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November 29, 2021

Enhanced Care Management (ECM)

Dear Provider,

The Kern Health Systems (KHS) Health Homes Program (HHP) is transitioning to a new Department of Health Care Services (DHCS) Member benefit named Enhanced Care Management (ECM). The transition will start January 1, 2022. All Members currently receiving HHP services will transition to ECM and within 6 months be evaluated to determine if they will continue with ECM or be transitioned to a lower level of case management. In addition, new Members will be eligible for ECM services. Members qualify for ECM if they meet eligibility criteria for one or more of the following Populations of Focus.

- Individuals Experiencing Homelessness
- Adults with Serious Mental Illness or Substance Use Disorder
- Adult High Utilizers – Members that have 5 or more emergency room visits or 3 or more inpatient admissions within 6 months
- Adults Transitioning from Incarceration

Like HHP, the Enhanced Care Management benefit coordinates physical health services, behavioral health services, and community-based long-term services and supports (LTSS) for Members. Members who receive ECM services will have a care team, which includes case management and care coordinators.

ECM services include:

- Comprehensive Assessment and Care Management Plan – Developing and updating an individualized Care Management Plan to guide each Member with needed services and care.
- Enhanced Coordination of Care – Implementation of the Members Care Management Plan with coordinating care and connection for health and community services.
- Health Promotion – Educating Members about and supporting them in health behaviors.
- Comprehensive Transitional Care – Facilitating care transitions between the hospital, nursing homes, and other treatment facilities.
- Member and Family Support - Supporting the self-management and decision-making efforts of Members and their family or support team.
- Coordination and Referral to Community and Social Support Services– Determining needs and coordination referrals to address Social Determinants of Health.

KHS will notify you when any Members assigned to your practice are authorized for the ECM program. The Member's PCP assignment is not changed with ECM authorization or enrollment. KHS or the contracted ECM providers may also outreach to your assigned KFHC Members who may qualify for this



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program to see if they are interested in enrolling. If you believe this program may be a benefit for a Member, you or the Kern Family Health Care Member, may call KHS to see if a Member qualifies. You can also submit a referral to the ECM Program through the KHS Provider Portal. Additional details will be provided on how to submit a referral to the ECM program.

For more information, please click the link below for the Department of Health Care Services ECM website or call KHS at 1-800-391-2000, option 4.

[Enhanced Care Management and In Lieu of Services \(www.dhcs.ca.gov/Pages/ECMandILOS.aspx\)](http://www.dhcs.ca.gov/Pages/ECMandILOS.aspx)

If you have any questions, please feel free to contact your Provider Relations Representative at 661-664-5000.

Thank you,

Melissa Lopez
Provider Relations Manager
Kern Health Systems