

Tri Counties CalAIM PATH Collaborative

August 19, 2026



**Please introduce
yourself in the
chat!**

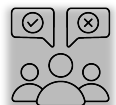
Housekeeping



Please ensure you are **muted**



Use the chat to ask questions relevant to the topic(s) at hand



Unmute and share your questions or comments during **Q&A**



Add your organization to your Zoom Name

- Click **Participants**, hover over your name in the list and click **More**, select **Rename** from the drop-down menu, and enter your name and organization as you would like it to appear

Meeting slides will be shared with participants and posted to our resource center

2026 Scheduling

Join us on Wednesdays in 2026!



Register today to add
the meetings to your
calendar!

[Add to Calendar\(.ics\)](#) | [Add to Google Calendar](#) | [Add to Yahoo Calendar](#)

To edit or cancel your registration details, [click here](#).

Please submit any questions to: pathinfo@bluepathhealth.com.

WAYS TO JOIN ZOOM

Join from PC, Mac, iPad, or Android

Meeting Calendar

January 21

February 18

March 18

Week of April 13th (in-person)

May 20

June 17

July 15

August 19

September 17 & 23 (in-person)

October 21

November 18

December 16

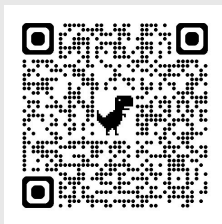
Join us in person next month!

Please see new date for Santa Barbara and San Luis Obispo meeting!

Ventura Stakeholders:

*Please join us at Ventura County
Community Foundation on*

Thursday, September 17
10:00am - 12:00pm



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Participants will:

- Discuss member and engagement outreach strategies
- Discuss navigation of upcoming changes to ECM and Community Supports in 2027
- Foster connections with fellow providers

Breakfast will be provided!

2026 Collaborative Aim Statement and Drivers

By December 2026, the Collaborative will develop a foundation for ongoing collaboration to support continuity beyond the PATH program.

**Transform
networking into
formal and informal
partnerships
through in-person
meetings**

**Prepare for
implementation
changes through
regular policy
updates and
summaries**

**Strengthen
capacity through
trainings and
co-development of
tools and
resources**

Today's Agenda

Time	Agenda Item	Presenter(s)
10:00-10:05 am	Welcome and Introductions	BluePath Health
10:05-10:20 am	Federal and State Policy Overview	BluePath Health
10:20-10:40 am	Local Efforts to Support Medi-Cal Members	• Central Coast Coverage Hub • Clínicas del Camino Real
10:40-10:55 am	Key Program Updates	• CenCal Health Plan • Gold Coast Health Plan • Kaiser Permanente
10:55-11:00 am	Announcements and Closing	BluePath Health

Thank you for joining us in July!

Pacific Clinics Training Institute presented a training on **crisis de-escalation**, which explored the goals of de-escalation and introduced **foundational intervention strategies**, including communication techniques, body language awareness, empathy, and self-regulation skills.

- Meeting Materials
 - [Meeting Slides](#)
 - [Meeting Recording](#)
 - [Pacific Clinics Handout](#)



Pacific
Clinics

Federal and State Policy Changes Impacting Medi-Cal

Major Federal and State Policy Changes

Key Change	Effective Date	Affected Population(s)
Public Charge Final Rule	September 18, 2026	Applicants for Lawful Permanent Residence (LPR) ¹
H.R. 1: Community Engagement / Work Requirements	January 1, 2027	New Adult Group, ages 19 to 64 (with numerous exemptions) ²
H.R. 1: Retroactive Coverage Limit	January 1, 2027	New Adult Group, ages 19 to 64 and Medi-Cal members seeking Medi-Cal outside the New Adult Group ³
Transition to FFS Medi-Cal	January 1, 2027	Adults with Unsatisfactory Immigration Status (UIS) ⁴
CalAIM Waiver	January 1, 2027	All Medi-Cal members
H.R. 1: 6-Month Eligibility Checks	March 1, 2027	New Adult Group, ages 19 to 64 (with some exemptions) ⁵

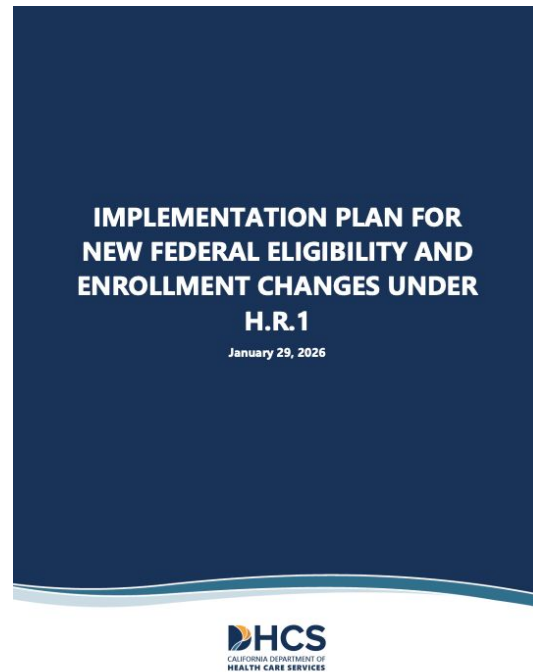
**As of August 2026. Policy developments are fast-moving, and subject to change*

DHCS Resources on H.R. 1 Implementation

In January 2026, the Department of Health Care Services released an implementation plan outlining their strategy to address H.R. 1 impacts on Medi-Cal, including:

- Work and Community Engagement Requirements
- Six-Month Renewals
- Immigrant Coverage Changes

Stay informed of Medi-Cal changes using [DHCS' Medi-Cal Changes webpage](#).



Source: [DHCS - California H.R.1 Implementation Plan](#)
Source: [DHCS - Tracking Federal Policy Impacts on Medi-Cal](#)

H.R. 1 Work and Community Engagement Requirements (WCER)

Effective January 1, 2027, work and community engagement requirements apply to some adults in Medi-Cal aged 19 to 64.

Individuals can satisfy requirements through:



80 hours per month of work, community service, and/or “work program” participation



Have monthly income at least 80 times the federal minimum wage (\$580 per month in 2026)



Enrolled in education at least half of time

Many Members Will Qualify for Exemptions

Exemption Categories

- Children (0-18)
- Adults 65 and older
- Pregnant people (during pregnancy and one year after)
- Parents of children ages 0-13
- People with serious physical or mental health conditions, or substance use problems
- People released from jail or prison in the last 90 days
- People on Medicare Part A or Part B
- American Indians or Alaska Natives
- People under age 26 who were in foster care on their 18th birthday
- **Medically frail**

“Medically Frail” Definition

As currently proposed by the Centers for Medicare and Medicaid Services (CMS), **the exemption for Medical Frailty includes documentation of a qualifying condition *and* documentation that the condition limits someone's ability to meet work requirements.**

- States are required to develop and maintain a list of conditions, and provide a process for individuals to request consideration if a condition is not listed.
- CMS names some conditions that are ***not expected*** to qualify: Asthma, hypertension, anemia, generalized pain, pre-diabetes, Type I or II diabetes, obesity, psoriasis, headaches, ADHD, individuals with SUD in stable recovery (defined as 5+ years).

Short-Term Hardship Exceptions

- **Emergency declaration:** Resided in a county with a federally-declared emergency or disaster
- **Unemployment rate:** Resided in a county with an unemployment rate of 8% or 1.5 times the national unemployment rate (whichever is lower)
- **Inpatient care:** Was in an inpatient hospital, nursing facility, or intermediate care facility, etc.
- **Travel for care:** Traveled outside of the individual's community for an extended period for medical care for themselves or for their dependent

H.R. 1 Six-Month Eligibility Checks

Beginning March 1, 2027, H.R. 1 requires an eligibility renewal process **every 6 months** for the New Adult Group. The six-month renewal requirement only applies to individuals in the New Adult Group.

The following are not in the New Adult Group and are therefore not subject to this requirement including:

- Pregnant or postpartum people,
- Former foster youth age 25 and younger,
- Alaska Natives or American Indians,
- People under age 26 who were in foster care on their 18th birthday

H.R. 1 Retroactive Coverage Limit

Beginning January 1, 2027, DHCS will limit retroactive Medi-Cal coverage for individuals **who submit their renewal within 90 days** after losing Medi-Cal coverage (often referred to as the “90-day cure period”).

Individuals in the **New Adult Group** may qualify for up to **one month** of retroactive coverage. **All other individuals** may qualify for up to **two months** of retroactive coverage.

- **No exemptions apply** to this provision; the one-month/two-month split applies uniformly to coverage groups.

Transition to Fee-for-Service Medi-Cal

Beginning January 1, 2027, some members will get their care through Fee-for-Service (FFS) Medi-Cal instead of a health plan. DHCS estimates this will impact **about 2 million Medi-Cal members** statewide. Under FFS, members are still able to access health care, and Medi-Cal still pays for services. As of now, DHCS states that **ECM and Community Supports will not continue in FFS Medi-Cal.**

This applies to the following groups:

- People who are undocumented,
- Some people with green cards who are in the five-year waiting period before they can get full-scope federal Medicaid,
- People considered Permanently Residing in the U.S. Under Color of Law (PRUCOL), meaning they are allowed to stay in the U.S. even without formal immigration status.

Additional Changes Impacting Immigrant Communities

- **Beginning July 1, 2027**, Medi-Cal members that fall into the following categories will no longer be able to access full-scope Medi-Cal (primary and ongoing care) and transition to restricted-scope (emergency, pregnancy-related services, and nursing home care):
 - Refugee and asylees
 - Humanitarian parolees
 - Survivors of domestic violence or human trafficking, and others
- **Beginning July 1, 2027**, others members – those who are non-citizens who don't qualify for federally-funded Medi-Cal, but who California continues to cover fully using state funds – will be required to pay a monthly premium.

Public Charge Final Rule

The Department of Homeland Security issued a final rule on July 20, 2026, officially removing the current DHS rule on Public Charge. Public Charge only applies to some programs and some immigrants. The final rule goes into effect on September 18, 2026.

“The state is also developing a **dedicated Public Charge webpage that will serve as a central source for updates, resources, and guidance as additional information becomes available**. Californians are encouraged to check the CalHHS website for the latest guidance.”

[CalHHS Statement - July 16, 2026](#)

CalAIM 1115 Waiver & Community Supports

CalAIM Section 1115 Waiver Renewal Request Submitted

In May, the Department of Health Care Services (DHCS) submitted their renewal request for the CalAIM 1115 Demonstration Waiver.

The application:

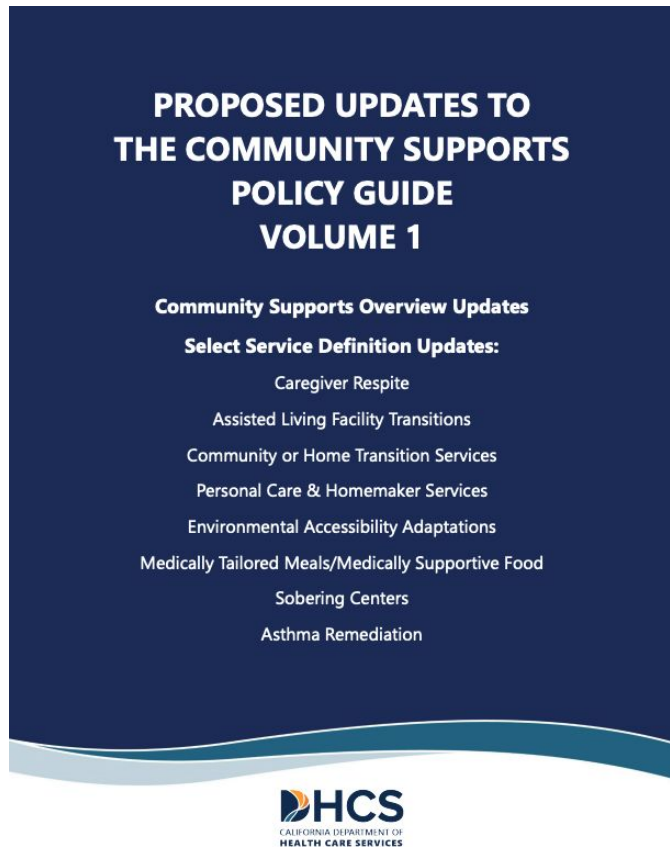
- Transitions ECM and 12 Community Supports to alternate authorities
- Proposes Employment Supports and BridgeCare Pilots as two new programs to serve Medi-Cal members
- Does not seek continuation for the PATH initiative, including CITED, TAM, CPI, and PATH JI, which will sunset in December 2026

**STATE OF CALIFORNIA
DEPARTMENT OF HEALTH CARE
SERVICES**

**Medicaid Section 1115
Demonstration Five-Year
Renewal Request:
Continuing CalAIM
Demonstration**

May 2026

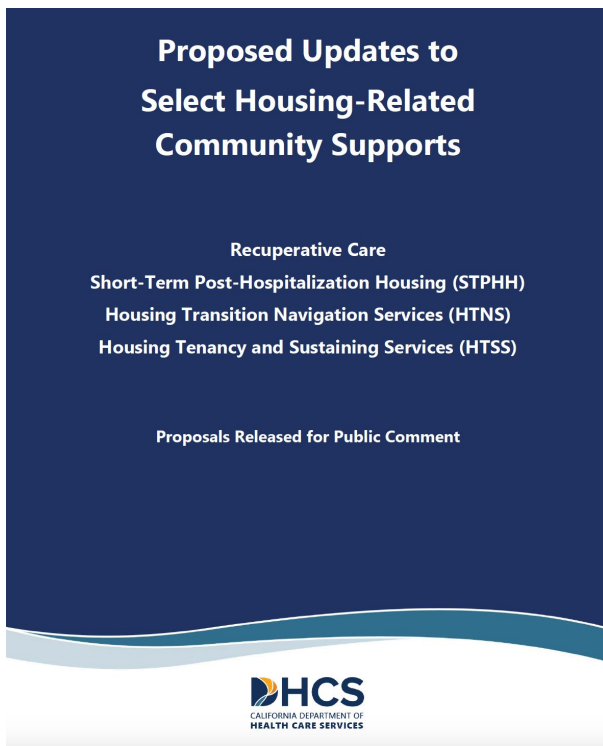
Proposed Updates To The Community Supports Policy Guide Volume 1



Updates include:

- Provider screening and credentialing requirements
- Eligibility criteria adjustments for certain Community Supports, including Medically Tailored Meals/Medically Supportive Food
- Service time-limits
- Documentation and referral pathway requirements

Proposed Updates to Select Housing-Related Community Supports



Updates include:

- Transition of Recuperative Care to In Lieu of Services (ILOS) authority and sunset of Short-Term Post-Hospitalization Housing
- Six-month authorization periods and formalized graduation/discontinuation criteria for Housing Transition Navigation and Housing Tenancy and Sustaining Services
- Updated payment practice recommendations for provision of these housing services

Source: [Proposed Updates to Select Housing-Related Community Supports](#)

Local Efforts to Support Medi-Cal Members





Regional Member Navigation Hub

Santa Barbara & San Luis Obispo Counties



Agenda

1. H.R.1 Local impact
2. Local Response Strategy
3. Tools
4. Timeline & Next Steps
5. Q&A

H.R. 1

Local Impact at Stake

H.R. 1 poses a direct threat to coverage for tens of thousands of our neighbors

Santa Barbara County & San Luis Obispo County

50K SB

23K SLO

County residents subjected to new requirements (DSS estimate)

33K SB

13K SLO

County residents at risk of losing coverage without navigation support (DSS estimate)

CMS Interim Final Guidance

Issued by: Centers for Medicare & Medicaid Services (CMS)

Current status: DHCS state-level policy and implementation guidance pending

Guidance for states clarified: Definitions; Criteria for Exemptions & Eligible Work or Community Engagement Activity; Operational Guidance.

Managed Care Plan Plan de Atención Administrada



CenCal HEALTH®
Local. Quality. Healthcare.



County Medi-Cal Eligibility Agencies Agencias del Condado de Elegibilidad de Medi-Cal



SOCIAL SERVICES
HEALTH SECURITY SAFETY



Department of Social Services



Community Organizations Organizaciones Comunitarias



LVCHO
Lompoc Valley Community Health Organization, Inc.
HEALTHY LOMPOC

Center for
Family
Strengthening



Helping families thrive.



FAMILY SERVICE AGENCY
Since 1899

Evidence from Other States

Arkansas and Georgia implemented Medicaid work requirements before the federal mandate, offering lessons on what works, what fails, and what our community must do differently.

Lessons That Shaped Our Strategy

The Core Problem

In Arkansas, 95% of the target population already met requirements or qualified for exemptions, yet 1 in 4 lost coverage in the first 7 months— they simply lacked awareness or could not navigate the paperwork. Confusion and administrative burden, not non-compliance, drove coverage loss.*

What Works

Trusted community navigators are often better positioned than government agencies to reach members.

Proactive, in-person outreach and one-on-one support can significantly improve retention.

Our Opportunity

Santa Barbara and SLO Counties have a rare regional advantage: one shared health plan partner, CenCal Health, coordinated nonprofit networks, and DSS partners who are actively committed to working together across systems.

“The evidence is clear: people lose coverage not because they are ineligible, but because they cannot navigate a complex system alone.”

*<https://www.nejm.org/doi/full/10.1056/NEJMSr1901772>

Local Response: Central Coast Coverage Hub

Central Coast Coverage Hub exists because of CenCal Health's vision, investment, and commitment to protecting member coverage across Santa Barbara and San Luis Obispo Counties.

CenCal Health: The Backbone of the Hub

Strategic Funder

CenCal Health provides the financial foundation that makes the Central Coast Coverage Hub possible — investing in community-based solutions to protect member coverage under H.R. 1.

Organizational Backbone

CenCal Health serves as the backbone of the Hub — providing strategic direction, cross-partner coordination, and data infrastructure.

A Shared Mission

Collectively working to ensure no member faces the complexities of H.R. 1 alone.

- CenCal Health
- DSS
- Family Service Agency (FSA)
- LVCHO
- Center for Family Strengthening (CFS),

"CenCal Health's investment reflects a deep commitment to health equity and the well-being of the communities we serve together."

COORDINATED LOCAL RESPONSE TO PREVENT COVERAGE LOSS

Community Partnerships

- › Participate in regular strategy meetings with CCH & DSS
- › Leverage existing community groups
- › Engage in landscape analysis with all key partners

Outreach & Communication

- › Educate communities on requirements and exemptions
- › Promote awareness of upcoming 6-month renewal deadlines
- › Launch media campaigns (Radio, Web, Social Media)

Navigation & Case Management

- › Develop a Medi-Cal Member Navigation Toolkit
- › Build referral networks with hospitals, clinics, and CBOs
- › Train and provide technical assistance

Volunteer Engagement Pathways

- › Develop a Volunteer Program Start-Up Toolkit
- › Use volunteer platforms as shared opportunity directory
- › Help members find qualifying volunteer opportunities

Communication and Outreach

Outreach

Digital (In Development)

- › Website: centralcoastcoverage.org
- › Facebook
- › Instagram

Town Halls

- › Lompoc Town Hall — 8.26.26
- › San Luis Obispo — TBD

Media

- › Earned media / press releases
- › Radio advertisements

CBO and Provider Trainings

County	Location	Date	Time
Santa Barbara County	Santa Maria Public Library	10/21/26	1000–1130
	CenCal Health	11/19/26	0900–1030
San Luis Obispo County	Family Care Network	11/5/26	0900–1030
Santa Barbara and San Luis Obispo Counties	Virtual (details pending)	11/10/26	0900–1030

Medi-Cal Member Navigation Toolkit

Practical tools and guidance to help navigators support Medi-Cal members in maintaining coverage.



Member Orientation

Common Medi-Cal Notices
Community Engagement - Requirements
Medi-Cal Coverage FAQs



Community Engagement Support

Community Engagement – Opportunities
Community Engagement – Documentation Guide
Community Engagement – Tracking Template



BenefitsCal Navigation

BenefitsCal - Quick Overview
BenefitsCal - CBO Account Setup
BenefitsCal – Report a Change



Escalation Support

Troubleshooting
Medi-Cal Coverage Reinstatement



Renewal & Documentation Support

Medi-Cal Verification Requirements
Medi-Cal Deadline Reminder
Community Engagement - Exemptions



Appendix

Central Coast Coverage – BenefitsCal Reminder Card
Additional Benefits Programs
Frequently Used Medi-Cal Forms

Volunteer Program Start-Up Toolkit

Practical tools and guidance to help organizations build effective volunteer programs.



Purpose

- Program Need
- Volunteer Contribution
- Organizational Alignment



Roles

- Role Definition
- Role Requirements
- Role Appropriateness



Workflow

- Work Assignment
- Service Workflow
- Changes & Follow-Up



Capacity

- Organizational Support
- Staff Capacity
- Program Resources



Supervision

- Designated Supervisor
- Volunteer Oversight
- Performance Management



Recruitment

- Volunteer Outreach
- Screening & Selection
- Training & Onboarding



Safeguards

- Risk Management
- Privacy & Conduct
- Safety & Incidents



Tracking

- Service Tracking
- Record Management
- Program Monitoring

KEY DATES & NEXT STEPS

Now – Summer 2026

Build & Prepare Infrastructure

Fall 2026

Activate & Prepare Members

2027 Ongoing

Implement, Sustain & Expand

Establish workflows, tools, and
partner alignment

Launch outreach, train
partners, and support
members

Expand navigation,
support compliance, support
early renewals, and scale
engagement through partners

Hub Activities Aligned to Key Policy Milestones

CALL TO ACTION

Act Now to Prepare for Medi-Cal Changes

Time is short — January 2027 is closer than it seems.

Stay Informed

[DHCS Medi-Cal Changes](#)



centralcoastcoverage.org



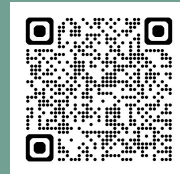
Share Volunteer Opportunities

Register your organizations in these directories and post volunteer opportunities:



Strengthen Navigation Support

Register for upcoming Medi-Cal Navigation Trainings:
<https://forms.gle/txPKZkj1LLMzi1mD8>



Contact the Regional Member Navigation Hub Team to get started



Regional Member Navigation Hub Team

Name	Organization	Role	Email
Lisa Brabo	Family Service Agency (FSA)	Chief Executive Officer	lbrabo@fsacares.org
Ashley Costa	Lompoc Valley Community Healthcare Organization (LVCHO)	Executive Director	costaa@lvcho.org
Lisa Fraser	Center for Family Strengthening (CFS)	Executive Director	lfraser@linkslo.org
Will Fuller	Family Service Agency (FSA)	Senior Manager - Strategic Initiatives	wfuller@fsacares.org
Ed Tran	Independent Consultant	Project Consultant	ed.tranrn@gmail.com



Questions / Comments



CLINICAS
del Camino Real, Incorporated



Protecting Access to Care

Keeping patients connected to care amid fear, coverage change, and financial pressure.

Why This Conversation Matters

01

Access Under Pressure

Patient fear, coverage uncertainty, and financial pressure are affecting access to care.

02

Who's Most Affected

Medi-Cal, uninsured patients, and mixed-status families may be especially impacted.

03

Health at Stake

Missed appointments and delayed care can worsen outcomes and increase future care needs.

04

A Shared Response

Protecting access requires coordinated clinic, partner, school, specialist, and advocacy action.

Key Barriers Affecting Patients

1

Fear & Safety Concerns

ICE activity and enforcement fears are causing some patients to avoid leaving home for appointments.

2

Coverage Confusion

HR1-related changes are creating uncertainty about eligibility, renewals, and whether patients should apply.

3

Care Delays

Patients are missing preventive, specialty, dental, cancer screening, and vision services.

4

Family Stress

Children and families are experiencing trauma related to deportation fears or parental deportation.

Clinicas' Response & Operational Adaptations

Telehealth First

- Staff are trained to offer telehealth rather than cancelling appointments when patients feel they cannot safely come to the clinic

Flexible Scheduling / Expanded Hours – reduce access barriers

- Appointment times are being adjusted, including earlier morning and later afternoon options

Enrollment Support

- Enrollment specialists and lobby education help patients understand coverage options and renewal requirements

Clinicas' Response & Operational Adaptations

Proactive Eligibility Tracking & Support

- Patient effective dates are tracked proactively to support timely recertification

Treatment Plan Management

- Dental treatment plans and timelines are closely managed to ensure completion prior to June 30 whenever clinically possible

Self-pay Options

- Self-pay discount programs remain an important access option for patients without coverage

Thank you

MCP Updates

Announcements and Closing

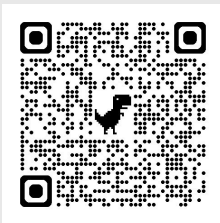
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End-of-Meeting Poll

**Thank you for joining and
see you at our in-person
meetings next month!**

Questions? Please email pathinfo@bluepathhealth.com.