

Health Plan 
of San Joaquin

 Mountain Valley
Health Plan



**Enhanced Care Management
and
Community Support Services
Bi-Monthly Meeting**

January 9, 2025

Meeting Agenda

Topics	Facilitator
Introductions	Provider Services
CalAIM Program Update	Tapinder Dhillon
Quarterly Reports – Due Dates	J'neen Abramjian
Open Discussion	All



CalAIM ECM Updates

**Medical Management Department
Manager, Tapinder Dhillon**



Presumptive Authorizations

Presumptive Authorizations: Effective 01/01/2025, ECM providers can deliver ECM services for a 30-calendar day without a prior authorization.

- On the 31st or onwards, ECM provider must submit the prior authorization request for ECM through provider portal along with ECM referral form. The referral form is needed to identify the population of focus.
- ECM provider must submit their authorization request to Health Plan as soon as possible and no later than five working days before the end of the presumptive authorization period to limit gaps in authorization and reimbursement for ECM services provided to Members Correction: ECM provider not Health Plan
- No additional documents are required for initial prior authorization.



Standardized ECM Referral Form

Per DHCS guidelines, HPSJ/MVHP has updated the ECM referral forms/templates (both Adult and Child/Youth). The forms are available on the website <https://www.hpsj.com/providers/calaim/>.

Adult ECM Referral Form: https://www.hpsj.com/wp-content/uploads/2024/12/HPSJ-MVHP_ECM-ADULT-REFERRAL-FORM_12122024E_FINAL.pdf

Child/Youth ECM Referral Form: https://www.hpsj.com/wp-content/uploads/2024/12/HPSJ-MVHP_ECM-CHILD-YOUTH-REFERRAL-FORM_12122024E_FINAL.pdf



CalAIM ECM/CSS Updates

Provider Services Manager, J'neen Abramjian



ECM and CS Updated Reporting Requirements

File Name	Updated Frequency	Transmission
ECM Pursuit List Member Information File (MIF)	Monthly	Outbound from Health Plan to Provider
ECM Provider Return Transmission File	Quarterly by 15 th of the month following quarter end	Inbound from ECM Provider to Health Plan
ECM Provider Initial Outreach Tracker File	Quarterly by 15 th of the month following quarter end	Inbound from ECM Provider to Health Plan
Potential ECM Member Referral File	Quarterly by 15 th of the month following quarter end	Inbound from ECM Provider to Health Plan
Community Support Return Transmission File	Quarterly by 15 th of the month following quarter end	Inbound from CS Provider to Health Plan
Community Support Authorization File	Monthly	Outbound from Health Plan to Provider
ECM Quarterly Capacity Report	Quarterly by 15 th of the month following quarter end	Inbound from ECM Provider to Health Plan
CSS Quarterly Capacity Report	Quarterly by 15 th of the month following quarter end	Inbound from CS Provider to Health Plan



ECM/CS Quarterly Capacity Reporting Deadlines 2025

- **Q4 2024** – October - December
 - Providers' Deadline Due Date is January 15, 2024
- **Q1 2025** – January - March
 - Providers' Deadline Due Date is April 15, 2024
- **Q2 2024** – April - June
 - Providers' Deadline Due Date is July 15, 2025
- **Q3 2024** – July - September
 - Providers' Deadline Due Date is October, 2025



**Next ECM/CSS
03/13/2025**

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Thank you!