



CalAIM Experiences: Bay Area Implementers

Goodwin Simon Strategic Research

April 2024

Survey Methodology

Some respondents report working in multiple counties and therefore may appear in more than one subregion. As a result, the sum of all subregions may exceed the total for the region.

Statistical testing was conducted to compare Bay Area respondents to those from the rest of California, both across and within the region. Any statistically significant differences ($p < .05$) are noted in figures with a *. If there is no symbol, differences were not significant.

On behalf of the California Health Care Foundation (CHCF), Goodwin Simon Strategic Research (GSSR) conducted an online survey among 1,196 CalAIM implementers July 21 to September 12, 2023 to explore their experiences and outlook about CalAIM. CHCF [published the survey](#) in December 2023.

Questionnaire development was guided by six online focus groups conducted between March 29 and April 27, 2023 among implementers from behavioral health, community-based organizations, discharge planning, Enhanced Care Management, managed care plans, and homeless/medical respite.

Respondents who report having fewer than 30% of their patients/clients/members enrolled in Medi-Cal/Medicaid or who were not familiar with CalAIM were not included in the full survey.

This report focuses on the findings for the Bay Area, which includes the following subregions:

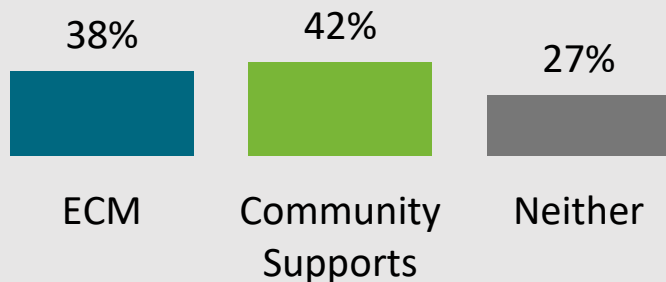
- Southeast: Solano and Yolo Counties
- Southwest: Lake, Marin, Mendocino, Napa, and Sonoma Counties
- The following are featured as standalone where enough people completed the survey to have statistical significance:
 - Marin County
 - Sonoma County
 - Yolo County
 - Alameda County
 - Contra Costa County
 - San Francisco City/County
 - San Mateo County
 - Santa Clara County
 - Santa Cruz County

The subregions follow the grouping and naming conventions used for the [PATH Collaborative Planning and Implementation initiative](#).

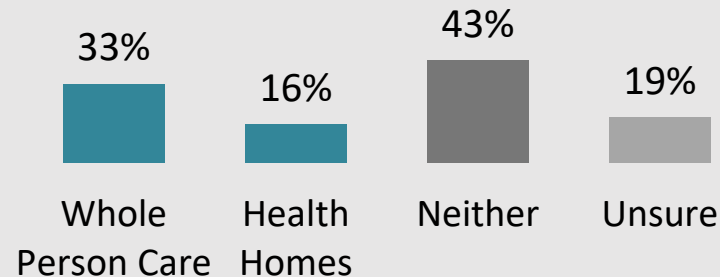
Dashboard: Breakdown of Bay Area Respondents



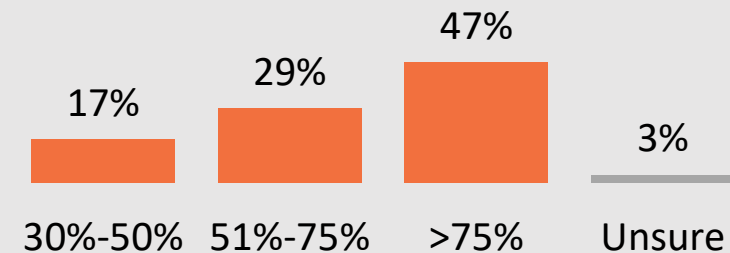
Organization Provides . . .



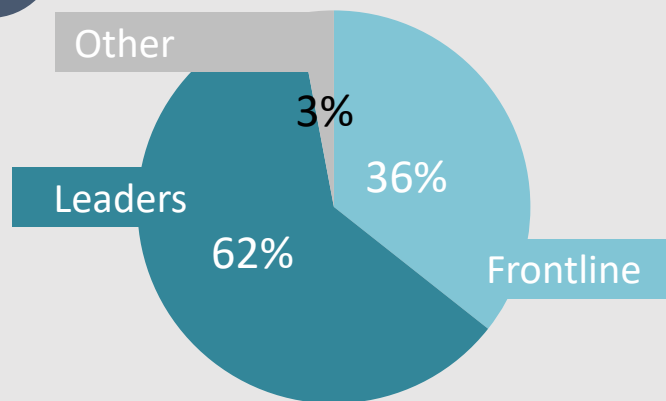
Organization Participated in . . .



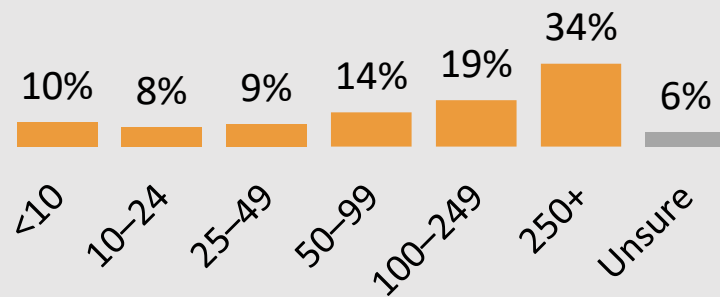
Population Served Covered by Medi-Cal/Medicaid



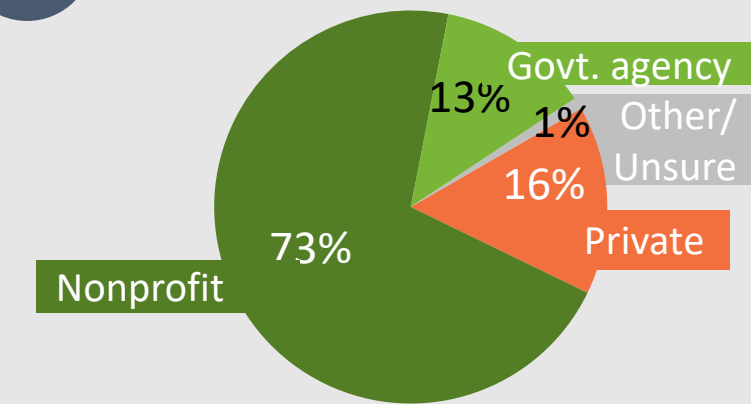
Respondent Job Role



Number of FTEs in Organization



Organization Type



Note: Totals may not sum to 100% due to rounding.

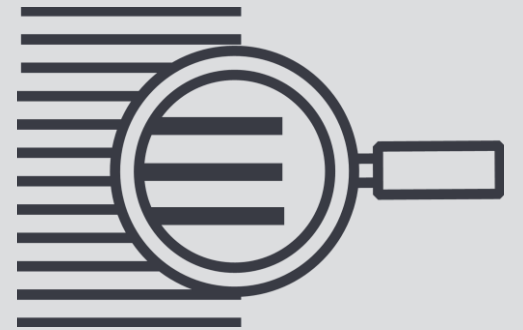
Source: CHCF/GSSR Survey of CalAIM implementers (July 21–September 12, 2023).

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Overview of Regional Findings

1. Implementer Views on Current State of Implementation
2. Organizational Partnerships
3. Data Exchange
4. Appendix: In Their Own Words

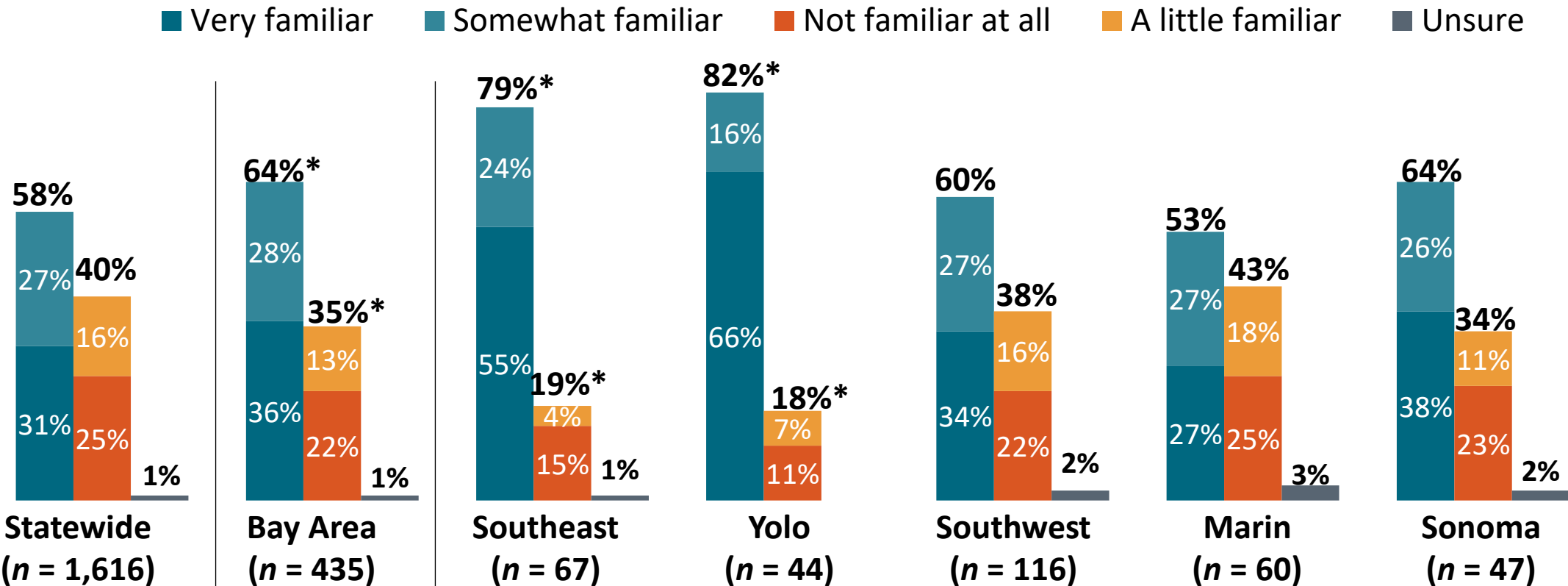
Implementer Views on Current State of Implementation



There Is Room to Increase Familiarity with CalAIM Across the Region, Pt.1

How familiar are you with California Advancing and Innovating Medi-Cal, also referred to as CalAIM? CalAIM includes many new programs and changes, such as Enhanced Care Management, Community Supports, carve-in of institutional long-term care, Population Health Management, No Wrong Door, Behavioral Health Payment Reform, etc.

(Note that this only includes responses from those who serve at least 30% Medi-Cal; those who are not familiar at all were not included in the remainder of the survey.)



*This result is significantly different from results statewide at the 95% confidence level.

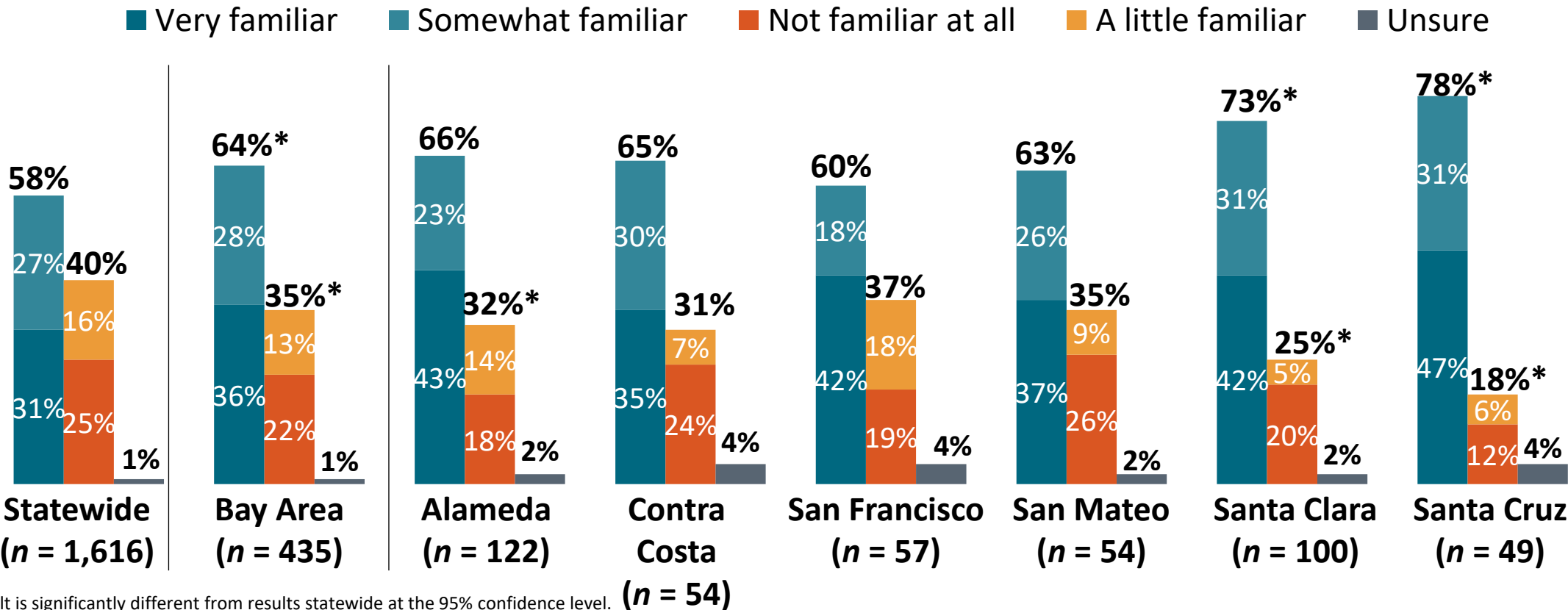
Note: Totals may not sum to 100% due to rounding.

Source: CHCF/GSSR Survey of CalAIM Implementers (July 21–September 12, 2023).

There Is Room to Increase Familiarity with CalAIM Across the Region, Pt.2

How familiar are you with California Advancing and Innovating Medi-Cal, also referred to as CalAIM? CalAIM includes many new programs and changes, such as Enhanced Care Management, Community Supports, carve-in of institutional long-term care, Population Health Management, No Wrong Door, Behavioral Health Payment Reform, etc.

(Note that this only includes responses from those who serve at least 30% Medi-Cal; those who are not familiar at all were not included in the remainder of the survey.)



*This result is significantly different from results statewide at the 95% confidence level.

Note: Totals may not sum to 100% due to rounding.

Source: CHCF/GSSR Survey of CalAIM Implementers (July 21–September 12, 2023).

Agreement with Goals Consistent Across the Region

Please indicate how much you agree or disagree with each of the following statements: I support CalAIM's goal of . . .

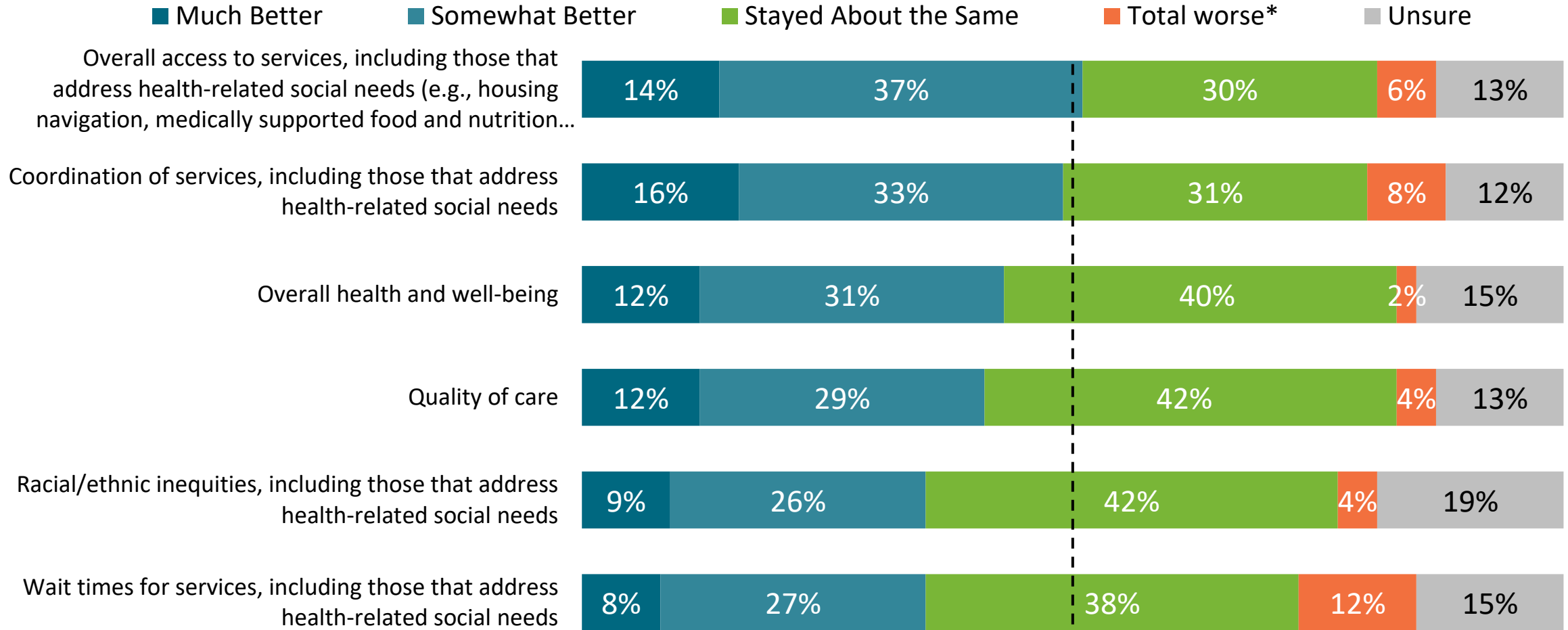
Showing the % agree with each statement	Statewide	Bay Area (n = 335)	Southeast (n = 56)	Yolo (n = 39)	Southwest (n = 88)	Marin (n = 43)	Sonoma (n = 35)	Alameda (n = 97)	Contra Costa (n = 39)	San Francisco (n = 44)	San Mateo (n = 39)	Santa Clara (n = 78)	Santa Cruz (n = 41)
. . . making Medi-Cal a more consistent and seamless system for enrollees to navigate by reducing complexity and increasing flexibility.	96%	98%*	100%*	100%*	98%	95%	100%*	99%*	95%	98%	97%	99%*	100%*
. . . comprehensively addressing people's needs through whole person care and interventions that address social drivers of health.	95%	97%*	100%*	100%*	98%	98%	97%	97%	95%	100%*	97%	99%*	100%*
. . . improving quality outcomes and reducing health disparities through value-based initiatives and payment reform.	94%	97%*	96%	95%	98%*	95%	97%	97%	92%	100%*	100%*	97%	100%*

*This result is significantly different from results statewide at the 95% confidence level.

Source: CHCF/GSSR Survey of CalAIM Implementers (July 21–September 12, 2023).

Bay Area Implementers Already Report Improvements

Thinking about the experiences of the people you serve (e.g., patients, members, or clients), please indicate whether you personally think the experiences of the following have gotten better or worse as a result of CalAIM's implementation — or if they have stayed about the same. If you are unsure, just select that . . .



*Total Worse is the sum of "Somewhat" and "Much" Worse responses.

Note: Excludes those who said "N/A."

Source: CHCF/GSSR Survey of CalAIM Implementers (July 21–September 12, 2023).

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50%

Improvements Reported Vary Somewhat by Subregion

Thinking about the experiences of the people you serve (e.g., patients, members, or clients), please indicate whether you personally think the experiences of the following have gotten better or worse as a result of CalAIM’s implementation — or if they have stayed about the same . . . Percentages indicate total “better” responses.

Showing the % total “better” responses	Statewide	Bay Area (n = 317)	Southeast (n = 52)	Yolo (n = 35)	Southwest (n = 84)	Marin (n = 40)	Sonoma (n = 33)	Alameda (n = 91)	Contra Costa (n = 36)	San Francisco (n = 43)	San Mateo (n = 37)	Santa Clara (n = 77)	Santa Cruz (n = 35)
<i>Overall access to services, including those that address health-related social needs (e.g., housing navigation, medically supported food and nutrition services)</i>	52%	51%	67%*	63%	55%	59%	58%	44%	53%	47%	49%	49%	54%
<i>Coordination of services, including those that address health-related social needs</i>	51%	49%	70%*	69%*	45%	43%	47%	38%*	53%	35%*	47%	47%	63%
<i>Overall health and well-being</i>	48%	43%	62%*	56%	41%	45%	47%	34%*	46%	35%	47%	47%	42%
<i>Quality of care</i>	45%	41%*	58%*	56%	37%	38%	41%	30%*	53%	33%	42%	42%	53%
<i>Racial/ethnic inequities, including those that address health-related social needs</i>	38%	35%	42%	40%	36%	42%	39%	30%	39%	30%	35%	38%	40%
<i>Wait times for services, including those that address health-related social needs</i>	38%	35%	45%	50%	27%*	24%*	29%	25%*	35%	23%*	32%	37%	37%

*This result is significantly different from results statewide at the 95% confidence level.

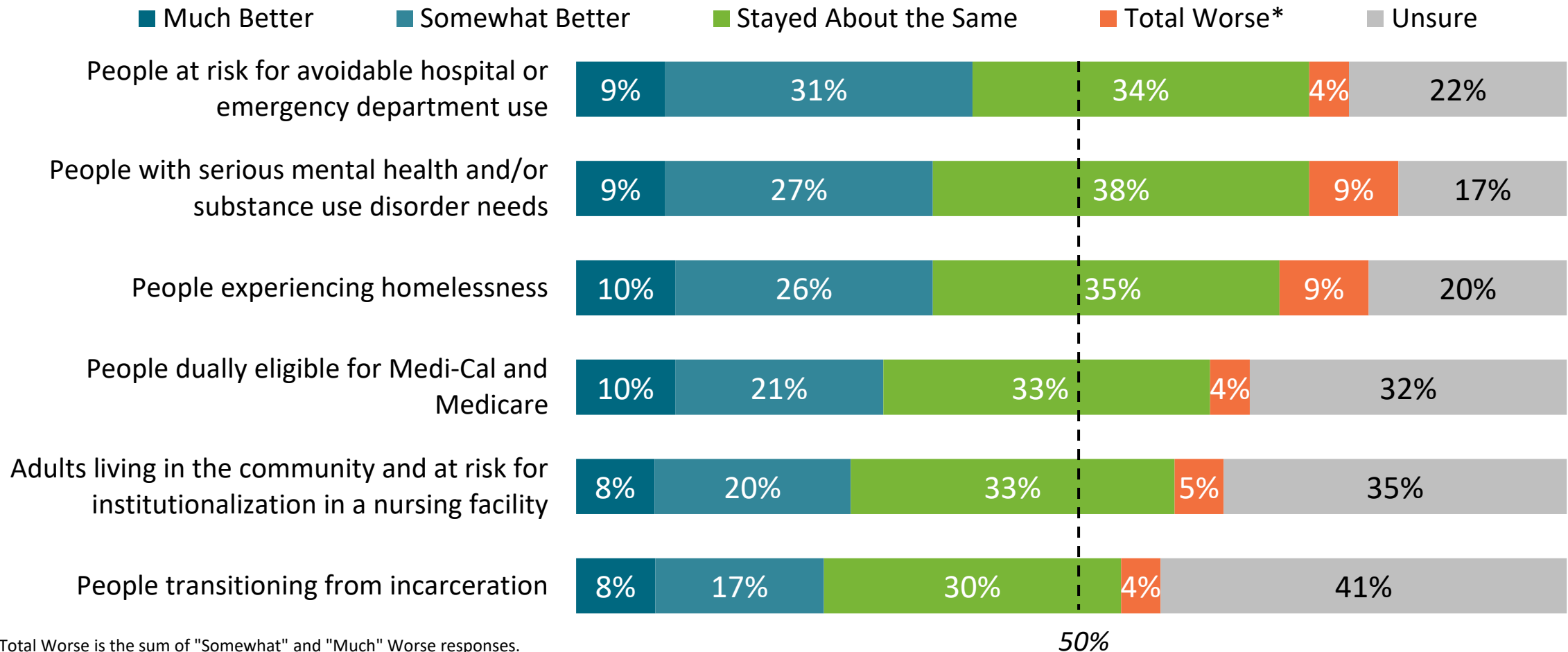
Notes: The *n* size for each row may vary within each column as respondents who said “not applicable” to each item were excluded from that row.

Source: CHCF/GSSR Survey of CalAIM Implementers (July 21–September 12, 2023).

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Bay Area Respondents More Sure About Improvements for 2022 Populations of Focus Compared to Later Populations of Focus

Now thinking about the experiences of the people you serve in each of the following populations, please indicate whether you personally think their overall experience of care has gotten better or worse as a result of CalAIM's implementation — or if it has stayed about the same. If you are unsure, just select that . . .



*Total Worse is the sum of "Somewhat" and "Much" Worse responses.

Note: Excludes those who said "N/A." Totals may not sum to 100% due to rounding.

Source: CHCF/GSSR Survey of CalAIM Implementers (July 21–September 12, 2023).

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Reported Improvements by POF Vary Somewhat by Subregion

Now thinking about the experiences of the people you serve in each of the following populations, please indicate whether you personally think their overall experience of care has gotten better or worse as a result of CalAIM's implementation — or if it has stayed about the same. **Percentages indicate total “better” responses.**

Showing the % total “better” responses	Statewide	Bay Area (n = 272)	Southeast (n = 44)	Yolo (n = 31)	Southwest (n = 69)	Marin (n = 31)	Alameda (n = 73)	San Francisco (n = 35)	San Mateo (n = 32)	Santa Clara (n = 66)	Santa Cruz (n = 31)
<i>People at risk for avoidable hospital or emergency department use</i>	42%	40%	51%	49%	41%	42%	30%*	41%	50%	43%	46%
<i>People experiencing homelessness</i>	38%	36%	53%*	54%*	35%	38%	31%	31%	35%	31%	33%
<i>People with serious mental health and/or substance use disorder needs</i>	37%	36%	49%	47%	34%	38%	30%	36%	37%	41%	37%
<i>People dually eligible for Medi-Cal and Medicare</i>	35%	31%	36%	37%	32%	34%	26%	30%	37%	35%	27%
<i>Adults living in the community and at risk for institutionalization in a nursing facility</i>	30%	28%	30%	36%	27%	31%	21%*	30%	39%	39%	24%
<i>People transitioning from incarceration</i>	29%	25%	39%	39%	19%*	26%	18%*	14%*	19%	27%	19%
<i>People with Medi-Cal coverage that are not part of a specific ECM population of focus</i>	28%	23%*	33%	29%	20%	23%	19%*	20%	24%	27%	25%
<i>Adult nursing facility residents transitioning to the community</i>	28%	23%*	27%	28%	22%	27%	14%*	17%	29%	29%	9%*

*This result is significantly different from results statewide at the 95% confidence level.

Notes: The *n* size for each row may vary within each column as respondents who said “not applicable” to each item were excluded from that row. *POF* is population of focus.

Source: CHCF/GSSR Survey of CalAIM Implementers (July 21–September 12, 2023).

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Few Respondents Report Things Getting Worse

Now thinking about the experiences of the people you serve in each of the following populations, please indicate whether you personally think their overall experience of care has gotten better or worse as a result of CalAIM's implementation — or if it has stayed about the same. **Percentages indicate total “worse” responses.**

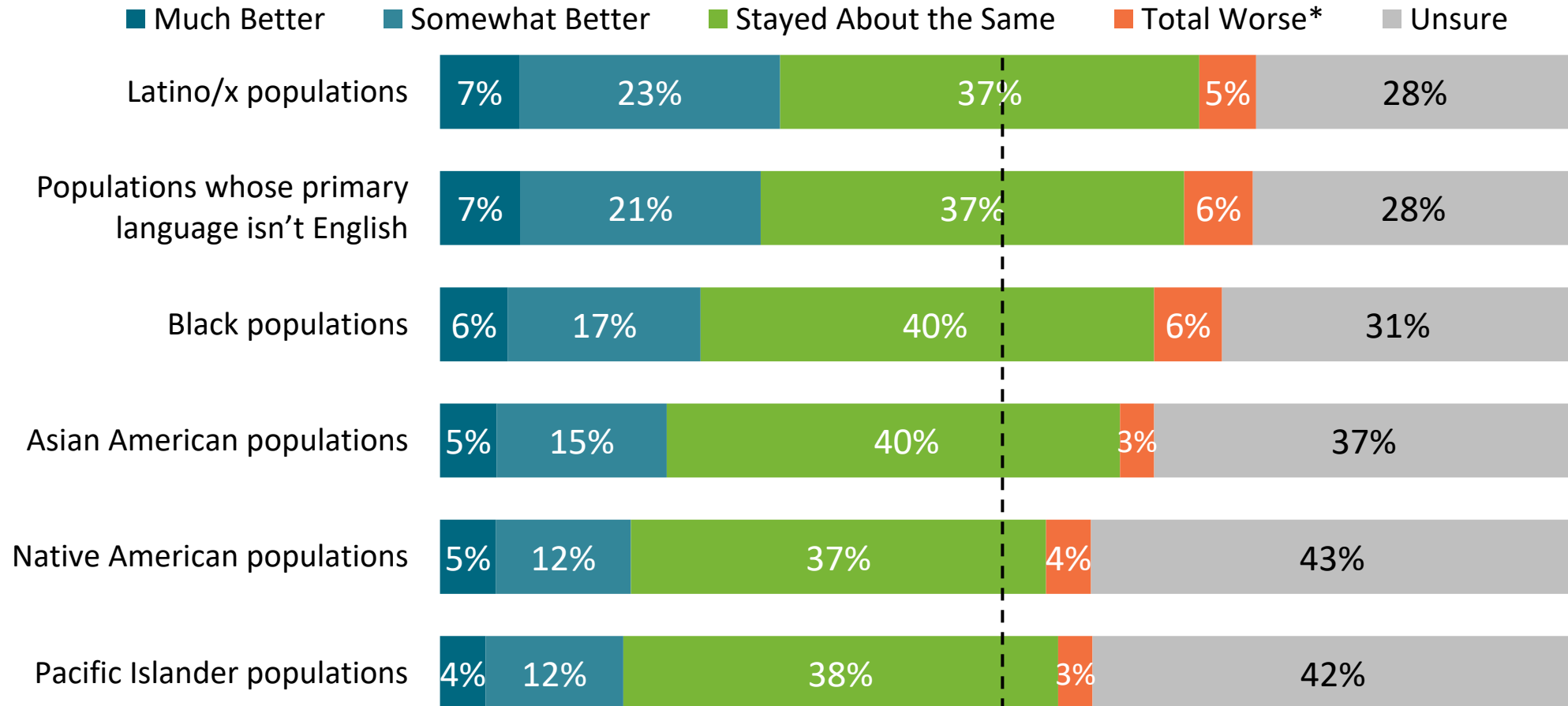
Showing the % total “worse” responses	Statewide	Bay Area (n = 272)	Southeast (n = 44)	Yolo (n = 31)	Southwest (n = 69)	Marin (n = 31)	Alameda (n = 73)	SF City/ County (n = 35)	San Mateo (n = 32)	Santa Clara (n = 66)	Santa Cruz (n = 31)
<i>People with serious mental health and/or substance use disorder needs</i>	13%	9%*	0%	0%	4%*	0%	12%	12%	13%	11%	13%
<i>People experiencing homelessness</i>	12%	9%*	2%*	0%	5%*	2%*	9%	13%	11%	11%	17%
<i>Adults living in the community and at risk for institutionalization in a nursing facility</i>	7%	5%*	0%	0%	3%*	0%	5%	3%	0%	4%	9%
<i>People with Medi-Cal coverage that are not part of a specific ECM population of focus</i>	7%	7%	0%	0%	4%	0%	16%*	9%	5%	4%	6%
<i>People at risk for avoidable hospital or emergency department use</i>	7%	4%*	0%	0%	1%*	0%	3%	0%	0%	4%	5%
<i>People transitioning from incarceration</i>	6%	4%*	2%	3%	3%	3%	0%	3%	0%	3%	10%
<i>Adult nursing facility residents transitioning to the community</i>	5%	3%*	0%	0%	1%*	0%	5%	0%	0%	1%*	6%
<i>People dually eligible for Medi-Cal and Medicare</i>	5%	4%	2%	3%	2%	2%	6%	5%	0%	3%	3%

*This result is significantly different from results statewide at the 95% confidence level.

Notes: The n size for each row may vary within each column as respondents who said “not applicable” to each item were excluded from that row. Source: CHCF/GSSR Survey of CalAIM Implementers (July 21–September 12, 2023).

Respondents in the Bay Area Less Sure About Improvements for Racial/Ethnic Groups

Now thinking about the experiences of the people you serve in each of the following populations related to race/ethnicity or language, please indicate whether you personally think their overall experience of care has gotten better or worse as a result of CalAIM's implementation as a whole . . .



*Total Worse is the sum of "Somewhat" and "Much" Worse responses.

Notes: Excludes those who said "N/A."

Source: CHCF/GSSR Survey of CalAIM Implementers (July 21–September 12, 2023).

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50%

Reported Improvements by Racial/Ethnic Groups Vary Somewhat by Subregion

Now thinking about the experiences of the people you serve in each of the following populations related to race/ethnicity or language, please indicate whether you personally think their overall experience of care has gotten better or worse as a result of CalAIM's implementation as a whole . . . Percentages indicate total “better” responses.

Showing the % total “better” responses	Statewide	Bay Area (n = 313)	Southeast (n = 52)	Yolo (n = 36)	Southwest (n = 83)	Marin (n = 38)	Sonoma (n = 34)	Alameda (n = 90)	Contra Costa (n = 35)	San Francisco (n = 43)	San Mateo (n = 38)	Santa Clara (n = 74)	Santa Cruz (n = 38)
<i>Latino/x populations</i>	34%	30%	34%	31%	32%	32%	44%	23%*	30%	35%	29%	30%	31%
<i>Populations whose primary language isn't English</i>	33%	29%	30%	33%	30%	32%	30%	24%*	33%	35%	32%	32%	28%
<i>Black populations</i>	29%	23%*	30%	28%	17%*	18%	24%	22%	22%	26%	32%	30%	26%
<i>Asian American populations</i>	24%	20%*	13%*	14%	14%*	16%	15%	22%	16%	26%	21%	26%	15%
<i>Pacific Islander populations</i>	23%	16%*	15%	17%	15%*	18%	15%	18%	16%	19%	24%	17%	21%
<i>Native American populations</i>	22%	17%*	15%	17%	18%	16%	24%	13%*	14%	16%	24%	19%	13%

*This result is significantly different from results statewide at the 95% confidence level.

Note: The *n* size for each row may vary within each column as respondents who said “not applicable” to each item were excluded from that row.

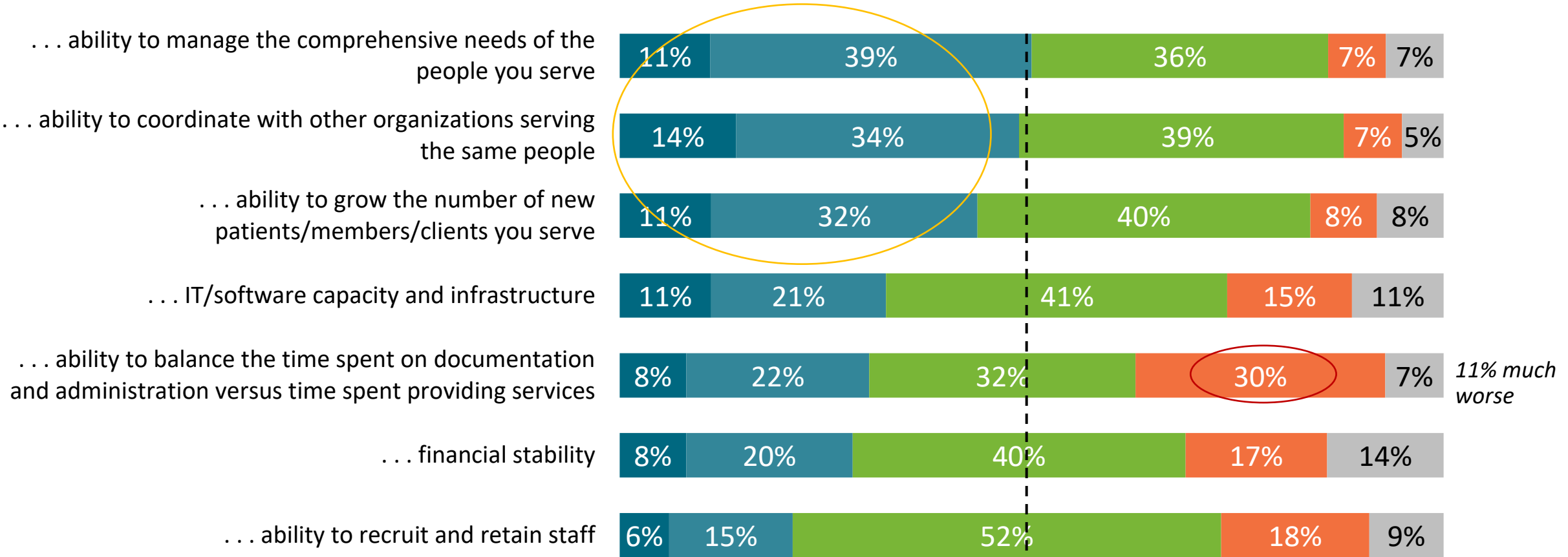
Source: CHCF/GSSR Survey of CalAIM Implementers (July 21–September 12, 2023).

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CalAIM Implementation Already Improving Ability to Serve in the Bay Area

Now thinking about your own organization, please indicate whether you personally think each of the following has gotten better or worse as a result of CalAIM — or if it has stayed about the same . . . Your organization's . . .

■ Much Better ■ Somewhat Better ■ Stayed About the Same ■ Total Worse* ■ Unsure



*Total Worse is the sum of "Somewhat" and "Much" Worse responses.
Notes: Excludes those who said "N/A."
Source: CHCF/GSSR Survey of CalAIM Implementers (July 21–September 12, 2023).

Improvements Reported Vary by Subregion, Pt.1

Now thinking about your own organization, please indicate whether you personally think each of the following has gotten better or worse as a result of CalAIM — or if it has stayed about the same . . . Your organization's . . .

Percentages indicate total “better” responses.

Showing the % total “better” responses	Statewide	Bay Area (n = 309)	Southeast (n = 52)	Yolo (n = 35)	Southwest (n = 79)	Marin (n = 40)	Sonoma (n = 31)	Alameda (n = 87)	Contra Costa (n = 36)	San Francisco (n = 44)	San Mateo (n = 39)	Santa Clara (n = 78)	Santa Cruz (n = 39)
. . . ability to manage the comprehensive needs of the people you serve	51%	50%	66%*	69%*	58%*	70%*	52%	35%*	39%	36%*	49%	51%	52%
. . . ability to grow the number of new patients/ members/ clients you serve	48%	43%	52%	51%	42%	52%	41%	34%*	41%	40%	51%	47%	54%
. . . ability to coordinate with other organizations serving the same people	48%	48%	51%	53%	49%	56%	41%	36%*	41%	55%	49%	49%	52%
. . . IT/software capacity and infrastructure	35%	32%	38%	37%	22%*	29%	19%*	25%*	21%*	35%	36%	42%	40%
. . . ability to balance the time spent on documentation and administration versus time spent providing services	34%	31%	37%	34%	26%	27%	13%*	21%*	24%	20%*	32%	41%	38%
. . . financial stability	34%	28%*	35%	31%	24%*	29%	12%*	20%*	32%	23%	26%	35%	38%
. . . ability to recruit and retain staff	27%	21%*	29%	31%	15%*	12%*	10%*	13%*	17%	11%*	23%	28%	21%

*This result is significantly different from results statewide at the 95% confidence level.

Notes: The *n* size for each row may vary within each column as respondents who said “not applicable” to each item were excluded from that row. Source: CHCF/GSSR Survey of CalAIM Implementers (July 21–September 12, 2023).

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Improvements Reported Vary by Subregion, Pt.2

Now thinking about your own organization, please indicate whether you personally think each of the following has gotten better or worse as a result of CalAIM — or if it has stayed about the same . . . Your organization's . . .

Percentages indicate total “worse” responses.

Showing the % total “worse” responses	Statewide	Bay Area (n = 309)	Southeast (n = 52)	Yolo (n = 35)	Southwest (n = 79)	Marin (n = 40)	Sonoma (n = 31)	Alameda (n = 87)	Contra Costa (n = 36)	San Francisco (n = 44)	San Mateo (n = 39)	Santa Clara (n = 78)	Santa Cruz (n = 39)
. . . ability to balance the time spent on documentation and administration versus time spent providing services	23%	30%*	33%	34%	38%*	44%*	58%*	43%*	47%*	37%	26%	28%	36%
. . . ability to recruit and retain staff	20%	18%	15%	17%	14%	15%	16%	24%	28%	14%	28%	17%	13%
. . . financial stability	15%	17%	17%	14%	18%	10%	22%	23%	24%	16%	18%	22%	18%
. . . IT/software capacity and infrastructure	11%	15%*	13%	11%	21%*	22%	31%*	25%*	32%*	19%	21%	14%	12%
. . . ability to grow the number of new patients/ members/ clients you serve	9%	8%	6%	6%	9%	5%	12%	15%	14%	9%	3%*	4%*	3%*
. . . ability to manage the comprehensive needs of the people you serve	9%	7%	4%*	3%*	2%*	2%*	6%	16%	8%	7%	5%	6%	0%
. . . ability to coordinate with other organizations serving the same people	8%	7%	8%	8%	6%	7%	12%	11%	8%	5%	5%	6%	5%

*This result is significantly different from results statewide at the 95% confidence level.

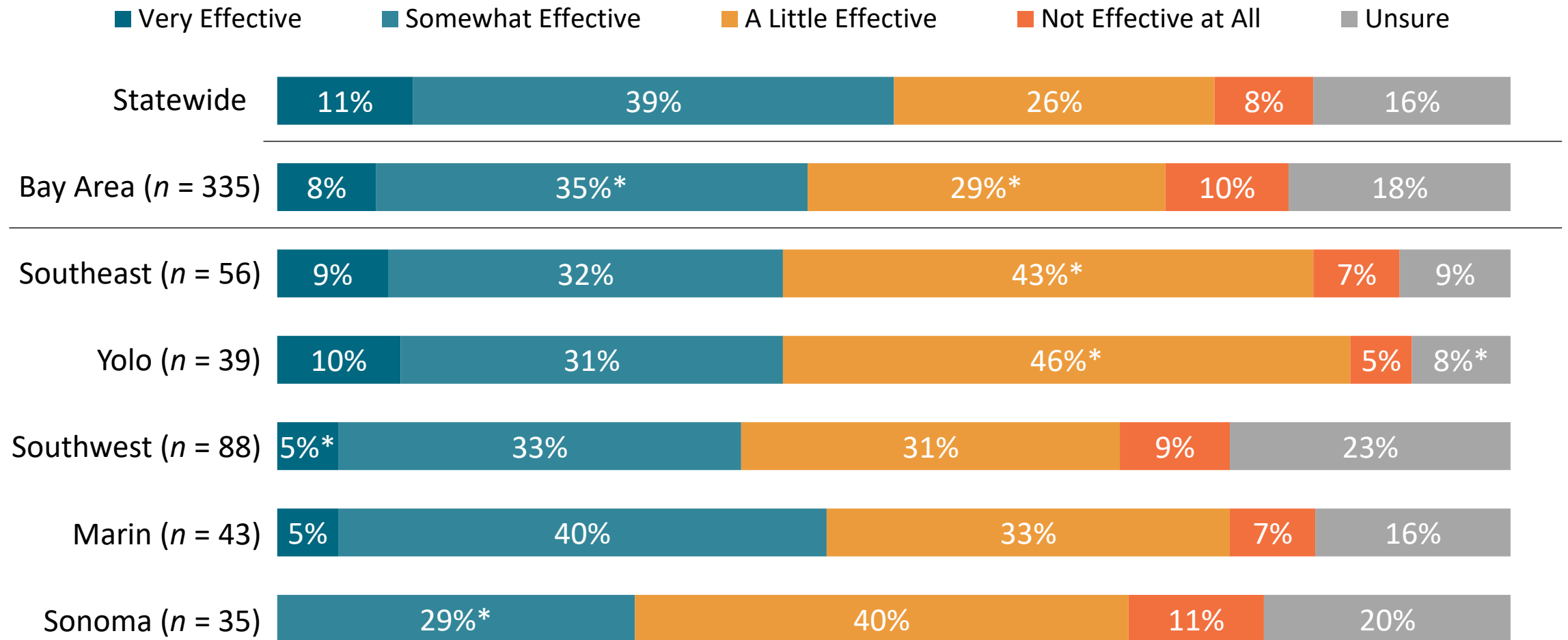
Notes: The *n* size for each row may vary within each column as respondents who said “not applicable” to each item were excluded from that row.

Source: CHCF/GSSR Survey of CalAIM Implementers (July 21–September 12, 2023).

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Implementers Have Mixed Views About Effectiveness of CalAIM Implementation, Pt.1

At this stage of CalAIM's implementation, how would you rate the effectiveness of CalAIM-related processes, protocols, and workflows overall?



*This result is significantly different from results statewide at the 95% confidence level.

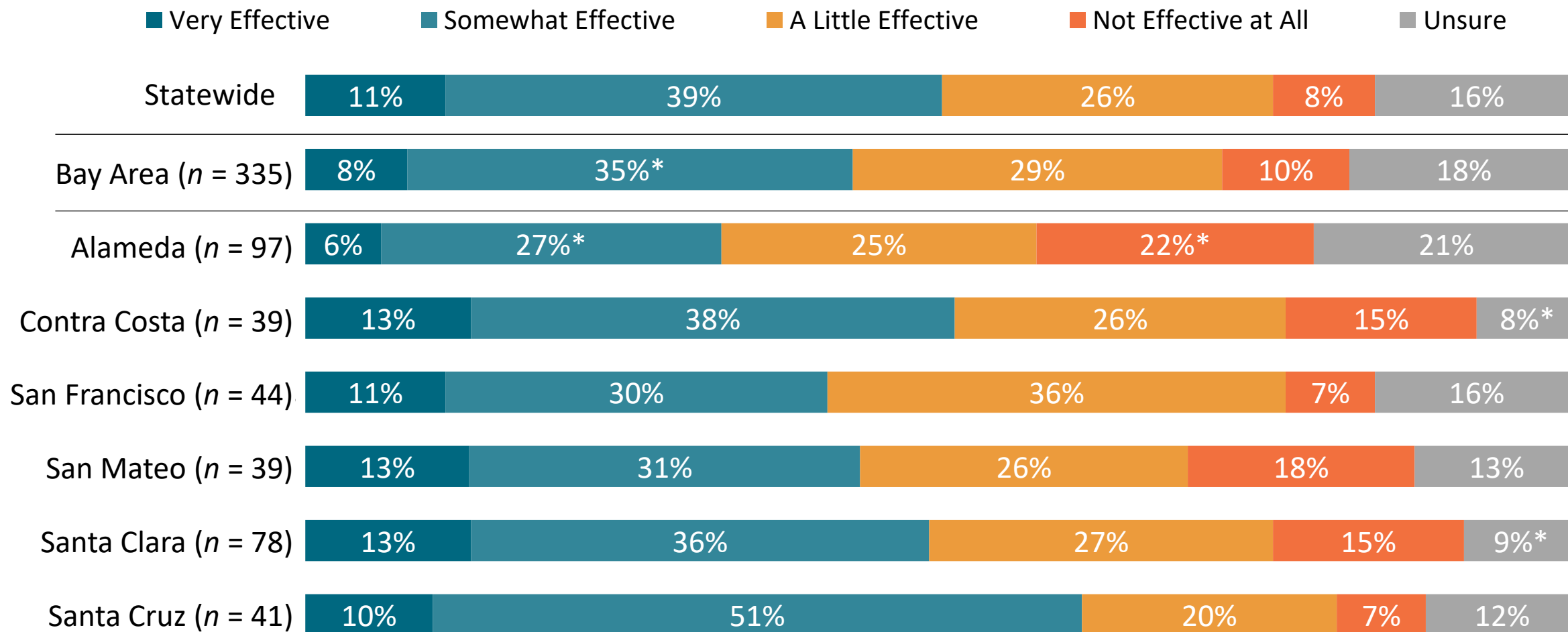
Note: Totals may not sum to 100% due to rounding.

Source: CHCF/GSSR Survey of CalAIM Implementers (July 21–September 12, 2023).

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Implementers Have Mixed Views About Effectiveness of CalAIM Implementation, Pt.2

At this stage of CalAIM's implementation, how would you rate the effectiveness of CalAIM-related processes, protocols, and workflows overall?



*This result is significantly different from results statewide at the 95% confidence level.

Note: Totals may not sum to 100% due to rounding.

Source: CHCF/GSSR Survey of CalAIM Implementers (July 21–September 12, 2023).

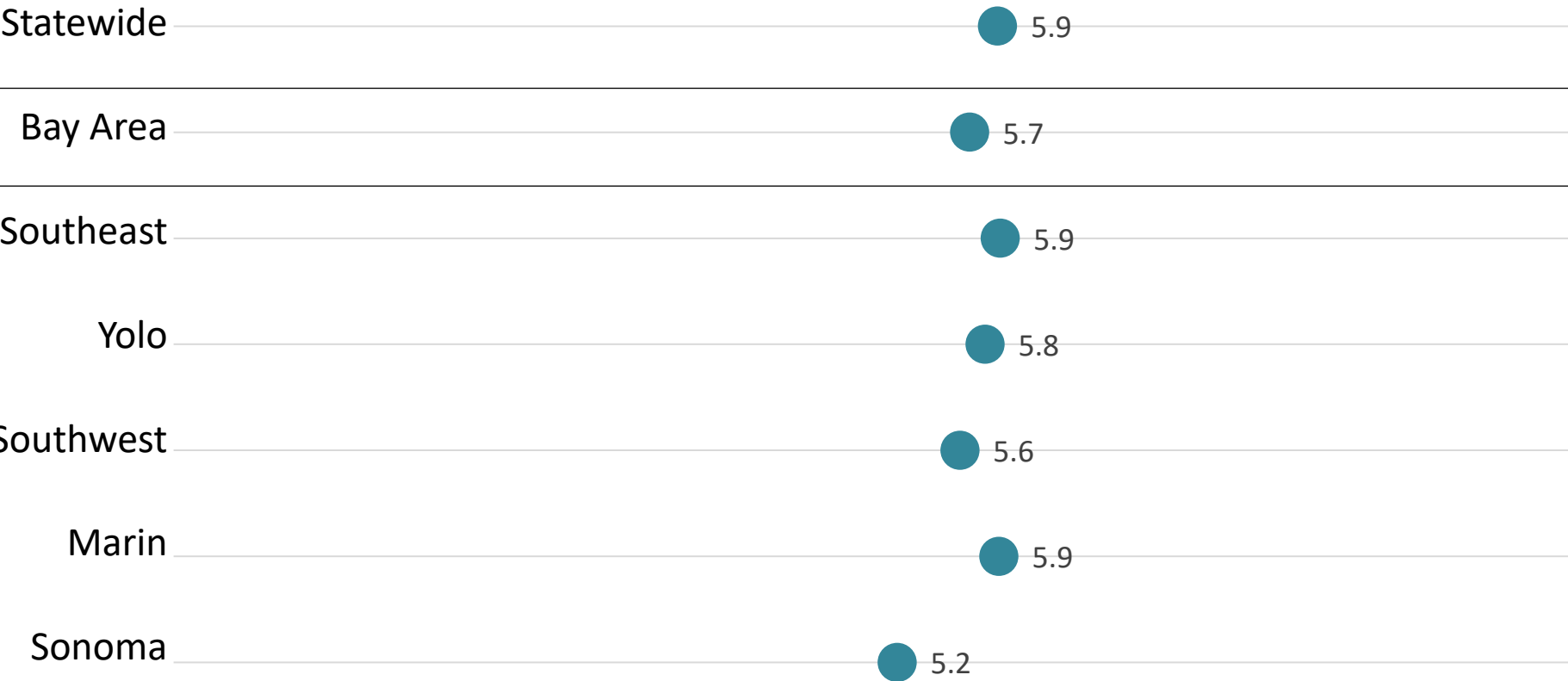
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Organization’s Satisfaction with CalAIM by County, Pt.1

On a scale of zero to 10, with zero meaning not at all satisfied and 10 meaning extremely satisfied, how satisfied are you with your organization’s experience with CalAIM so far?

Not at all satisfied (0) Extremely satisfied (10)

0 1 2 3 4 5 6 7 8 9 10



Note: Data shown are average values for each subgroup.
Source: CHCF/GSSR Survey of CalAIM Implementers (July 21–September 12, 2023).

Organization's Satisfaction with CalAIM by County, Pt.2

On a scale of zero to 10, with zero meaning not at all satisfied and 10 meaning extremely satisfied, how satisfied are you with your organization's experience with CalAIM so far?

Not at all satisfied (0) 0 1 2 3 4 5 6 7 8 9 10 Extremely satisfied (10)

Statewide

5.9

Bay Area

5.7

Alameda

5.2*

Contra Costa

5.9*

San Francisco

5.5

San Mateo

5.9

Santa Clara

5.8

Santa Cruz

6.6*

*This result is significantly different from results statewide at the 95% confidence level.

Note: Data shown are average values for each subgroup.

Source: CHCF/GSSR Survey of CalAIM Implementers (July 21–September 12, 2023).

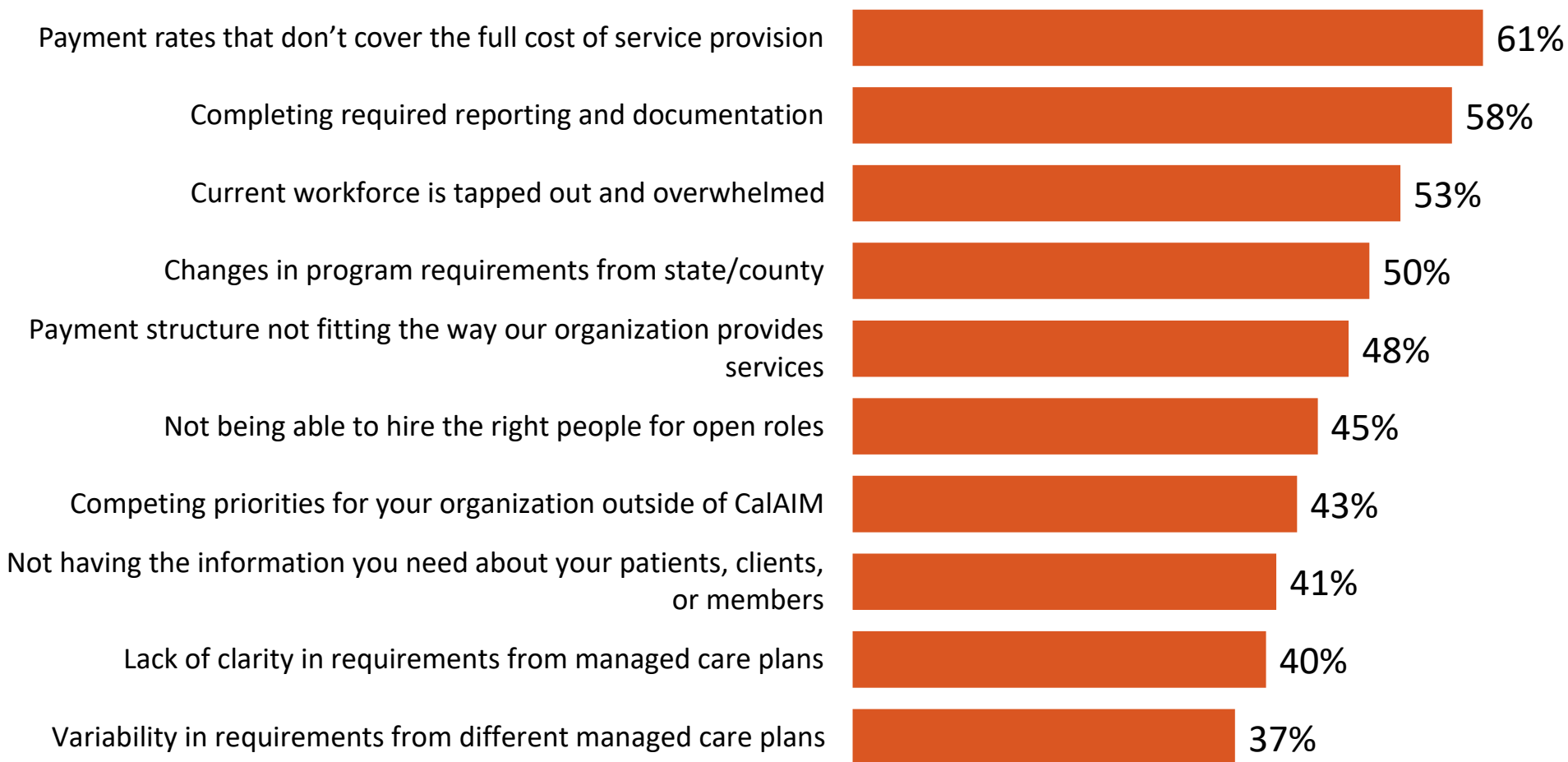
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Implementers in the Bay Area Face an Array of Challenges

Please indicate how challenging each of the following has been when it comes to implementing ECM and/or Community Supports:

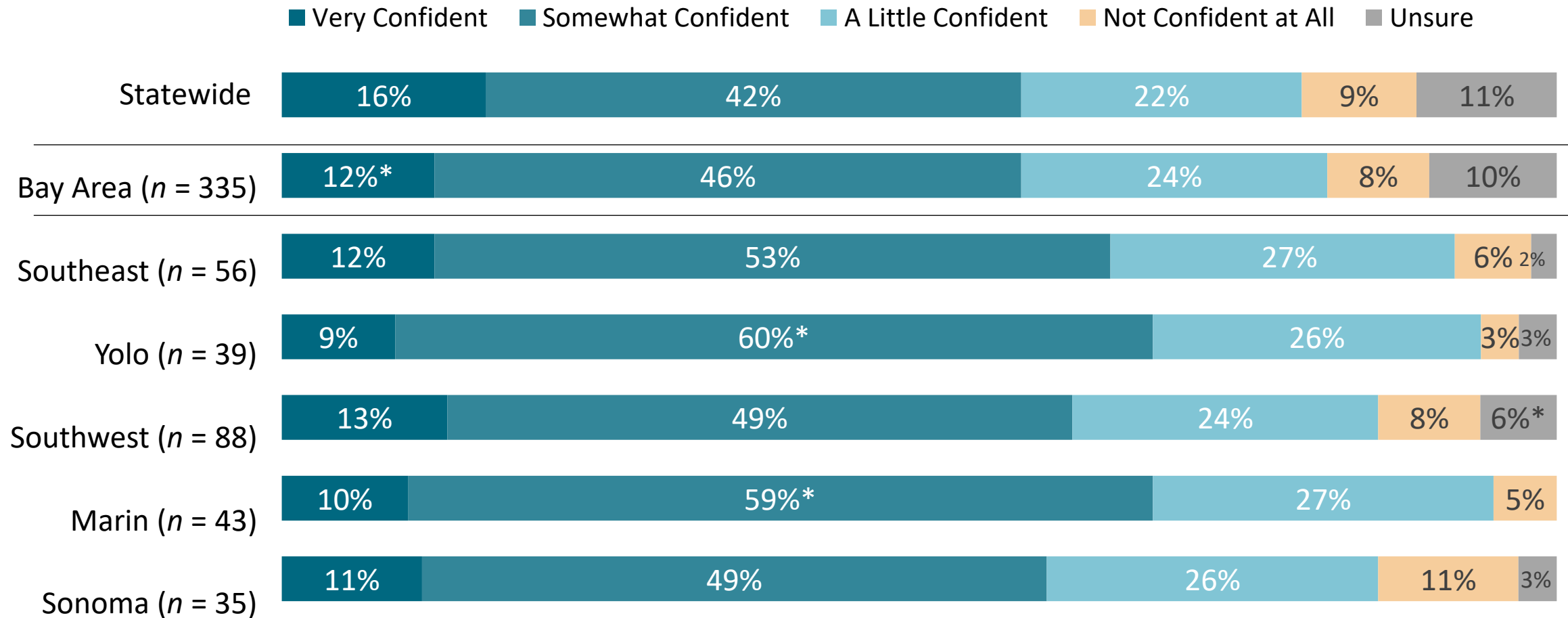
Top Challenges

■ Very + Somewhat Challenging



There's Optimism About Improvement, Pt. 1

*How confident are you that CalAIM-related processes, protocols, and workflows will become more effective over time?
Asked among everyone except those who say CalAIM is already “very effective” (11%)*



*This result is significantly different from results statewide at the 95% confidence level.

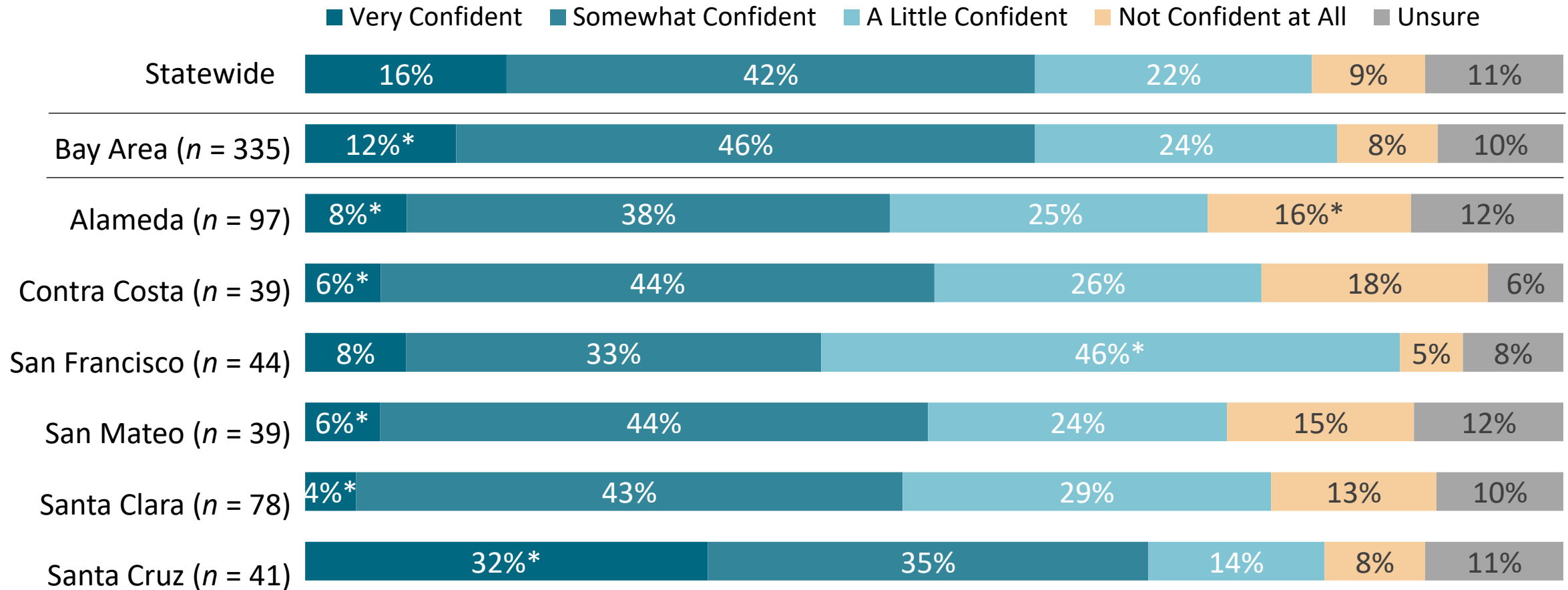
Note: Totals may not sum to 100% due to rounding.

Source: CHCF/GSSR Survey of CalAIM Implementers (July 21–September 12, 2023).

www.chcf.org

There's Optimism About Improvement, Pt. 2

*How confident are you that CalAIM-related processes, protocols, and workflows will become more effective over time?
Asked among everyone except those who say CalAIM is already “very effective” (11%)*



*This result is significantly different from results statewide at the 95% confidence level.

Note: Totals may not sum to 100% due to rounding.

Source: CHCF/GSSR Survey of CalAIM Implementers (July 21–September 12, 2023).

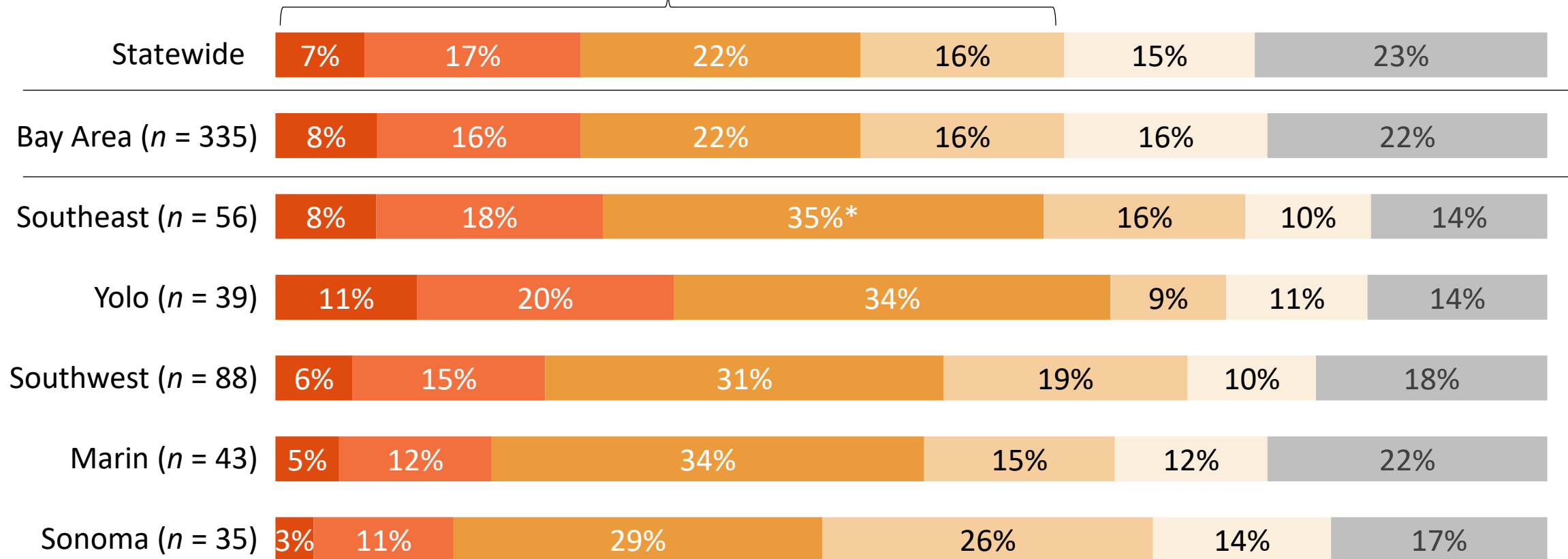
www.chcf.org

... But the Runway for Most Is Less Than a Year, Pt.1

How long are you able to wait for significant improvements in CalAIM-related processes, protocols, and workflows? Asked among everyone except those who say CalAIM is already “very effective” (11%)

■ Cannot wait ■ 1-3 months ■ 4-6 months ■ 7-12 months ■ 1 year+ ■ Unsure

62% within one year



*This result is significantly different from results statewide at the 95% confidence level.

Note: : Totals may not sum to 100% due to rounding.

Source: CHCF/GSSR Survey of CalAIM Implementers (July 21–September 12, 2023).

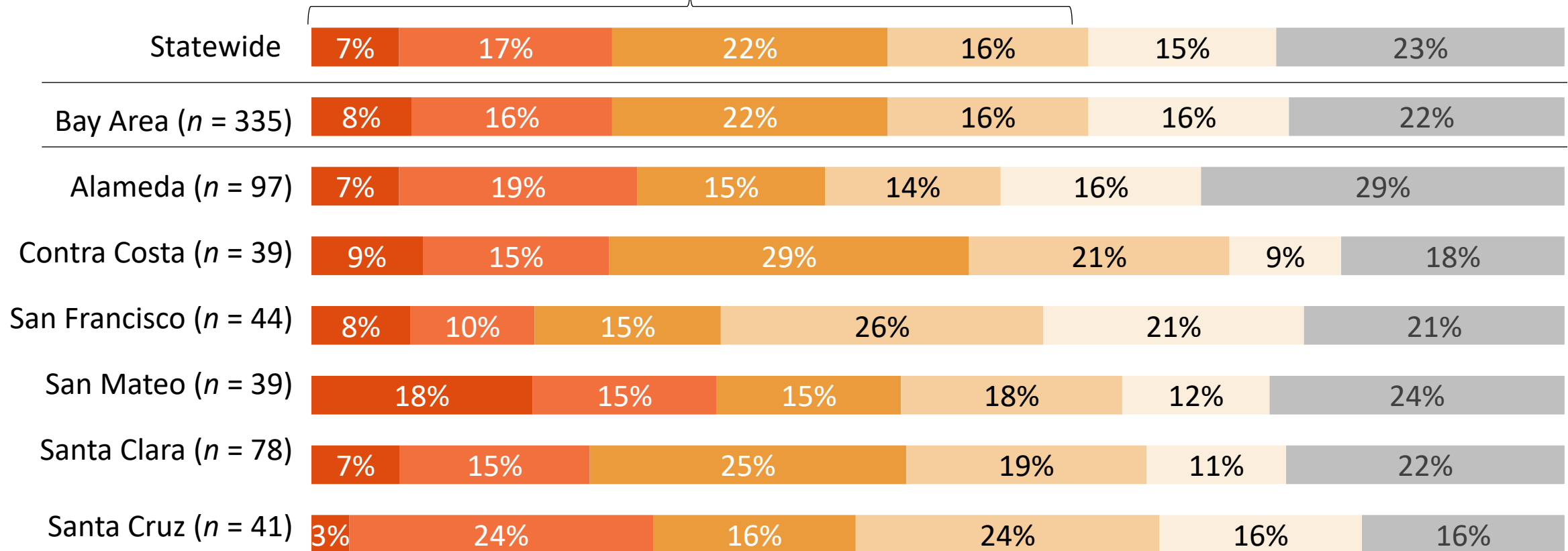
www.chcf.org

... But the Runway for Most Is Less Than a Year, Pt.2

How long are you able to wait for significant improvements in CalAIM-related processes, protocols, and workflows? Asked among everyone except those who say CalAIM is already “very effective” (11%)

■ Cannot wait ■ 1-3 months ■ 4-6 months ■ 7-12 months ■ 1 year+ ■ Unsure

62% within one year



Note: Totals may not sum to 100% due to rounding.

Source: CHCF/GSSR Survey of CalAIM Implementers (July 21–September 12, 2023).

www.chcf.org

Reported Resources Used Vary Somewhat by Subregion

Listed below are some resources available to help implement CalAIM. For each, please indicate if you have already taken advantage of that resource and if so, how helpful it has been to your organization . . .

Showing the % who have used each resource	Statewide	Bay Area (n = 335)	Southeast (n = 56)	Yolo (n = 39)	Southwest (n = 88)	Marin (n = 43)	Sonoma (n = 35)	Alameda (n = 97)	Contra Costa (n = 39)	San Francisco (n = 44)	San Mateo (n = 39)	Santa Clara (n = 78)	Santa Cruz (n = 41)
<i>DHCS Webinars</i>	67%	69%	81%*	84%*	70%	58%	83%*	69%	70%	73%	74%	75%	78%*
<i>Peer-to-peer learning</i>	61%	63%	70%*	72%	64%	60%	71%	61%	62%	68%	59%	64%	70%
<i>Your regional CalAIM (CPI) Group . . .</i>	51%	51%	64%*	72%*	47%	46%	48%	48%	54%	52%	59%	51%	61%
<i>Technical assistance or trainings from MCPs</i>	48%	48%	61%*	67%*	41%	35%	46%	49%	56%	43%	57%	58%	51%
<i>Technical assistance through the CalAIM Technical Assistance Marketplace . . .</i>	39%	35%*	43%	43%	30%	24%*	29%	31%*	36%	29%*	38%	38%	36%
<i>Grants from MCPs through (IPP)</i>	36%	34%	41%	48%*	24%*	30%	26%	32%	36%	32%	48%*	48%*	34%
<i>Grants through PATH (CITED)</i>	35%	30%	40%	44%	32%	33%	37%	27%*	34%	34%	33%	35%	32%

*This result is significantly different from results statewide at the 95% confidence level.

Source: CHCF/GSSR Survey of CalAIM Implementers (July 21–September 12, 2023).

Bay Area Implementers Find Resources Slightly Less Helpful Than Implementers Statewide

Listed below are some resources available to help implement CalAIM. For each, please indicate if you have already taken advantage of that resource and if so, how helpful it has been to your organization . . .

Showing the % saying each resource is “very helpful” (among those who say they’ve used that resource)	Statewide	Bay Area (n = 102)
<i>Grants from MCPs through (IPP)</i>	51%	47%
<i>Grants through PATH (CITED)</i>	45%	40%
<i>Peer-to-peer learning</i>	37%	37%
<i>Technical assistance or trainings from MCPs</i>	31%	23%*
<i>Your regional CalAIM (CPI) Group...</i>	31%	30%
<i>Technical assistance through the CalAIM Technical Assistance Marketplace...</i>	30%	22%*
<i>DHCS Webinars</i>	27%	23%

*This result is significantly different from results statewide at the 95% confidence level.

Source: CHCF/GSSR Survey of CalAIM Implementers (July 21–September 12, 2023).

Lower Administrative Requirements Is Top Tier Requested Resource for Bay Area Respondents — Along with Financial Incentives

Which of the following do you think would be the most helpful for your organization in implementing CalAIM? Please select the top three.

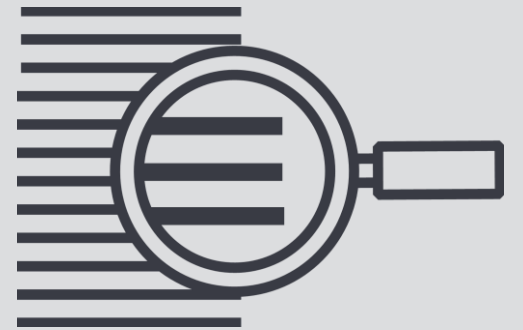
Showing the % saying this resource is in their top three for what would be most helpful . . .	Statewide	Bay Area (n = 335)	Southeast (n = 56)	Yolo (n = 39)	Southwest (n = 88)	Marin (n = 43)	Sonoma (n = 35)	Alameda (n = 97)	Contra Costa (n = 39)	San Francisco (n = 44)	San Mateo (n = 39)	Santa Clara (n = 78)	Santa Cruz (n = 41)
<i>Rates that better reflect your costs of operating</i>	36%	43%*	57%*	51%	47%*	49%	51%	45%	51%	36%	51%	49%*	51%
<i>More implementation funding . . .</i>	33%	34%	32%	23%	30%	33%	23%	36%	31%	41%	28%	38%	27%
<i>Clearer guidance from DHCS (e.g., How-To Guides)</i>	30%	30%	29%	36%	26%	23%	29%	33%	26%	27%	26%	35%	20%
<i>Lower administrative requirements</i>	30%	37%*	48%*	46%*	35%	44%	54%*	38%	49%*	39%	36%	36%	49%*
<i>Clearer guidance from MCPs (e.g., How-To Guides)</i>	26%	23%	20%	26%	19%	21%	20%	25%	26%	25%	15%	15%*	12%*
<i>More opportunities to learn from others in doing similar work</i>	25%	24%	12%*	8%*	22%	21%	14%	26%	23%	32%	23%	23%	22%
<i>Payment structure that better fits your operating model</i>	23%	23%	23%	26%	30%	30%	26%	24%	15%	18%	26%	14%*	27%
<i>Standardization of MCP requirements</i>	23%	23%	32%	26%	22%	30%	23%	27%	49%*	27%	49%*	33%	34%
<i>More support for your organization to troubleshoot problems</i>	22%	18%*	16%	21%	14%*	9%*	6%*	9%*	13%	30%	21%	17%	17%
<i>Faster and more streamlined payment</i>	18%	17%	16%	18%	20%	19%	14%	13%	5%*	9%*	18%	22%	10%

*This result is significantly different from results statewide at the 95% confidence level.

Source: CHCF/GSSR Survey of CalAIM Implementers (July 21–September 12, 2023).

Note: DHCS is Department of Health Care Services; MCP is managed care plan.

Organizational Partnerships



More Bay Area Implementers Have Partnerships with Housing Sector and County Behavioral Health Plans than with Other Sectors, Pt.1

Do you currently have partnerships in any of the following sectors — whether or not you developed them through CalAIM? . . . Please indicate the sectors in which you have at least one partnership.

Showing the % of respondents who have at least one partnership in each sector	Statewide	Bay Area (n = 335)	Southeast (n = 56)	Yolo (n = 39)	Southwest (n = 88)	Marin (n = 43)	Sonoma (n = 35)
<i>Housing and homeless services providers</i>	49%	50%	52%	59%	51%	53%	54%
<i>Mental health and/or substance use providers (outpatient or inpatient)</i>	42%	45%	48%	51%	52%	44%	63%*
<i>County behavioral health plan/agency</i>	40%	50%*	62%*	56%*	57%*	51%	60%*
<i>Managed care plans</i>	37%	39%	61%*	59%*	42%	47%	43%
<i>Primary care providers</i>	36%	40%	50%*	59%*	45%	44%	57%*
<i>Services for older adults or people with disabilities to live in the community</i>	29%	34%*	41%	44%	39%*	37%	46%*
<i>Medically supported food and nutrition services</i>	26%	28%	39%*	44%*	35%*	30%	49%*
<i>Medical respite/recuperative services</i>	24%	23%	30%	33%	26%	30%	23%
<i>Personal care or home health services</i>	24%	25%	27%	28%	35%*	40%*	46%*
<i>Acute hospitals</i>	23%	25%	29%	36%	31%	33%	37%
<i>Skilled nursing facilities</i>	22%	20%	20%	26%	26%	28%	37%
<i>Sobering centers/sobering services</i>	20%	20%	23%	21%	16%	16%	11%
<i>Assisted living facilities</i>	16%	16%	23%	23%	23%	26%	23%
<i>Correctional systems</i>	16%	15%	27%*	26%	17%	16%	11%
<i>Home modification providers</i>	11%	13%	16%	18%	16%	19%	20%
<i>Asthma remediation services</i>	8%	9%	11%	10%	8%	5%	9%
<i>None of the above</i>	8%	6%	--	--	6%	5%	--

*This result is significantly different from results statewide at the 95% confidence level.

Source: CHCF/GSSR Survey of CalAIM Implementers (July 21–September 12, 2023).

More Bay Area Implementers Have Partnerships with Housing Sector and County Behavioral Health Plans Than with Other Sectors, Pt.2

Do you currently have partnerships in any of the following sectors — whether or not you developed them through CalAIM? . . . Please indicate the sectors in which you have at least one partnership.

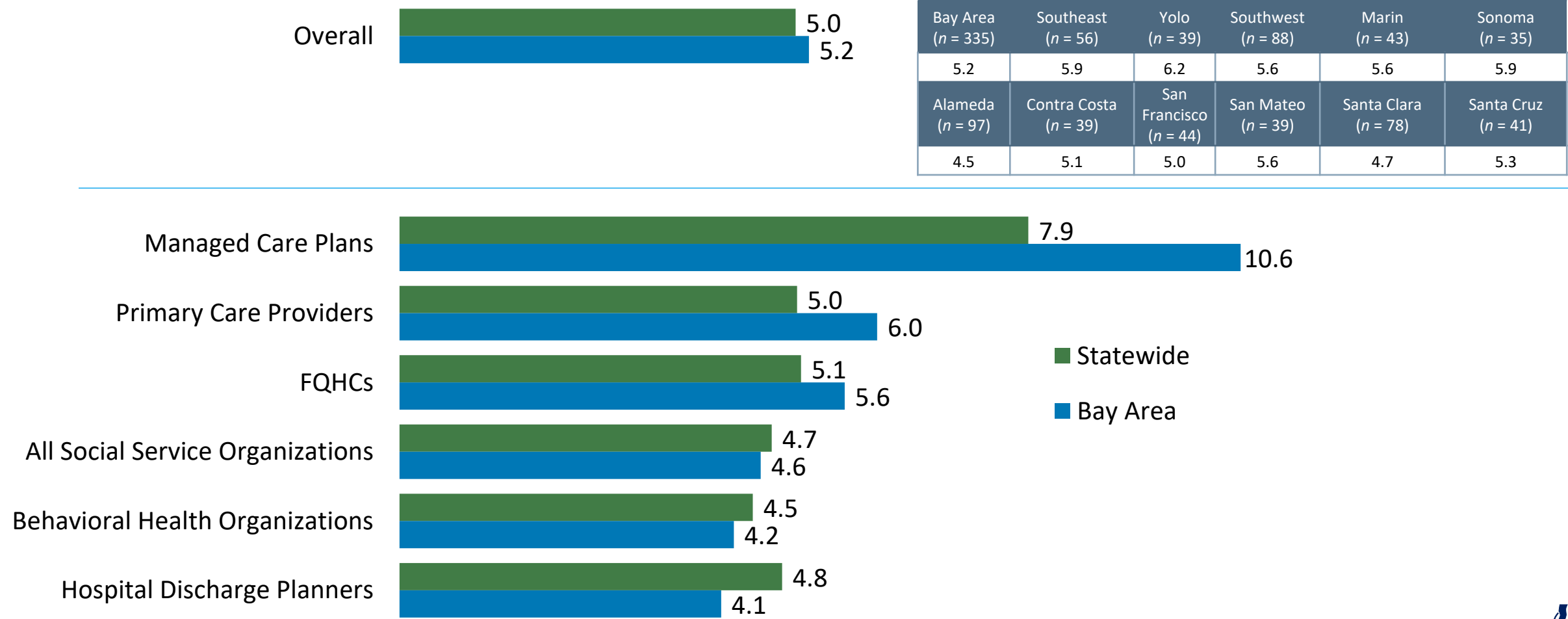
Showing the % of respondents who have at least one partnership in each sector	Statewide	Bay Area (n = 335)	Alameda (n = 97)	Contra Costa (n = 39)	SF City/ County (n = 44)	San Mateo (n = 39)	Santa Clara (n = 78)	Santa Cruz (n = 41)
<i>Housing and homeless services providers</i>	49%	50%	47%	38%	43%	56%	46%	61%
<i>Mental health and/or substance use providers (outpatient or inpatient)</i>	42%	45%	37%	38%	48%	49%	45%	49%
<i>County behavioral health plan/agency</i>	40%	50%*	43%	51%	52%	64%*	55%*	63%*
<i>Managed care plans</i>	37%	39%	37%	51%	45%	51%	41%	49%
<i>Primary care providers</i>	36%	40%	30%	38%	39%	46%	37%	37%
<i>Services for older adults or people with disabilities to live in the community</i>	29%	34%*	24%	38%	27%	44%	36%	46%*
<i>Medically supported food and nutrition services</i>	26%	28%	21%	15%	25%	21%	17%*	24%
<i>Medical respite/recuperative services</i>	24%	23%	19%	26%	25%	28%	18%	22%
<i>Personal care or home health services</i>	24%	25%	19%	31%	25%	28%	21%	24%
<i>Acute hospitals</i>	23%	25%	16%	23%	25%	31%	21%	27%
<i>Skilled nursing facilities</i>	22%	20%	14%*	23%	16%	28%	19%	10%*
<i>Sobering centers/sobering services</i>	20%	20%	14%	10%	25%	23%	21%	34%
<i>Assisted living facilities</i>	16%	16%	14%	18%	16%	15%	15%	10%
<i>Correctional systems</i>	16%	15%	13%	13%	18%	18%	15%	17%
<i>Home modification providers</i>	11%	13%	12%	13%	7%	13%	6%	7%
<i>Asthma remediation services</i>	8%	9%	10%	18%	2%*	5%	5%	7%
<i>None of the above</i>	8%	6%	6%	5%	7%	3%*	6%	7%

*This result is significantly different from results statewide at the 95% confidence level.

Source: CHCF/GSSR Survey of CalAIM Implementers (July 21–September 12, 2023).

Most Organizations Report Partnerships in Multiple Sectors – Though Still Room to Increase Interconnectivity

*Do you currently have partnerships in any of the following sectors — whether or not you developed them through CalAIM?
Showing the average number of sectors that each type of respondent reports partnerships in. For example, statewide,
MCPs report having partnerships in an average of 7.9 different sectors.*



Respondents in the Bay Area Rate Partnerships Somewhat More Favorably than Statewide

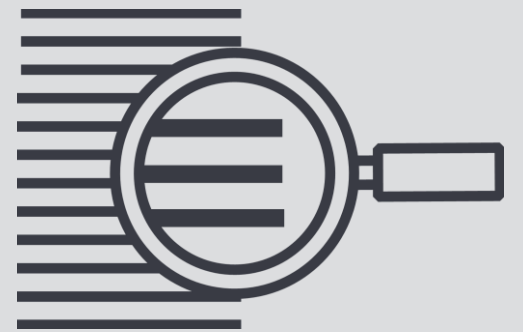
Thinking about your best partnership with [sector], which of the following would you say accurately describes your partnership?

Showing the % who say this applies to their best partnerships in any sector	Statewide	Bay Area (n = 335)	Southeast (n = 56)	Yolo (n = 39)	Southwest (n = 88)	Marin (n = 43)	Sonoma (n = 35)	Alameda (n = 97)	Contra Costa (n = 39)	San Francisco (n = 44)	San Mateo (n = 39)	Santa Clara (n = 78)	Santa Cruz (n = 41)
<i>We communicate about shared clients/patients, when needed</i>	74%	79%*	86%*	92%*	85%*	86%*	94%*	69%	79%	82%	82%	78%	85%*
<i>We work together to identify unmet needs and decide how gaps will be filled</i>	69%	71%	77%	77%	77%	79%	80%	60%	69%	73%	67%	68%	68%
<i>We approach our partnership with a spirit of give and take</i>	51%	57%*	68%*	69%*	61%*	60%	74%*	48%	54%	68%*	62%	62%	51%
<i>We trust one another</i>	51%	54%	64%*	67%*	52%	58%	60%	51%	54%	61%	56%	56%	51%
<i>We speak the same language (literally and figuratively)</i>	50%	55%*	61%	67%*	59%	63%	66%*	52%	54%	68%*	56%	54%	51%
<i>Not one of these criteria applies to any partners in this sector</i>	10%	15%*	16%	8%	22%*	26%*	26%*	14%	15%	14%	13%	14%	20%

*This result is significantly different from results statewide at the 95% confidence level.

Source: CHCF/GSSR Survey of CalAIM Implementers (July 21–September 12, 2023).

Data Exchange



State and Region Not Yet at Goal of Holistic, Complete, Realtime Data Exchange

Still thinking about the information about other care that the people you serve are getting . . .

% of respondents who say . . .	Statewide	Bay Area (n = 335)	Southeast (n = 56)	Yolo (n = 39)	Southwest (n = 88)	Marin (n = 43)	Sonoma (n = 35)	Alameda (n = 97)	Contra Costa (n = 39)	San Francisco (n = 44)	San Mateo (n = 39)	Santa Clara (n = 78)	Santa Cruz (n = 41)
<i>. . . Information is completely or mostly accurate</i>	66%	65%	64%	67%	69%	77%	66%	70%	72%	61%	62%	69%	66%
<i>. . . They get all or most of the information needed</i>	45%	44%	34%	36%	47%	49%	37%	47%	44%	48%	44%	41%	44%
<i>. . . They get information within 48 hours or faster</i>	43%	43%	36%	31%	43%	40%	43%	43%	41%	43%	54%	49%	32%

Information Largely Coming from Personal Contact Over IT Solutions

Switching topics somewhat, how do you currently get information about the other care that the people you serve are getting in the context of CalAIM (e.g., ECM, Community Supports)? Please choose an answer for each row.

Showing the % who ever use this source (always + usually + some of the time)	Statewide	Bay Area (n = 335)	Southeast (n = 56)	Yolo (n = 39)	Southwest (n = 88)	Marin (n = 43)	Sonoma (n = 35)	Alameda (n = 97)	Contra Costa (n = 39)	San Francisco (n = 44)	San Mateo (n = 39)	Santa Clara (n = 78)	Santa Cruz (n = 41)
<i>From the patient/client/member themselves</i>	85%	85%	84%	79%	83%	86%	91%	86%	90%	89%	95%*	94%*	80%
<i>In person meetings with other provider/care team member(s)</i>	74%	74%	77%	85%	77%	79%	86%*	69%	72%	73%	72%	74%	73%
<i>Through an Electronic Health Records system (EHR)</i>	59%	61%	70%	69%	57%	63%	66%	60%	67%	73%*	62%	69%*	54%
<i>Through a health plan / managed care plan portal</i>	50%	44%*	45%	49%	41%	51%	46%	44%	56%	45%	56%	54%	51%
<i>Through a Health or Community Information Exchange (HIE/CIE) or other data portal . . .</i>	45%	45%	50%	54%	36%	44%	37%	46%	41%	36%	54%	50%	51%

*This result is significantly different from results statewide at the 95% confidence level.

About Goodwin Simon Strategic Research

Goodwin Simon Strategic Research (GSSR) is an independent opinion research firm with decades of experience in polling, policy analysis, and communications strategy for clients in the public and private sectors. GSSR Founding Partner Amy Simon, Partner John Whaley, and Senior Research Analyst Nicole Fossier contributed their thought leadership on this survey research in collaboration with the California Health Care Foundation.



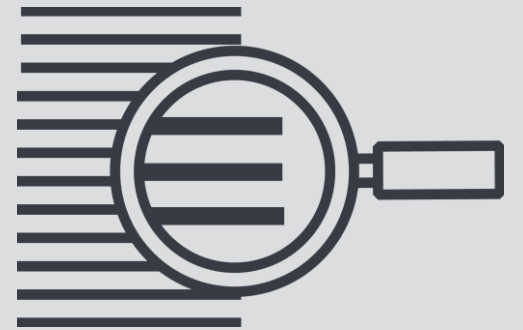
California Health Care Foundation

About the California Health Care Foundation

*The California Health Care Foundation is an independent, nonprofit philanthropy organization that works to improve the health care system so that all Californians have the care they need. We focus especially on making sure the health system works for Californians with low incomes and for communities who have traditionally faced the greatest barriers to care. **Health equity is the primary lens through which we focus our work at CHCF.***

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. For more information, visit www.chcf.org.

Appendix: In Their Own Words



Bay Area Implementers Cite Successes So Far

Disseminating consistent information to our skilled nursing facilities so that they could communicate accurate information to our patients and families.

- Leader, Skilled Nursing Facility

We were already doing this work in our county, but we have been able to grow our team in the last year.

– Leader, Social Services Provider

Developing relationships with the local Plans and understanding CalAIM implementation enough to identify the barriers to contracting under CalAIM that CBOs face, and the issues around coordinating care for individual Medi-Cal recipients who are served by the Plans and non-CalAIM CBOs.

– Leader, Social Services Provider

Bay Area Implementers Cite Successes So Far

“Documentation for behavioral health services for children with Medi-Cal has become more streamlined. We have had changes implemented to the EHR which help in this.”

– *Frontline, Mental Health Social Services Provider*

“Housing and Community Supports has allowed us to fund services whose funding was previously reduced. So it allowed us to keep serving unhoused and formerly unhoused clients.”

– *Leader, Community Clinic*

“We've been able to reach people who are extremely vulnerable who have been waiting for a case manager to help them. Fantastic success in some cases.”

– *Leader, Social Services Provider*

“Our organization has been able to shift from grant-funded to Medi-Cal-reimbursed ECM services. This enables sustainability and assurance for our program!”

– *Leader, Community Clinic*

Bay Area Implementers Ask for...

Create a list of platforms for each administrative process. We have had difficulty figuring out which platform is best or which platform our MCP prefers. It would be extremely helpful to have a list of platforms that can assist with referrals, billing, and claims. And examples of each process.

– Leader, Social Services Provider

Providers are still facing issues that have been around since the implementation of Cal MediConnect. There needs to be more accountability by DHCS to hold the plans accountable for what those services and processes under the agreement that they have entered into with the State of California. Unless the plans are held accountable, the providers and patients pay the price.

– Leader, Skilled Nursing Facility

Outreach to the unhoused/unstably housed/recently housed is a huge challenge and must be adequately funded for this population to be properly served. The clinical level documentation that's required may be good in many ways, but they require a lot of skills/training. . . . Ways to reduce this burden are essential to our ability to hire and retain staff.

– Leader, FQHC

Bay Area Implementers Ask for...

Payment reform and billing coding changes need to reflect realities on the ground for community mental health providers — especially those for children and youth who require many collateral and family contacts.

– *Leader, Community Mental Health Provider*

Apply presumptive eligibility. Standardize the number of encounters needed PMPM — for example, two tiers. Base tier needs one telehealth encounter and is paid out at \$x rate. Second tier is one in-person encounter and is paid out at higher rate. Have quality incentive payments/bonuses paid out to high-performing provider groups sent from DHCS, not from the health plans.

– *Leader, FQHC*

The biggest challenge we have faced as an ECM provider is transitioning to a model where we are expected to exit patients from the program within 12 months. It presents a problem for the small population of our patients who have cognitive issues that do not allow them to manage their care independently. These patients will likely need lifetime case management support. It's not clear what resource within CalAIM exists to support patients like this.

– *Leader, FQHC*