

On May 11, the Department of Health Care Services (DHCS) [submitted](#) a five-year renewal request to continue the California Advancing and Innovating Medi-Cal (CalAIM) Section 1115 demonstration to the Centers for Medicare & Medicaid Services. The renewal continues the State's efforts to deliver more coordinated, person-centered, value-based care. It builds on the successes of CalAIM by continuing existing initiatives, introduces targeted new supports, and transitions certain services to longer-term Medi-Cal authorities. A renewal of the CalAIM 1915(b) waiver, which authorizes California's managed care delivery systems, will be submitted this summer.



Continuing Key Initiatives

- » **Reentry services** for justice-involved individuals up to 90 days prior to release
- » **Substance use disorder (SUD) treatment services** for members receiving short-term residential SUD treatment in facilities with more than 16 beds (institutions for mental diseases, or IMDs) in the Drug Medi-Cal Organized Delivery System (DMC-ODS)
- » **County option to provide additional outpatient SUD services**
- » **Contingency management** for evidence-based stimulant use disorder treatment
- » **Culturally responsive treatment provided by Indian Health Care Providers**
- » **Chiropractic services furnished by Tribal providers**
- » **Global Payment Program** supporting designated public hospitals serving uninsured patients
- » **Coverage for young adults under 26 formerly in foster care in another state**
- » **Modification of the asset test for select federally defined disabled adults**
- » **Medi-Cal "Matching Plan Policy" for dual eligible members** to align their Medicaid plan with their Medicare Advantage plan choice where possible
- » **Authorization of County-Organized Health System and Single Plan models** in specified counties



Proposed New Initiatives

- » **Employment Supports** to help eligible individuals meet the work and community engagement reporting requirements established under H.R. 1
- » **BridgeCare Pilots** for local entities to provide targeted home and community-based services and caregiver supports so that low-income Medicare members with incomes above Medi-Cal limits can safely remain at home, saving federal and state dollars



Proposed Transitioning Initiatives

- » **Recuperative Care** will transition to managed care In Lieu of Services authority, consistent with other Community Supports; care offered under Short-Term Post Hospitalization Housing will be incorporated into the updated Recuperative Care model
- » **Community-Based Adult Services** for older adults and adults with disabilities will transition to 1915(i) State Plan authority

Waiver Renewal Timeline

