Medi-Cal Explained FACT SHEET

CalAIM Authorities Chart

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CALIFORNIA'S MEDICAID program, known as Medi-Cal, is taking significant steps to advance more equitable, coordinated, and person-centered care that helps people maximize their health and life trajectory. This transformative initiative, known as CalAIM (California Advancing and Innovating Medi-Cal), includes broad-based delivery system, program, and payment reforms across the Medi-Cal program.

Changes to state Medicaid programs, including those being implemented through CalAIM, require specific authorities and approvals from the federal government. To implement CalAIM, the California Department of Health Care Services (DHCS) has received needed federal authorities, including approval of California's Medicaid State Plan, a Section 1915(b) waiver (PDF), and a Section 1115 demonstration waiver (PDF). The following chart provides an overview of CalAIM initiatives and their enabling federal authorities. Two additional resources about Medicaid authorities are available on the CHCF website. They include *Medi-Cal: A State-Federal Partnership* and a *Medi-Cal State Plan Amendments and Waivers Comparison Chart*.

For more information on the timeline for CalAIM initiatives, please visit: https://www.dhcs.ca.gov/CalAIM/Pages/Timelines.aspx.

About the Authors

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The California Health Care Foundation (CHCF) is an independent, nonprofit philanthropy that works to improve the health care system so that all Californians have the care they need. We focus especially on making sure the system works for Californians with low incomes and for communities who have traditionally faced the greatest barriers to care. We partner with leaders across the health care safety net to ensure they have the data and resources to make care more just and to drive improvement in a complex system. CHCF informs policymakers and industry leaders, invests in ideas and innovations, and connects with changemakers to create a more responsive, patient centered health care system.

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Medi-Cal Explained is an ongoing series on Medi-Cal for those who are new to the program, as well as those who need a refresher. To see other publications in this series, visit www.chcf.org/MC-explained.

CalAIM Initiative Description	Medicaid State Plan	1915(b) Waiver	1115 Demonstration Waiver
Behavioral Health Initiative — Criteria for specialty mental health services (SMHS) Improves members' access to services and reduces provider administrative burdens. The responsibilities of specialty mental health plans were updated, including the medical necessity criteria (PDF) for SMHS.	X	X	
Behavioral Health Initiative — American Society of Addiction Medicine (ASAM) level of care determination for Drug Medi-Cal (DMC) treatment services Establishes the requirement to use ASAM criteria when determining the level of care for substance use disorder (SUD) treatment.	X		
Behavioral Health Initiative — Documentation redesign for SMHS and SUD services Streamlines and standardizes clinical documentation requirements for SMHS and SUD services, better aligning with national coding and documentation practices.			X
Behavioral Health Initiative — No Wrong Door policy Lets members access treatment providers for an assessment and for mental health services regardless of where they seek care within the Medi-Cal delivery system (counties, managed care, or fee-for-service) and ensures the provider is reimbursed for services.			X
Behavioral Health Initiative — Standardized screening and transition tools The screening tools help determine the appropriate mental health delivery system to refer a member to who is not currently receiving mental health services.		X	
Behavioral Health Initiative — Behavioral health payment reform Moves counties away from cost-based reimbursement to value-based reimbursement that rewards better care and quality of life for members.	X		
Behavioral Health Initiative — Behavioral health administrative integration Combines the administration of SMHS and SUD services into one specialty behavioral health program by January 1, 2027.		X	
Behavioral Health Initiative — Mobile crisis services Community-based intervention designed to provide de-escalation and relief to members experiencing a behavioral health crisis wherever they are.	X		
Behavioral Health Initiatives — DMC Organized Delivery System (DMC-ODS) Program for the organized delivery of SUD treatment services to members with SUD by providing a continuum of care modeled after the ASAM criteria for SUD treatment services. Most components of the DMC-ODS are authorized under CalAIM's 1915(b) waiver. Other changes regarding benefits and coverage are included in the Medicaid State Plan. Additionally, the CalAIM 1115 demonstration waiver provides the authority for DHCS to claim federal funding for certain SUD treatment services.	X	X	X
DMC-ODS — Contingency management An evidence-based treatment that provides motivational incentives to treat people living with stimulant use disorder and support their path to recovery.			X
DMC-ODS — Traditional health care practices Allows eligible members access to culturally based care provided by Indian Health Services facilities, tribal health clinics, and Urban Indian Organizations.			X

CalAIM Initiative Description	Medicaid State Plan	1915(b) Waiver	1115 Demonstration Waiver
DMC-ODS — Services provided to people in Institutes of Mental Disease Reimburses SUD treatment services for short-term residents in residential and inpatient treatment settings that qualify as Institutes of Mental Disease.			X
Peer Support Specialists Establishes Medi-Cal Peer Specialists as a provider type and to provide distinct Medi-Cal Peer Support Specialist services under the specialty mental health services, DMC, and DMC-ODS programs.	X	X	X
Enhanced Care Management Statewide Medi-Cal managed care plan benefit that provides person-centered, community-based care management to the highest need members and is the highest care management tier of the Medi-Cal managed care plans' Population Health Management continuum.		X	
Community Supports Optional services (14) provided by Medi-Cal managed care plans to address Medi-Cal members' health-related social needs. Twelve Community Supports are authorized via the CalAIM Section 1915(b) waiver and two (short-term recuperative care and short-term post-transition housing) are authorized via the CalAIM Section 1115 waiver.		X	X
Justice-Involved Reentry Initiative Coverage of a targeted set of Medicaid services for youth and adults in state prisons, county jails, and youth correctional facilities for up to 90 days before release. Supports partnership across state agencies, counties, and community-based organizations to establish a coordinated community reentry process that will help people leaving incarceration connect to the physical and behavioral health services they need before release.			X
Providing Access and Transforming Health (PATH) Initiative Provides funding to support the capacity and infrastructure of on-the-ground partners, such as community-based organizations, hospitals, county agencies, tribes, and others, to successfully participate in the Medi-Cal delivery system as California implements Enhanced Care Management, Community Supports, and justice-involved services.			X
Incentive Payment Program Provides funding to support the implementation and expansion of Enhanced Care Management, Community Supports, and other CalAIM initiatives by providing incentives to Medi-Cal managed care plans.			X
Population Health Management Establishes a plan that ensures Medi-Cal members have access to health care services, which leads to longer, healthier, and happier lives; improved health outcomes; and health equity. Requires that Medi-Cal managed care plans meet National Committee for Quality Assurance's and DHCS standards for population health management.		X	X
Supporting Health and Opportunity for Children and Families Integrates existing and new child and family health initiatives and strengthens DHCS accountability and oversight of children's services.	X	X	
Statewide Managed Long-Term Care Transitions Medi-Cal institutional long-term care (LTC) to managed care in all counties. The transition provides all LTC residents with access to coordinated and integrated care within Medi-Cal managed care and makes coverage consistent across California.		X	

CalAIM Initiative Description	Medicaid State Plan	1915(b) Waiver	1115 Demonstration Waiver
Integrated Care for Dual Eligible Members Requires those eligible for both Medi-Cal and Medicare ("dually eligible enrollees") to enroll in managed care for Medi-Cal benefits.		X	
Community-Based Adult Services (CBAS) CBAS for eligible adults receiving outpatient skilled nursing care, social services, therapies, personal care, family/caregiver training and support, nutrition services, care coordination, and transportation, with flexibility for the provision and reimbursement of remote services under specified emergency situations.			X
Dental Initiative Statewide dental benefit for children and certain adults and an expanded pay-for-performance initiative. Transitioned from Section 1115 waiver to the Medi-Cal State Plan.		X	
Medi-Cal Coverage for Pregnant Women with Low Income Medi-Cal coverage for pregnant women with incomes up to 138% of the federal poverty level.	X		
Coverage for Out-of-State Former Foster Youth Medi-Cal coverage for out-of-state former foster youth during the renewal period, up to age 26.			X
Global Payment Program Statewide pool of funding for care provided to California's remaining uninsured populations. This includes streamlining funding sources to public health care systems with a focus on addressing primary care, preventive services, and responding to the impacts of systemic racism and inequities.			X
Tribal Uncompensated Care for Chiropractic Services Payment to tribal providers for chiropractic services, which were eliminated as a Medi-Cal covered benefit in 2009.			X
Designated State Health Programs Payments to designated state health programs for expenditures where Medicaid normally does not provide funding. These payments are subject to specific terms, limitations, and amounts set forth in the CalAIM 1115 demonstration waiver's special terms and conditions.			X

Sources

➤ *California Advancing and Innovating Medi-Cal (CalAIM) Demonstration (Project Number 11-W-00193/9) Section 1115(a) Quarterly Report* (PDF), Demonstration Year: Twenty, Second Quarter Reporting Period Apr. 1, 2024–June 30, 2024, DHCS.

➤ *California Advancing and Innovating Medi-Cal (CalAIM) Demonstration (Project Number 11-W-00193/9) Section 1115(a) Quarterly Report* (PDF), Demonstration Year: Twenty, First Quarter Reporting Period Jan. 1, 2024–March 31, 2024, DHCS.

➤ California Advancing and Innovating Medi-Cal (CalAIM) Milestones Calendar as of August 2023 (PDF), DHCS.

➤ "DHCS Contracts & Medicaid State Plan," DHCS.

➤ "Updates on the CalAIM Section 1115 & Section 1915(b) Waivers" (PDF), DHCS, January 2022.

➤ "CalAIM Section 1115 Demonstration & Section 1915(b) Waiver Public Hearing" (PDF), DHCS, April & May 2021.

➤ "Medi-Cal Specialty Mental Health Services," DHCS.

➤ Daniel Tsai (deputy administrator and director, Centers for Medicare & Medicaid Services [CMS]) to Jacey Cooper (chief deputy director, Health Care Programs, DHCS), "CMS Expenditure Authority Number 11-W-00193/19" (PDF), December 29, 2021.

➤ Chiquita Brooks-LaSure (administrator, CMS) to Tyler Sadwith (state Medicaid director, DHCS), Approval of CalAIM Section 1115(a) demonstration (Project Numbers 11-W-00193/9 and 21-W-00077/0) (PDF), December 16, 2024.