless (adults/children) • SMI/SUD 	1/1/2022
Yolo, Solano, Lake, Humboldt, Del Norte, Trinity, Modoc, Lassen, Siskiyou	<ul style="list-style-type: none"> • High utilizers • Homeless (adults/children) • SMI/SUD 	7/1/2022
Napa, Marin, Sonoma, Mendocino, Shasta, Yolo, Solano, Lake, Humboldt, Del Norte, Trinity, Modoc, Lassen, Siskiyou	<ul style="list-style-type: none"> • Individuals at risk for institutionalization • Nursing facility residents transitioning to the community 	1/1/2023
Napa, Marin, Sonoma, Mendocino, Shasta, Yolo, Solano, Lake, Humboldt, Del Norte, Trinity, Modoc, Lassen, Siskiyou	<ul style="list-style-type: none"> • Children and youth with complex physical, behavioral and/or developmental health needs 	7/1/2023
Napa, Marin, Sonoma, Mendocino, Shasta, Yolo, Solano, Lake, Humboldt, Del Norte, Trinity, Modoc, Lassen, Siskiyou	<ul style="list-style-type: none"> • Pregnant and Postpartum individuals at risk for adverse perinatal outcomes who are subject to racial and ethnic disparities 	1/1/2024
Napa, Marin, Sonoma, Mendocino, Shasta, Yolo, Solano, Lake, Humboldt, Del Norte, Trinity, Modoc, Lassen, Siskiyou	<ul style="list-style-type: none"> • Individuals transitioning from incarceration 	2024 (Date TBD)

How to become an ECM provider?

Email CalAIM@partnershiphp.org, ask for the readiness assessment questionnaire, and join us for our CalAIM ECM webinars. To join our upcoming webinars and additional information, visit our [CalAIM webpage](#).