

Providing Access & Transforming Health



Alameda CalAIM PATH Collaborative April 19, 2024

Welcome! Please introduce yourself in the chat with your name and organization.

2024 Collaborative Aims and Objectives



By December 2024, increase eligible members authorized for ECM by 15% & Community Supports by 15%

Build resources and relationships to drive community referrals

Strengthen ECM and Community Supports provider capacity

Facilitate relationship building between providers, plans, and referral partners

Today's Agenda



Time	Topic
10:00am	Welcome, agenda, and housekeeping
10:05am	Follow-ups from April In-Person Meeting
10:10am	Resources and Upcoming Events
10:20am	MCP Updates
10:45am	Spotlight: Birth Equity Population of Focus
11:00am	Presentation: AAH Population Health Team
11:30am	Open Office Hours



Housekeeping





April Follow-Ups













Updates: Data, Trainings, and Resources

- Upcoming trainings from ACTDU
- **Updated Provider List**
- PATH Technical Assistance Marketplace
- **Upcoming Office Hours**
- New Alameda Homelessness Point-in-Time Count Results



Upcoming trainings



Alameda County Training and Development Unit (ACTDU) regularly offers valuable virtual trainings for local CalAIM providers:

- New Hire Academy (June 12-13, In-Person at the Marina Inn)
- Engaging Individuals Navigating Reentry (June 25, 11am-1pm, In-Person at CHCN in San Leandro)

To check out these offerings and more, register here: https://bit.ly/ACTDU-Portal



Available now: ECM and CS Provider List





CalAIM PATH Care Coordination Provider List ECM and Community Supports Providers March 2024

Community Supports Providers: Quick Reference

	Alameda Alliance	Kaiser	
Asthma Remediation			
Alameda County Public Health ASTHMA START Breathe California Evolve Emod Roots Community Health Center	x x	X X	
Community Transition Services/Facility Transition to Home			
East Bay Innovations Independent Living Systems Omatochi	X X	х	
Serene Health Star Nursing		X X	
Day Habilitation Programs			
Serene Health		Х	
Environmental Accessibility Adaptations (Home Modifications)			
Assured Independence Connect America West Lifeline Systems Company LifewiseCHM East Bay Innovations	X	X X X	

*	EAST BAY INNOVATIONS
About	East Bay Innovations (EBI) is a private non-profit organization providing services to people throughout Alameda County. EBI offers a variety of services supporting more than 500 individuals with disabilities to live as independently as possible in their own homes, to be successfully employed, and to feel a sense of membership in their community.
Location	2450 Washington Avenue, Suite 240 San Leandro, CA 94577
Website	https://www.eastbayinnovations.org/
Main Line	510.618.1580
Provider Type	Enhanced Care Management
Population of Focus	Adults At Risk for Hospital or ED Utilization Adults/Families experiencing Homelessness Adults At Risk for LTC Institutionalization Adult SNF Residents Transitioning to the Community





Coming Soon: Sortable Provider List Spreadsheet

	MCP CONTRACT		ECM		
Provider (See the Provider List on our website for detailed information)	Is this provider contracted with Alameda Alliance for Health (AAH)?	Is this provider contracted with Kaiser Permanente (KP)?	Does this provider offer ECM for Children/Youth?	Does this provider offer ECM for Adults?	Does this provider offer CS?
24 Hour Home Care	x				х
AAT Home Placement Agency		x			
A Better Way, Inc.		x	x		
Accentcare of California		x			х
Agape Village		x	x		
Alameda County Behavioral Health Care Services	x			x	
Alameda County Behavioral Health, Eastmont Health Center	x			x	
Alameda County Community Food Bank	x				х
Alameda County Health Care Services	x				х
Alameda County Public Health (Asthma Start)	x		x		х
Alameda County Public Health, California Children's Services (CCS)	x		x		
Alameda County Recipe4Health	x				х
Alameda Family Services	x	x	x		
Alameda Health System	x			x	
Alameda Health System, Eastmont Wellness	x			x	
Alameda Health System, Hayward Wellness	x			х	
Alameda Health System, Highland Wellness	x			x	
Alegrecare		x			X
Alternative Family Services	x		x		
Amity Foundation		v		v	

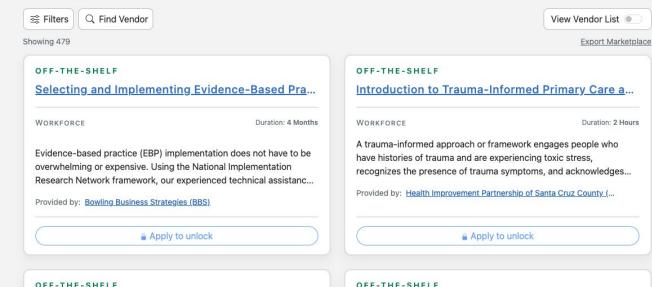
Check out the TA Marketplace!





Sign In

X





OFF-THE-SHELF

Health Insurance Portability and Accountability A...

WORKFORCE

Duration: 3 Months

The goal of this 20-question Risk Assessment is to provide a starting point for healthcare organizations (including hybrid entities) as they begin to evaluate and prioritize their potential liabilities associated...

OFF-THE-SHELF

Evaluation of Care Coordination and Care Manag...

ENHANCED CARE MANAGEMENT (ECM)

Duration: 4 Months

Our goal is to improve ECM, access, coordination, and integration of care by evaluating structures, processes, and outcomes and by identifying key opportunities to improve care management and care...





Wednesday, May 22 | 11am - 12pm
On Zoom
Discuss data sharing and CalAIM with ITUP

Assistant Director of Policy Shirley Lam

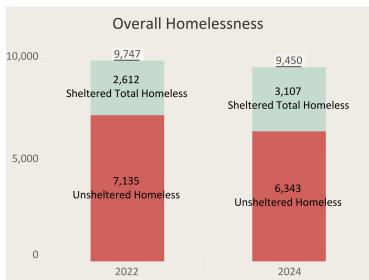
Register Here



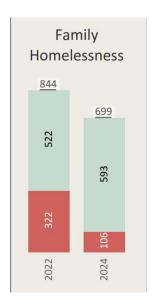


New Data on Homelessness: 2024 Alameda Point-in-Time Survey

- 3% decrease in overall homelessness
- 11% decrease in unsheltered homelessness
- 67% decrease in unsheltered family homelessness
- 70% decrease in unsheltered youth homelessness















MCP updates

Kaiser Permanente

Alameda PATH CPI Meeting
May 2024



Complex care certificate | A free training resource from Kaiser Permanente

The complex care certificate will provide essential knowledge, skills, and attitudes required to provide complex care. This training program is rooted in Camden Coalition's core competencies for frontline complex care providers.

What is complex care?

- Complex care improves health and social well-being or individuals with complex needs.
- Complex care addresses the multiple drivers of health and social needs through collaboration in communities and across sectors.

What is the complex care certificate?

- Nine self-paced online courses (13 CEUs) that teach frontline complex care staff how to engage with complex health and social needs.
- Learners will be equipped with tools to build relationships and address gaps in care delivery that apply to all target populations, from pediatrics to older adults.

The complex care certificate program provides care teams with shared language and frameworks necessary for collaborative care delivery

- KP's California-based community partners
- Frontline complex care practitioners
- Interdisciplinary care teams including community health workers. nurses, doctors, peers, social workers, care managers
- Healthcare and social care workers who want to strengthen their practice of whole person care and team collaboration

The training curriculum is:









Self-paced

Person-centered

Collaborative

Accredited



Complex care certificate | Courses included in the program

Each self-paced online course includes a set of activities for a team to complete together to apply what they have learned to their work.

Complex care certificate courses:

Introduction to complex health and social needs Interplay and compounding effects of multiple health, behavioral health, and social needs	Motivational interviewing in complex care Principles and practices of motivational interviewing in complex care settings
Relationship-building in complex care Building authentic healing relationships, setting boundaries, and establishing self-care practices	Care planning in complex care Generating, implementing, and maintaining strengths-based and person-centered care plans
Power and oppression in complex care Power dynamics in complex care, self-reflection on privilege and bias, and responsible use of power	Complex care delivery Person-centered language, implementing care plans, and navigating complex systems
Trauma-informed complex care Principles and practices of trauma-informed care in complex care settings	Collaboration and communication in complex care teams Building authentic healing relationships, role clarity, collaborative decision-making, and conflict transformation in teams
Harm reduction in complex care Principles and practices of harm reduction in complex care settings	A systems change project (optional for certificate designation) Identifying systems issues, collecting data, storytelling, and implementation within your system/community

Courses contain a diverse array of education methods:



Video, audio, and interactive elements



Patient and practitioner stories



Team activities

Links to research

Reflection and discussion questions

ABOUT THE CAMDEN COALITION



The Camden Coalition is a multidisciplinary nonprofit working to improve care for people with complex health and social needs in Camden, NJ, and across the country. The Camden Coalition works to advance the field of complex care by implementing person-centered programs and piloting new models that address chronic illness and social barriers to health and well-being.



How to Submit a Referral for ECM or Community Supports

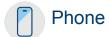
KP has a no-wrong-door approach for referrals

- Referrals are accepted from any source (members, providers, family, community organizations, etc.)
- Use of the KP referral form is recommended; however, KP will accept any referral form created by another Medi-Cal plan. Simply send the completed form to the same KP email address noted below.
- Referrals may be placed via email or via phone.

Sacramento/Central Valley



Amador, El Dorado, Fresno, Kings, Madera, Mariposa, Placer, Sacramento, San Joaquin, Stanislaus, Sutter, Tulare*, Yolo, Yuba



1-833-721-6012 (TTY 711) Monday-Friday (closed major holidays) 9:00 a.m. to 4:45 p.m.



Rest of Northern California

Alameda, Contra Costa, Marin, Napa, San Francisco, San Mateo, Santa Clara, Santa Cruz, Solano, Sonoma,

1-833-952-1916 (TTY 711) Monday-Friday (closed major holidays) 9:00 a.m. to 4:45 p.m.

Send completed <u>referral form to REGMCDURNs-KPNC@kp.org</u> with the subject line "ECM Referral" or "CS Referral"

Southern California

Kern, Imperial, Los Angeles, Orange, Riverside, San Bernardino, San Diego, Tulare*, Ventura,

1-866-551-9619 (TTY 711) Monday-Friday (closed major holidays) 8:30 a.m. to 5:00 p.m.

Send completed <u>referral form</u> to RegCareCoordCaseMgmt@kp.org with the subject line "ECM Referral" or "CS Referral"



How a community-based organization can serve KP members

KP is working with three Network Lead Entities (NLEs) to develop a network of community-based ECM, CS, and CHW providers.

If your organization wishes to become part of an NLE's network, you may send an email message to:



network@fullcirclehn.org

Phone number: 888-749-8877

Full Circle Health Network meets with prospective providers each week on Thursdays from 12-1pm PST https://us06web.zoom.us/i/86507421534



ILSCAProviderRelations@ilshealth.com

Phone number: 305-262-1292



Hubinfo@picf.org

* Phone number: 818-837-3775

In your email, please specify the services your organization provides, geography serviced, and population expertise.

*Partners in Care only serves the Southern California region at this time.



Helpful Links and Contacts

KP 2024 Medi-Cal Direct Contract:	KP.org/Medi-Cal2024
KP Designated Medi-Cal Call Center:	1-855-839-7613 Call to speak to a live Medi-Cal trained agent
KP Medi-Cal Programs (ECM, CS, CHW):	For current information, go to our website: Link
KP Medi-Cal Continuity of Care:	For current information, go to our website: Link
KP Self-Service Community Resource Directory:	KP.org/communityresources 1-800-443-6328 Toll-free number to speak with a resource specialist (M-F, 8a-5p local time)
KP Community Health Care Program:	Available to California residents without access to other health coverage. For current information, go to our website: Link
Medi-Cal Redeterminations Toolkit:	For current information, go to DHCS website: Link
Medi-Cal Rx:	1-800-977-2273
Medi-Cal Dental:	1-800-322-6384



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MCP updates

Birth Equity



ECM is available for individuals who meet the eligibility criteria for the Birth Equity Population of Focus.

Adults or youth who:

 Are pregnant or postpartum (up to 12 months), including pregnancies that ended with live birth, still birth, or spontaneous or therapeutic abortion

AND

Identify as Black, American Indian or Alaska Native, or Pacific Islander

Birth Equity ECM Providers





Alameda Alliance















Kaiser Permanente







DHCS Birth Equity FAQ





State of California—Health and Human Services Agency Department of Health Care Services Last Update: February 2024

Enhanced Care Management Birth Equity Population of Focus: Frequently Asked Questions

Background:

Across California, Medi-Cal provides health insurance coverage for about 40 percent of all births in the state each year. The Department of Health Care Services (DHCS) is taking steps to strengthen coverage and care for birthing populations by implementing Medi-Cal eligibility and benefits changes aimed at improving prenatal and postpartum care and reducing pregnancy-related morbidity and mortality for all Members.

Improving maternal health is one of the DHCS' Comprehensive Quality Strategy "Bold Goals", which specifically seeks to improve maternity outcomes and birth equity, including access to prenatal and postpartum care.

All pregnant and postpartum individuals enrolled in Medi-Cal receive coverage for a range of benefits to support maternal health and family well-being such as the Community Health Worker (CHW) and Doula benefits and the Dyadic Services benefit for children and families, regardless of their eligibility for the Enhanced Care Management (ECM) Birth Equity Population of Focus (POF). DHCS is also developing a comprehensive Birthing Care Pathway — envisioned as a care model with related benefit and payment strategies to reduce maternal morbidity and mortality for all Medi-Cal members who are pregnant and postpartum.

DHCS's <u>PHM Policy Guide</u> outlines expectations for MCPs to provide all medically necessary services for all pregnant and postpartum individuals, including, transitional care services, risk assessment and care planning, and appropriate follow-up care.



ECM and other Medi-Cal Benefits



Doula Benefit: Members receiving doula services *can* also qualify for ECM if they meet eligibility criteria for the population of focus

Dyadic Services Benefit: Members *can* receive both the dyadic services benefit and be enrolled in ECM

CHW Benefit: A Provider cannot bill for services under the CHW Benefit and ECM for the same Member at the same time. The ECM Lead Care Manager is expected to provide services similar to those provided under the CHW Benefit.

Community Referrals for Birth Equity ECM



Providers

OB/GYN Offices, Hospitals, Family Medicine Physicians, Maternal Home Visiting Providers (CDPH's California Home Visiting Program (CHVP)), CDSS' CalWORKs Home Visiting Program (HVP), Doulas and Doula practices/Doula circles, Midwives and Midwifery practices, Promotoras, Community Health Workers (CHWs), Comprehensive Perinatal Health Workers (CPHWs), Community Health Representatives (CHRs), and Behavioral Health Providers

Organizations serving Black, AI/AN and Pacific Islander individuals

- Comprehensive Perinatal ServicesProgram (CPSP)
- Black Infant Health (BIH) Program
- CA Perinatal Equity Initiative (PEI)
- Indian Health Programs
- American Indian Maternal Support Services (AIMSS)
- Tribal Social Services Programs
- Other preexisting local interventions designed to support Black, American Indian and Alaska Native (AI/AN) and/or Pacific Islander birthing populations

Social Services

Organizations/Programs

- Women Infants and Children (WIC) sites
- Community Based Organizations
- Women's and family shelters





Providing Access & Transforming Health



Discussion:

- 1. Who are potential referral partners for the Birth Equity population in Alameda County?
- 2. What resources or processes are needed to bring these partners into the referral system?
- 3. How can we utilize ECM to enhance existing home-visiting and clinical interventions? Any successes to share?

Alameda Alliance for Health Perinatal Services

CalAim PATH Learning Collaborative 5/17/2024





Agenda

- Welcome to Alameda Alliance for Health
 - ☐ Alliance Services for Members
 - ☐ Our Perinatal Population 2023
 - ☐ Alliance Perinatal Supports for Members
 - ☐ The Alliance Doula Program
 - ☐ CA Abundant Birth Project Daphina Melbourne, ACPHD
- Questions



"

Our Mission:

Improving the health and well-being of our members by collaborating with our provider and community partners to deliver high quality and accessible services.

Our Perinatal Population - 2023





Our Perinatal Population - 2023

Medi-Cal Relevant subpopulations - Pregnant/postpartum	Coun t	Percent
GENDER		
Female	4,968	100.0%
Total	4,968	100.0%
AGE BAND		
21-34	3,410	68.6%
35-49	1,144	23.0%
12-20	396	8.0%
50-64	18	0.4%
Total	4,968	100.0%
COUNTY REGION		
North	2,622	52.8%
Central	1,412	28.4%
South	568	11.4%
East	313	6.3%
Other	53	1.1%
Total	4,968	100.0%

PRIMARY RACE/ETHNICITY		
Other	1,725	34.7%
Hispanic	1,693	34.1%
Black	827	16.6%
White	224	4.5%
Chinese	147	3.0%
Other Asian	114	2.3%
Vietnamese	91	1.8%
Pacific Islander	69	1.4%
Filipino	53	1.1%
American Indian or Alaskan Native	13	0.3%
Unknown	12	0.2%
Total	4,968	100.0%

PRIMARY LANGUAGE		
English	3,380	68.0%
Spanish	1,163	23.4%
Chinese	133	2.7%
Arabic	88	1.8%
Vietnamese	72	1.4%
Other Non-English	65	1.3%
Unknown	62	1.2%
Tagalog	5	0.1%
Total	4,968	100.0%

HOMELESSNESS		
Housed	4,519	91.0%
Unhoused	449	9.0%
Tota	I 4,968	100.0%

Alliance Services for Members





Alliance Services for Members

- Primary Care Physicians and Obstetrician Gynecologists (OB/GYN)
- OB or OB/GYN Services
- Direct Access to OB/GYN Services
- Sensitive Services
- Behavioral Health

Primary Care Physician and OB/GYN Services



- A primary care physician practices general healthcare, addressing a wide variety of health concerns for members. They are typically the first person you talk to if you have a health concern.
- An OB/GYN is a doctor of obstetrics and gynecology. These doctors specialize in pregnancy, childbirth, and the female reproductive system.
- Alliance members can search for a provider through the <u>Alliance</u> <u>Provider Directory</u>.



Prenatal and Postpartum Visits

- The Alliance aims to ensure pregnant members receive the care they need during the perinatal period.
- Please encourage your clients to schedule and attend timely pregnancy care appointments:
 - ☐ Prenatal visit in the first trimester or within 42 days of enrollment
 - ☐ Additional prenatal visits as determined by the member's health care provider
 - ☐ Postpartum visit on or between 7 and 84 days after delivery
- Members can contact the Alliance Member Services Department at 1.510.747.4567 to help find a provider and schedule an appointment.



Well Child Visits

- Babies and toddlers grow quickly, so it is important that they visit their doctor for checkups, preventative screenings and vaccines.
 - ☐ The Alliance has created a chart to highlight the recommended timing for these visits and help members keep track of these appointments.

			AGE 0	TO 12 MO	NTHS		
	3-5 days	1 month	2 months	4 months	6 months	9 months	12 months
DAIE							
	15 mo	nths	AGE 15	TO 30 MC	ONTHS 24 months	30	months
DATE	131110	11013	10 months		24 110/1013	30	monuis

Members can cost find a provider and some and appearance and appea

510.747.4567 to help



Well Child Visits

	Age	Visits	Developmental Screening	Social and Behavioral Screening	Immunization	Lead Screening	Fluoride Varnish*
	Newborn	•		•	•		
	3-5 days	•		•	•		
5	1 month	•		•	•		
Infancy	2 months	•		•	•		
≟	4 months	•		•	•		
	6 months	•		•	•	*	
	9 months	•	•	•	•		
	12 months	•		•	•	•	
> 00	15 months	•		•	•		
투속	18 months	•	•	•	•	*	
Early Childhood	24 months	•		•	•	•	
0	30 months	•	•	•	•		$\overline{}$

^{*}Fluoride varnish should be applied every three (3)-six (6) months.

Visits:

● = To be performed ★ = Risk assessment to be performed with appropriate action to follow, if positive

→ = range during which a service may be provided



Direct Access to OB/GYN Services

Female members of the Alliance may self-refer for covered obstetrical and gynecological services from OB/GYNs participating within the Alliance or their medical group's network.

^{*} Referral requirements may vary depending on the member's assigned Alliance medical group. Please contact the member's assigned medical group to find out if a referral is required for a particular service.



Sensitive Services

- Sensitive services are those services designated by Medi-Cal as available to members without a referral or authorization in order to protect patient confidentiality and promote timely access.
- Sensitive services include family planning, screening and treatment for sexually transmitted diseases, HIV testing, and abortions.
- All Alliance Medi-Cal members may go outside of their medical group's network for sensitive services, which does not include prenatal care.
- Authorization is not required for prenatal care, but members must stay within their medical groups.



Sensitive Services (cont.)

Abortion

- Alliance Medi-Cal members may obtain abortion services from any Medi-Cal provider without a referral or authorization.
 - ☐ In-network abortion services are available to all Alliance members without referral or authorization.
 - Abortion services from non-Alliance providers are also available to all Alliance members without referral or authorization.



Behavioral Health

- All Alliance members have access to outpatient and inpatient behavioral health care, which includes substance abuse treatment. PCPs and specialists can encourage members in need of behavioral health care to access this free and confidential benefit.
- Members may contact Alliance Health Programs at 510.747.4577 for more information or may search for a provider through the <u>Alliance Provider Directory</u>.

Alliance Perinatal Supports for Members





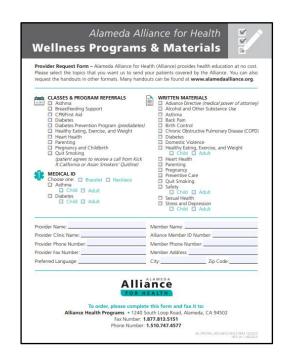
Health Education

- The Alliance has health information, self-management tools and referrals to materials, programs and classes for all members at no cost.
- Health topics include:
 - ☐ Conditions like diabetes, asthma and hypertension
 - ☐ Pregnancy, breastfeeding (lactation consultants) and parenting
 - ☐ Healthy weight, nutrition and exercise
 - ☐ Smoking cessation, Diabetes Prevention Program (DPP), and others



Health Education (cont.)

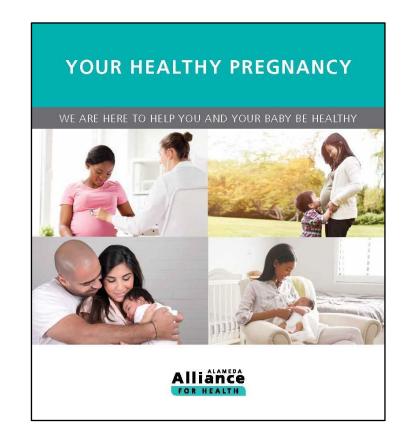
- Members will receive prenatal and postpartum mailings to inform them of available resources and supports.
- The <u>Provider Resource Directory</u> lists classes, programs and community referrals available to at no cost to Alliance members.
- Providers can refer using the <u>Wellness</u> <u>Provider Fax Request Form</u>.





Health Education Materials

- Member can also request care books about pregnancy, preventive care, healthy eating, and more!
 - Available in English, Spanish, Chinese, Vietnamese, Tagalog, and other languages on request
- Members can complete the Wellness Request Form or call Health Programs at 1.510.747.4577 to request class listings and materials in our threshold languages (English, Spanish, Chinese, & Vietnamese).
- Other community resources online: www.alamedaalliance.org/live-healthy





Health Education Classes

- Topics include:
 - Pregnancy and Childbirth
 - ☐ Breastfeeding
 - Parenting
- Refer to the Provider Health Education Resource Directory for classes and other resources.
- Members can request interpreter for some classes.
- Member can request class list on Wellness Request Form or call Member Services.

PROVIDER RESOURCE GUIDE

PAGE 6

Pregnancy and Childbirth Members: 1.510.747.4577

The Alliance pays for childbirth education for members at your delivery hospital. Alliance staff can facilitate the arrangements, or our members may sign up directly with the hospital.



1100 San Leandro Blvd., San Leandro Phone Number: 1.510.618.2019

Weekly group sessions for African American pregnant and parenting people 18 years of age and older. Provides education, support, and case management.

Alameda County: Starting Out Strong Phone Number: 1.510.667.4333 Email: homevisiting@acgov.org www.facebook.com/ACPHDStartingOutStrong

Starting Out Strong programs offer family support services and health education to people who are pregnant, parenting a child under 36 months, or have suffered a pregnancy loss and want to become pregnant again. Referral form is available on their website.

City of Berkeley: Quit Smoking Class Phone Number: 1.510.981.5330

Email: quitnow@cityofberkeley.info

"Freedom from Tobacco" quit smoking classes is an 8-class series, Alliance members can call to sign up.

Toll-Free: 1.877.879.6422

www.nica-norcal.org/meetings www.nicotine-anonymous.org

Nicotine Anonymous brings together groups of people who have felt the grip of nicotine addiction. The primary purpose is to help others to live free of nicotine. Meetings can be in-person, online, or over the phone.

Toll-Free: 1.877,448,7848

www.smokefree.gov

Connect with a specialist in English or Spanish to get information and answers about quitting smoking. Visit online to receive tools, tips, and resources.

The provider of vision care depends on the Alliance plan

in which the member is enrolled.

Alliance Group Care Members Alameda County Public Authority: 1.510.577.3552

Alliance Medi-Cal Members

March Vision Care: 1.844.336.2724

Information and Referral Numbers



County Referrals

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We	e refer members who meet program criteria to:
	Black Infant Health
	☐ Weekly group sessions for Black/ African American pregnant and parenting adults.
	 Doulas or members can contact Shamelle Bremond - BIH Family Support Case Manager at 510.612019 or by ema Shamelle.Bremond@acgov.org
	Alameda County WIC
	Nutrition education, supplemental food, and breastfeeding support for pregnant and postpartum women, infants, and children up to age 5.
	Doulas or members can sign-up for an enrollment appointment.
	Asthma Start
	☐ In-home case management for families of children with asthma ages 0-18 living in Alameda County.
	Doulas or members may complete this <u>referral form</u> , or call the Asthma Start Program at 510.383.5181.



Resources

- <u>Text4Baby</u>
 - ☐ English, Spanish
 - ☐ Texts information & appointment reminders
- <u>Kick It California & Asian Smoker's</u> <u>Quitline</u>
 - ☐ English, Spanish, Chinese, Vietnamese, Korean
 - ☐ Web referrals available
 - ☐ Text or live support
 - ☐ Support tailored to pregnant individuals

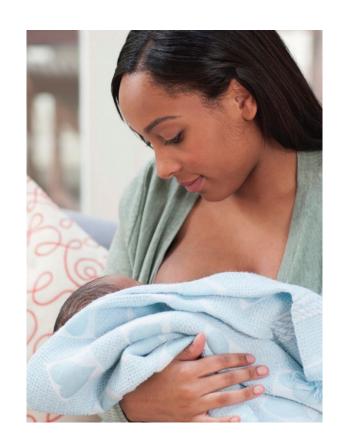






Lactation Consults

- The Alliance offers International Board-Certified Lactation Consultants (IBCLCs) through Alta Bates Summit Medical Center
- Members call to schedule an appointment:
 - ☐ Alta Bates Summit Medical Center Monday through Friday 9 am to 4 pm Phone number: **1.510.204.6546**
- Members can also get support with breastfeeding from local WIC offices https://www.myfamily.wic.ca.gov/
- Additional breastfeeding resources can be found at https://acphd.org/acbreastfeeds/





Breast Pumps

- Considered Durable Medical Equipment (DME)
 - ☐ A licensed clinical provider must initiate a <u>request</u>
 - ☐ Requires an authorization
- Pumps are provided by California Home Medical Equipment (CHME)
- Can use <u>Breast Pump Request Form</u> to make request (includes pump options)
 - ☐ For Hospital Grade, clinical notes must be included

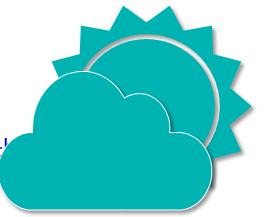
Fax to CHME 1.650.931.8928

Phone Number: 1.800.906.0626



Maternal Mental Health

- BirthWise Wellbeing Program
 - ☐ Member can self-refer: Call Alliance Member Services Department at 1.510.747.4567
- Find a behavioral health care provider
 - Member can self-refer: Call Alliance Member Services Department at 1.510.747.4567.
 - Provider referral form https://alamedaalliance.org/providers/provider-forms/
- National Maternal Mental Health Hotline
 - https://mchb.hrsa.gov/national-maternal-mental-healthotline





Transitional Care Services

- The Alliance provides Transitional Care Services (TCS) to members who are transferring from one setting or level of care to another, including discharge from an inpatient stay for labor and delivery to the community and/or home.
 - ☐ A single point of contact can help members during this transition.
 - ☐ Transitional Care Services will be offered to members who meet criteria.
 - ☐ Members can also self-refer by contacting the Case and Disease Management Department at 1.510.747.4512.

California Abundant Birth Project

Daphina Melbourne Alameda County Public Health Department





FREQUENTLY ASKED QUESTIONS

CA ABP Eligibility Criteria

The California Abundant Birth Project is designed to provide monthly cash gifts to eligible participants in order to support people at risk for poor birth outcomes. More information on program eligibility is below.

How do I know if I am eligible?

To be eligible, you must:

- Live in Alameda, Contra Costa, Los Angeles, or Riverside counties
- Be 8-27 weeks pregnant at the time of the
- Abundance Drawing

 Have household income under the
- following for your county:
 - o Alameda: \$128,017
- Contro
- o Contra Costa: \$132,360
- o Los Angeles: \$106,911
- o Riverside: \$81,581

- And identify with one or more of the following risk factors for preterm birth:
 - Are Black or African American
 Have had a previous preterm birth (live birth before 37 weeks)
 - Have preexisting hypertension (before this pregnancy)
 - Have preexisting diabetes (before this pregnancy)
- Have sickle cell anemia (SCA)
 Not be currently participating in another guaranteed income program.

Do I have to be Black to participate? What if I do not fall into the risk factor categories?

Applicants need to identify with one or more of the high risk factors for preterm birth to be eligible, which includes being Black or having one of the medical conditions listed.

What if I do not currently live in one of the participating counties?

The program is currently specific to people who live in Alameda, Contra Costa, Los Angeles, and Riverside counties. Our goal is to expand to other counties in the future.

What documents will I need in order to complete the application?

We will need you to upload a form of ID, a Proof of Pregnancy form, and a Proof of Residence document. Please see here for the full list of documents.

Do I need to include everyone's income where I live?

Yes, the income eligibility is based on the total income of all adults in the household.

I am 27 weeks pregnant. Can I still apply?

Participants must be 27 weeks or earlier in their pregnancy to be eligible to participate in the program. Because we do not automatically enroll applicants in the program, we recommend applying at 25 weeks pregnant or earlier.

If you have any questions please feel free to reach out to us at info@abundantbirthproject.org

The Alliance Doula Program





The Alliance Doula Program Mission

- Doulas provide health education, advocacy, and physical, emotional, and non-medical support for pregnant and postpartum members before, during, and after childbirth, including support during miscarriage, stillbirth, and abortion.
- Our mission is to ensure all perinatal members have access to the doula services they require to feel supported throughout their pregnancy and in the postpartum period.



Doula Services at the Alliance

- Alameda Alliance offers doula services to Medi-Cal members through a network of doula providers.
- Members can connect with a doula:
 - ☐ Call the Alliance Member Services Department at **1.510.747.4567** (current preferred method).
 - ☐ Search the Alliance Provider Directory https://alamedaalliance.org/help/find-a-doctor/ and contact a doula directly (will be available soon).
 - ☐ Ask your provider to send a recommendation to a doula (not required).



The Alliance Doula Program Strategy

- Support a robust, knowledgeable, and high-quality doula provider network.
 - ☐ Integrate doula services across care continuum.
- Support our diverse community in becoming doulas to provide culturally and linguistically concordant care to our members.
- Educate providers and members about the benefits of doula services.
- Identify and provide targeted support to members experiencing maternal and child health inequities through doula services.
- Positively impact the maternal and infant health outcome disparities that exist for birthing people in Alameda County.

Questions?





Contact Us

For questions regarding Alliance processes, contact the Provider Services Department at:

Phone Number: 1.510.747.4510

Email: providerservices@alamedaalliance.org

For questions regarding Alliance services for members, contact the Member Services Department at:

Phone Number: 1.510.747.4567

Email: <u>memberservices@alamedaalliance.org</u>







Thank you for attending!



Providing Access & Transforming Health



Appendix

2024 Collaborative Aims and Objectives



Alameda Collaborative Aim

By Dec 2024,
increase eligible
members
authorized for ECM
by 15% &
Community
Supports by 15%

Objectives

Build resources and relationships to drive community referrals

Strengthen ECM and Community Supports provider capacity

3 Facilitate relationship building between providers, plans, and referral partners

Activities

(additional activities in development)

CalAIM 101 trainings

Care Coordination Provider
List

PoF-specific post-meeting action items

ECM & CS Member Engagement Job Aid

In-Person Meetings

Alameda Collaborative
Resource Hub

What is Enhanced Care Management (ECM)?

FCM is a Medi-Cal benefit and is a whole-person, interdisciplinary approach to care that addresses the clinical and non-clinical needs of members with complex medical and social needs through systematic coordination of services & comprehensive care management that is community based, interdisciplinary, high touch and person centered.

Core Services



Assigned to a Care Manager



Comprehensiv e assessment & care management plan



Implement care plan and coordinate with multidisciplinary team



Health promotion/ support to adopt healthy behaviors



Ensure member and family are informed and engaged



Referring members to resources, including following up to ensure services were



rendered



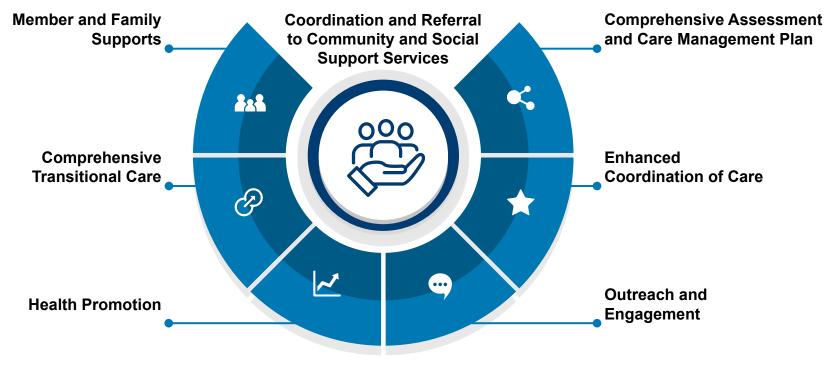
Care transitions/ medication reconciliation

Emphasis on face-to-face coordination. including appointment accompaniment as needed

KAISER PERMANENTE

Core Elements of Enhanced Care Management

Enhanced Care Management connects high-need members with quality, person-centered care.



Who is Eligible for ECM?

"Population of Focus" Categories





i opulat	1011 0	11 Jours Julies	II ADOLIO	100111	
\bigcirc	1	Individuals or Families Experiencing Homelessness	Jan 2022	Jul 2023	
(*************************************	2	Individuals At Risk for Avoidable Hospital or ED Utilization (formerly called "High Utilizers")	Jan 2022	Jul 2023	
	3	Individuals with Serious Mental Health and/or Substance Use Disorder Needs	Jan 2022	Jul 2023	
	4	Individuals Transitioning from Incarceration	Jan 2022 (some counties) Jan 2024 (statewide)	July 2023 (some counties); Jan 2024 (statewide)	
	5	Adults Living in the Community and At Risk for LTC Institutionalization	Jan 2023	n/a	
	6	Adult Nursing Facility Residents Transitioning to the Community	Jan 2023	n/a	
G G	7	Children and Youth Enrolled in California Children's Services (CCS) or CCS Whole Child Model (WCM) with Additional Needs Beyond the CCS Condition	n/a	Jul 2023	
	8	Children and Youth Involved in Child Welfare	n/a	Jul 2023	
Ŷ	9	Birth Equity	Jan 2024	Jan 2024	

Adults are 21+

What are Community Supports?

Community Supports (CS) are non-medical, wrap-around services provided as a substitute or support to avoid other Medi-Cal covered services such as emergency room visits, an avoidable hospital or skilled nursing facility admission, or a discharge delay. As of 1/1/24, most of the counties KP serves offer all 14 of the Community Supports.*

Supports for Housing Insecurity



Primary Audience: Individuals experiencing homelessness

- 1. Housing Transition Navigation Services
- 2. Housing Deposits
- 3. Housing Tenancy & Sustaining Services
- 4. Short-Term Post Hospitalization Housing
- 5. Recuperative Care (Medical Respite)
- 6. Day Habilitation

Supports to Keep People at Home



Primary Audience: Individuals at risk for institutionalization in a nursing home

- 7. Respite Services (for caregivers)
- 8. Nursing Facility Transition/
 Diversion to Assisted Living
 Facilities
- Community Transition Services/ Nursing Facility Transition to a Home
- 10. Personal Care & Homemaker Services
- Environmental Accessibility
 Adaptations (Home Modifications)

Supports to Improve a Chronic Condition



Primary Audience: Individuals who have certain chronic conditions and require support

- 2. Meals/Medically Tailored Meals
- 3. Asthma Remediation

Support to Recover from Acute Intoxication



Primary Audience: Individuals found publicly intoxicated to divert from jail or the Emergency Department

4. Sobering Centers

Note: majority of the referrals for this service are from law enforcement and stays must he less than 24 hours

*Exceptions include the following CS which are **not** offered in these counties:Asthma Remediation (Marin, Mariposa, Napa, Placer, San Mateo, Santa Cruz, Solano, Sonoma, Sutter, Yolo); Day Habilitation (Marin, Mariposa, Napa, Placer, San Mateo, Santa Cruz, Solano, Sonoma, Sutter, Ventura, Yolo); Recuperative Care (San Mateo); Short Term Post Hospitalization Housing (Alameda, San Mateo); Sobering Centers (Contra Costa, Marin, Mariposa, Napa, Placer, San Mateo, Santa Cruz, Solano, Sonoma, Sutter, Ventura, Yolo)



Enhanced Care Management (ECM) Providers in Alameda County

Organizations listed have executed contracts with KP as of **May 14, 2024.**

Other providers are welcomed to apply to join our provider network via the NLEs.



Provider	Services/Populations of Focus	Phone Number
A Better Way Inc	Children & Youth - Individuals with SMI/SUD Children & Youth - Involved in Child Welfare	510-433-8600
AAT Home Placement Agency	Adults - living in the community at-risk for LTC Adults - NF residents transitioning to the community	209-594-5980
Agape Village	Children & Youth - Individuals Experiencing Homelessness Children & Youth - Individuals at-risk for IP and ED Children & Youth - Individuals with SMI/SUD Children & Youth - Individuals transitioning from incarceration Children & Youth - Enrolled in California Children's Services (CCS) or WCM w/needs Children & Youth - Involved in Child Welfare Children & Youth - Pregnant and Postpartum Individuals at-risk for Adverse Perinatal	510-835-2641
Alameda Family Services	Children & Youth - Individuals Experiencing Homelessness Children & Youth - Individuals at-risk for IP and ED Children & Youth - Individuals with SMI/SUD Children & Youth - Individuals transitioning from incarceration Children & Youth - Pregnant and Postpartum Individuals at-risk for Adverse Perinatal	510-629-6301 (Oakland) 925-474-2154 (Pleasanton)
Alternative Family Services	Children & Youth - Individuals with SMI/SUD Children & Youth - Individuals transitioning from incarceration Children & Youth - Involved in Child Welfare	530-283-3330
CityServ	TBD	(559) 802-3667
EA Family Services	Adults - Individuals Experiencing Homelessness Adults - Individuals at-risk for IP and ED Adults - Individuals transitioning from incarceration (Adult) Adults - Pregnant and Postpartum Individuals at-risk for Adverse Perinatal Children & Youth - Individuals Experiencing Homelessness Children & Youth - Individuals at-risk for IP and ED Children & Youth - Individuals transitioning from incarceration Children & Youth - Involved in Child Welfare	(510) 268-3770
East Bay Agency of Children	Children & Youth - Individuals Experiencing Homelessness Children & Youth - Individuals at-risk for IP and ED Children & Youth - Individuals with SMI/SUD Children & Youth - Individuals transitioning from incarceration	510-547-7322

Enhanced Care Management (ECM) Providers in Alameda County

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Provider	Services/Populations of Focus	Phone Number
Family Resource Navigators	TBA	858-444-8827
Fred Finch Youth & Family Services.	Children & Youth - Individuals at-risk for IP and ED Children & Youth - Individuals with SMI/SUD Children & Youth - Individuals transitioning from incarceration Children & Youth - Involved in Child Welfare	530-283-3330
Independent Living Systems	Adults - Individuals Experiencing Homelessness Adults - Individuals at-risk for IP and ED Adults - Individuals with SMI/SUD Adults - Individuals transitioning from incarceration (Adult) Adults - Iving in the community at-risk for LTC Adults - NF residents transitioning to the community Adults - Individuals with Intellectual or Developmental Disabilities Children & Youth - Individuals Experiencing Homelessness Children & Youth - Individuals at-risk for IP and ED Children & Youth - Individuals with SMI/SUD Children & Youth - Individuals with Intellectual or Developmental Disabilities (I/DD) Children & Youth - Pregnant and Postpartum Individuals at-risk for Adverse Perinatal	844-320-5182
J&M Homecare Services, LLC	Adults - Individuals at-risk for IP and ED Adults - living in the community at-risk for LTC Adults - NF residents transitioning to the community	925-552-6500
Koinonia Foster Homes, Inc. [Birth Equity Specialty Provider Type]	Children & Youth - Individuals Experiencing Homelessness Children & Youth - Individuals at-risk for IP and ED Children & Youth - Individuals with SMI/SUD Children & Youth - Individuals transitioning from incarceration Children & Youth - Enrolled in California Children's Services (CCS) or WCM w/needs Children & Youth - Involved in Child Welfare Children & Youth - Individuals with Intellectual or Developmental Disabilities (I/DD) Children & Youth - Pregnant and Postpartum Individuals at-risk for Adverse Perinatal	209-577-3737



Enhanced Care Management (ECM) Providers in Alameda County

Organizations listed have executed contracts with KP as of **May 14, 2024.**

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Provider	Services/Populations of Focus	Phone Number
Lincoln Families	Children & Youth - Involved in Child Welfare	510-273-4700
New Dimensions Foster Family Agency	TBA	209-526-1837
Seneca Family of Agencies [Birth Equity Specialty Provider Type]	Children & Youth - Individuals Experiencing Homelessness Children & Youth - Individuals at-risk for IP and ED Children & Youth - Individuals with SMI/SUD Children & Youth - Individuals transitioning from incarceration Children & Youth - Enrolled in California Children's Services (CCS) or WCM w/needs Children & Youth - Involved in Child Welfare Children & Youth - Individuals with Intellectual or Developmental Disabilities (I/DD) Children & Youth - Pregnant and Postpartum Individuals at-risk for Adverse Perinatal	510-654-4004
Serene Health IPA	Adults - Individuals Experiencing Homelessness Adults - Individuals at-risk for IP and ED Adults - Individuals with SMI/SUD Adults - Individuals transitioning from incarceration (Adult) Adults - Iiving in the community at-risk for LTC Adults - NF residents transitioning to the community Adults - Pregnant and Postpartum Individuals at-risk for Adverse Perinatal Children & Youth - Enrolled in California Children's Services (CCS) or WCM w/needs Children & Youth - Involved in Child Welfare Children & Youth - Individuals with Intellectual or Developmental Disabilities (I/DD) Children & Youth - Pregnant and Postpartum Individuals at-risk for Adverse Perinatal	844-737-3638
Side by Side	Children & Youth - Individuals with SMI/SUD Children & Youth - Involved in Child Welfare	510-727-9401
Star Nursing Inc	Adults - Individuals Experiencing Homelessness Adults - Individuals at-risk for IP and ED Adults - Individuals with SMI/SUD Adults - living in the community at-risk for LTC Adults - NF residents transitioning to the community Children & Youth - Individuals Experiencing Homelessness Children & Youth - Individuals at-risk for IP and ED Children & Youth - Individuals with SMI/SUD	877-687-7399

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Enhanced Care Management (ECM) Providers in Alameda County

Organizations listed have executed contracts with KP as of May 14, 2024.

Other providers are welcomed to apply to join our provider network via the NLEs.



Provider	Services/Populations of Focus	Phone Number
Stars Behavioral Health Group	Children & Youth - Individuals at-risk for IP and ED Children & Youth - Individuals with SMI/SUD Children & Youth - Individuals transitioning from incarceration Children & Youth - Involved in Child Welfare	510-352-9200
Sterling Hospitalist Medical Group, Inc	Adults - Individuals Experiencing Homelessness Adults - Individuals at-risk for IP and ED Adults - Individuals with SMI/SUD Adults - Iiving in the community at-risk for LTC Adults - NF residents transitioning to the community Adults - Individuals with Intellectual or Developmental Disabilities Children & Youth - Individuals Experiencing Homelessness Children & Youth - Individuals at-risk for IP and ED Children & Youth - Individuals with SMI/SUD Children & Youth - Individuals with Intellectual or Developmental Disabilities (I/DD)	714-897-1071
Unity Care Group, Inc.	Children & Youth - Individuals Experiencing Homelessness Children & Youth - Individuals at-risk for IP and ED Children & Youth - Individuals with SMI/SUD Children & Youth - Individuals transitioning from incarceration Children & Youth - Involved in Child Welfare	ТВА
WestCoast Children's Clinic	Children & Youth - Individuals Experiencing Homelessness Children & Youth - Individuals at-risk for IP and ED Children & Youth - Individuals with SMI/SUD Children & Youth - Individuals transitioning from incarceration Children & Youth - Enrolled in California Children's Services (CCS) or WCM w/needs Children & Youth - Involved in Child Welfare Children & Youth - Pregnant and Postpartum Individuals at-risk for Adverse Perinatal	510-269-9030



Community Supports (CS) Providers in Alameda County

Organizations listed have executed contracts with KP as of May 14, 2024.

Other providers are welcomed to apply to join our provider network via the NLEs.



Provider	Services/Populations of Focus	Phone Number
AAT Home Placement Agency	Housing Transition/Navigation Services, Deposits, AND Tenancy & Sustaining Services Nursing Facility Transition/Diversion to Assisted Living Facilities Community Transition Services/Nursing Facility Transition to a Home	209-594-5980
AccentCare of California	Respite Services Personal Care and Homemaker Services	818-837-3775
Aging Assistant LLC	Respite Services Personal Care and Homemaker Services	916-753-7622
Alegrecare, Inc	Personal Care and Homemaker Services	800-598-4777
ASSURED INDEPENDENCE	Home Modifications	425-516-7400
Breathe California	Asthma Remediation	408-998-5865
Cardea Health	Recuperative Care	1 (510) 835-3700
Central Coast	Asthma Remediation	1 (408) 998-5865
CityServ		(559) 802-3667
Connect America West	Home Modifications	707-200-2138
EA Family Services	TBA	530-283-3330
Eddie's Place	Recuperative Care	615-226-2292
Evolve Emod, LLC	Home Modifications Asthma Remediation	844-438-7577
Home Safety Services, Inc	Home Modifications	888-388-3811
Independent Living Systems	Housing Transition/Navigation Services Housing Deposits Housing Tenancy & Sustaining Services Nursing Facility Transition/Diversion to Assisted Living Facilities Community Transition Services/Nursing Facility Transition to a Home Environmental Accessibility Adaptations (Home Modifications) Asthma Remediation Personal Care and Homemaker Services Respite Services Day Habilitation Programs	844-320-5182
J&M Homecare Services, LLC	Respite Services Personal Care and Homemaker Services	925-552-6500
Lifeline Systems Company	Home Modifications	800-451-0525

Community Supports (CS) Providers in Alameda County

Organizations listed have executed contracts with KP as of May 14, 2024.

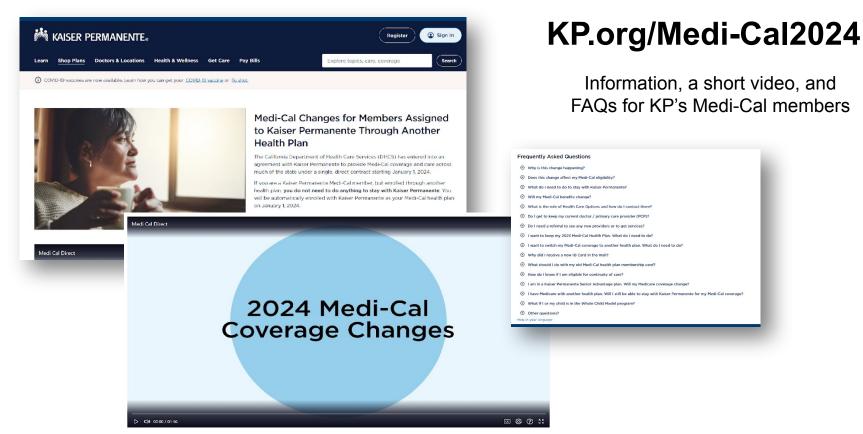
Other providers are welcomed to apply to join our provider network via the NLEs.



Provider	Services/Populations of Focus	Phone Number
LifewiseCHM Renovations	Environmental Accessibility Adaptations (Home Modifications)	1 (913) 380-4246
Mom's Meals	Meals/Medically Tailored Meals	877-508-6667
Pear Suite, Inc	Housing Transition/Navigation Services Housing Deposits Housing Tenancy & Sustaining Services Asthma Remediation	628-204-4124
Performance Kitchen	Medically Tailored Meals	512-608-1609
Serene Health IPA	Housing Transition/Navigation Services Housing Deposits Housing Tenancy & Sustaining Services Short-Term Post-Hospital Housing Community Transition Services/Nursing Facility Transition to a Home Day Habilitation	844-737-3638
Star Nursing Inc	Housing Transition/Navigation Services Nursing Facility Transition/Diversion to Assisted Living Facilities Community Transition Services/Nursing Facility Transition to a Home Respite Services Personal Care and Homemaker Services	877-687-7399
Sterling Hospitalist Medical Group, Inc	Housing Transition/Navigation Services Housing Deposits Housing Tenancy & Sustaining Services	714-897-1071
Uncuffed Project Inc	Recuperative Care	415-320-8798
WINETEER INC DBA LIFEWISECHM	Home Modifications	913-653-0766
24 Hour Home Care	Personal Care and Homemaker Services	866-311-6265



NEW On Kaiser Permanente's website





KP Member Services



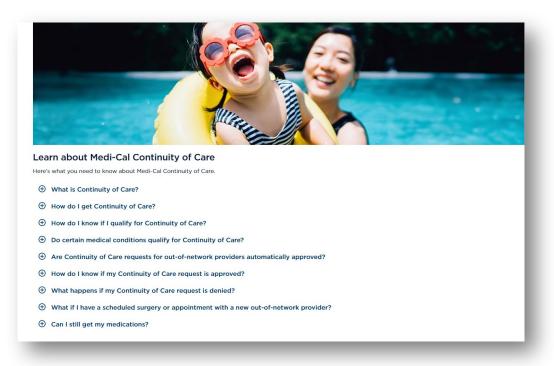
✓ Urgent advice and appointment services available by phone 24/7 from live KP staff.

✓ Services available in multiple languages.

Our robust web site and mobile app allow enrollees to access medical advice, make appointments, message their care providers, order medications, and much more.



Continuity of Care for KP Medi-Cal Enrollees



If members have questions about Continuity of Care

Call KP Member Services 1-855-839-7613 (TTY 711)

24 hours a day, 7 days a week

For current information, go to our web page:

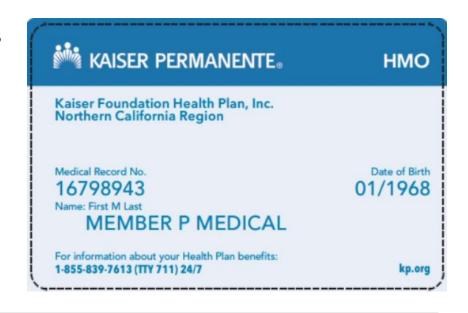
https://healthy.kaiserpermanente.org/northern-california/shop-plans/medicaid/medi-cal/medi-cal-continuity-of-care



Dedicated Call-In Service for Medi-Cal Beneficiaries

KP Medi-Cal Call Center

- 24/7 Designated Medi-Cal Line: 1-855-839-7613 Call to speak to a live Medi-Cal trained agent.
- One phone number for all Medi-Cal members to receive information and be warm transferred to make appointments (medical, vision, transportation, mild-to-moderate behavioral health).
 - If a member calls the main KP member services number (1-800-464-4000) with their ID information, they will be automatically routed to a Medi-Cal trained agent.
 - If the member does not supply their ID information, and they reach an agent who is not Medi-Cal trained, they will be warm transferred to a Medi-Cal trained agent.



Non-KP Services

Placer County Mental Health Services (Adult) 1-888-886-5401* Medi-Cal Rx: 1-800-977-2273 Placer County Mental Health Services (Family & Children) 1-866-293-1940*

Sutter & Yuba Counties Mental Health Services 1-888-923-3800*

Medi-Cal Dental: 1-800-322-6384

*From DHCS County Mental Health Plan Information Site (https://www.dhcs.ca.gov/individuals/Pages/MHPContactList.aspx)



Transportation Services for KP Medi-Cal Members

Medi-Cal members can get help with non-medical transportation to and from medical appointments.

Transportation services are available for ...



- ✓ KP Medi-Cal members, who have no other way to get to their medical appointment or service
- Those who are able to get in and out of a vehicle without assistance from the driver



Transportation services available to...

- ✓ Go to a doctor appointment
- ✓ Get medical services such as lab work or X-rays
- ✔ Pick up medicine that can't be sent by mail
- ✔ Pick up medical supplies or equipment

To request non-medical transportation services in San Bernadino County ...



- ✓ Members should call at least three days before an appointment
- ✓ Rides are available Monday through Friday, 5 a.m. to 7 p.m.
- For urgent needs, such as a hospital discharge, call for a ride 24 hours a day, 7 days a week.

To schedule a ride, Medi-Cal members may call KP Transportation Services at **1-844-299-6230**.

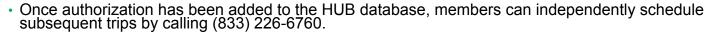


Additional Transportation Services for KP Medi-Cal Members

For members needing wheelchair van services, gurney van services, or other special transportation (Non-Emergency Medical Transportation)



- For Medi-Cal members with medical, mental, and/or physical conditions that make transport by ordinary means impossible, or when the member requires specialized safety equipment that is not normally available in passenger cars, taxicabs, or other forms of public transportation.
- A physician must indicate medical necessity.
- Once clinical criteria are met, the provider submits the request to the KP Ambulance HUB. Within 48 hours, the HUB updates the database with member information.







Important Contact Information



DHCS/Health Care Options :**1-800-430-4263** (TTY **1-800-430-7077**)

Monday - Friday, 8 a.m. to 6 p.m.



For more information or assistance in enrolling in KP Medi-Cal, please call:

Kaiser Permanente Medicaid Assistance Center 1-800-557-4515 1-800-557-4515 (TTY 711) Monday - Friday, 8 a.m. to 5 p.m.



Kaiser Permanente Community Support Hub

August 2, 2023

Social health resources are just a click or call away

The Kaiser Permanente Community Support Hub can help members find community resources to address their total health.

Having enough food to eat, money to pay the bills, and a safe place to call home is essential for good health. That's why Kaiser Permanente launched the Kaiser Permanente Community Support Hub.

After years of work to understand and address social factors that affect our members' health, Kaiser Permanente created the hub - consisting of a free, self-service, online resource directory, and more. It enables Kaiser Permanente to proactively screen more members for social needs and connect those who need support to community-based resources and government assistance programs.

In 2022, Kaiser Permanente screened millions of members for social health needs - asking, for example, if they needed help paying rent, accessing healthy food, or securing other essentials that lead to good health. We then connected more than 170,000 members to community-based resources. Kaiser Permanente will continue to expand that support through the hub, with the goal of serving every member who wants social needs assistance

Assistance programs and community resources



Learn about the Affordable Connectivity Program

Check eligibility for this government program that helps fund internet service & devices.



Social connections for older

Fill your calendar and, at the same time, grow a community of others who share



Wondering what SNAP could do for you?

Explore the Supplemental Nutrition Assistance Program's benefits and see if you're eligible to apply.



You may be able to claim additional tax credits

Learn about this free service that can help you look for credits you may be eligible for.



Find community resources near you

If you need help with food, housing, paying for internet and other utilities, and more, explore our directory of community-based programs and services in your area.

Search the directory



Need extra help with your search?

You can also talk to a Kaiser Permanente resource specialist. Get started by calling 1-800-260-7445 (TTY 711), Monday through Friday, 8 a.m. to 5 p.m. in your time zone



NEW from Kaiser Permanente: Connections



Connecting member with community resources

When KP members and patients need support with social needs such as housing, healthy food, transportation, utility bills, and more, we can help.

These self-service options are available as an added layer of support for members who need help finding local social services and community-based programs in their areas.

Members/non-members can find assistance at:

KP.org/communityresources (Self-Service Community Resource Directory) **(800) 443-6328** – Toll-free number to speak with a resource specialist (M-F, 8a-5p local time)



Connections is helping members in need

Mom worried about her homeless son is directed to emergency food and housing resources in son's area

> Husband and wife awaiting surgery and can't cook are connected to agency providing prepared-foods

Connections agents began working with individuals facing significant – sometimes heart-wrenching – need. Connections services include:

- Assessing member's needs using screening questions and offering tailored recommendations of resources in the member's community
- Providing high-touch service, including follow-up calls to members* within 48 hours after resources are shared to ensure they received assistance.
- Hold three-way calls with the member and the community provider.
- Augmenting data available in the Resource Directory to ensure information provided is accurate and up to date

*those who opt-in to a follow-up call





Caller connected to family services support for husband receiving dialysis

Sister overwhelmed because her brother is in a wheelchair and keeps falling is directed to assisted living resources



Appendix





Case Management

>	The Case Management Department provides:
	☐ Care Coordination
	☐ Complex Case Management
	☐ Community Supports
	☐ Enhanced Care Management
	☐ Transitional Care Services
>	Providers may refer members for any of the above services by using the <u>Alliance Case Management Referral Form</u> .
	☐ Member can self-refer: Call Alliance Member Services Department at 1.510.747.4567



Community Supports

Englishe Amarice members can receive community support services, which include.	
	Housing Transition Navigation Services, Deposits, and Tenancy and Sustaining Services
	□ Referral form
	Medically Tailored Meals/Medically-Supportive Food
	□ Referral form
	Personal Care and Homemaker Services
	□ Referral form
	Caregiver Respite
	□ Referral form

Fligible Alliance members can receive Community Support Services, which include:

- Providers may refer directly to Community Supports by emailing a completed Health Referral Form listed above to CSDEPT@alamedaalliance.org
- Providers may refer, or members can see if they are eligible for, the above services by contacting the Case and Disease Management Department at 1.510.747.4512.



Enhanced Case Management

- ► The Alliance Enhanced Case Management (ECM) Program is a Medi-Cal benefit that provides extra care coordination to members with highly complex needs.
 - ☐ Members have a care coordinator that can help:
 - ☐ Find doctors and get appointments for health care services you may need.
 - ☐ Better understand and keep track of your medications.
 - ☐ Set up a ride to get to your doctor visits.
 - ☐ Find and apply for community services based on your needs, like housing supports or healthy food.
 - ☐ Get follow-up care after you leave the hospital
- Providers may refer, or members can see if they are eligible for, the above services by contacting the Case and Disease Management Department at 1.510.747.4512.