

II. What Is Enhanced Care Management (ECM)?

ECM is a whole-person, interdisciplinary approach to care that addresses the clinical and non-clinical needs of Members with the most complex medical and social needs. ECM provides systematic coordination of services and comprehensive care management that is community based, interdisciplinary, high touch and person centered. DHCS' vision for ECM is to coordinate all care for Members who receive it, including across the physical and behavioral health delivery systems. ECM is a statewide Medi-Cal benefit that is being phased in according to the schedule given in Section III below.

DHCS has long understood that the need for care management and coordination increases with clinical and social complexity and has worked for several years to build capacity for a more comprehensive approach to care management and coordination in Medi-Cal. In 2016, DHCS launched the WPC Pilots as part of its Medi-Cal 2020 1115 waiver. WPC Pilots tested interventions to coordinate physical, behavioral and social services in a patient-centered manner, including interventions that address SDOH such as improving access to housing and supportive services, and have built significant infrastructure to ensure local collaboration for improved outcomes. In 2018, DHCS launched the Health Homes Program (HHP). HHP served eligible Medi-Cal Members with complex medical needs and chronic conditions and coordinated the full range of physical health, behavioral health and community-based long-term services and supports (LTSS).

ECM builds on both the design and the learning from the WPC Pilots and HHP. ECM, with Community Supports, replaces both initiatives, scaling up the interventions to form a statewide care management approach that is a key component of the overall PHM Program. ECM offers comprehensive, whole person care management to high-need, high-cost Medi-Cal Managed Care Members, with the overarching goals of:

- Improving care coordination;
- Integrating services;
- Facilitating community resources;
- Addressing SDOH;
- Improving health outcomes; and
- Decreasing inappropriate utilization and duplication of services.

ECM and the PHM Program

On January 1, 2023, DHCS launched a new, comprehensive **Population Health Management (PHM) Program** as part of CalAIM. ECM is one component of that

overarching program. Under the new PHM Program, MCPs and their networks and partners are responsive to individual Member needs within the communities they serve while working within a common framework and expectations. The PHM Program is designed to ensure that all Medi-Cal managed care Members have access to a comprehensive set of services based on their needs and preferences across the continuum of care, with ECM intended for Members with the highest needs on that CalAIM Care Management Continuum. Two other care management programs exist within the Continuum, including Complex Care Management (CCM) for higher- and medium-rising risk Members and Basic Population Health Management (BPHM) for all Members. See Figure 1 below outlining the CalAIM Care Management Continuum and the [PHM Policy Guide](#) for more information.

DHCS is also building a statewide **PHM Service**, which is a technology service designed to support PHM Program functions, including ECM. When fully operational, the PHM Service will provide MCPs, Providers, counties, Members, and other authorized users with access to comprehensive data on Members’ health history, needs, and risks, including historical administrative, medical, behavioral, dental, and social service data and other program information. The PHM Service will use these data to support risk stratification, segmentation and tiering, assessment and screening processes, and analytics and reporting functions. The PHM Service will also improve data accuracy and timeliness by providing members with the ability to update their information and improve DHCS’ ability to understand population health trends and the efficacy of various PHM interventions and strengthen oversight. For more information about PHM, refer to the [PHM Policy Guide](#) and [DHCS’ PHM webpage](#).

Figure 1: CalAIM Care Management Continuum

