

Incentive Payment Program Funding Application

Background

The Incentive Payment Program (IPP) made available by the Department of Health Care Services is intended to support the development and expansion of Enhanced Care Management (ECM) and Community Supports (CS) capacity. ECM is a Medi-Cal benefit made available to eligible CenCal Health members with the intent of addressing clinical and non-clinical needs through intensive coordination of health and health-related services. CS services are optional and complementary to ECM.

CenCal Health currently offers Medically Tailored Meals and Recuperative Care CS services. Beginning in January 2023, CenCal Health will expand available CS services to include housing transition navigation services, housing deposits, housing tenancy and sustaining services, and sobering centers.

For more information on both ECM and CS services, please visit www.cencalhealth.org/providers/calaim/.

CenCal Health is pleased to make IPP funding available to current and interested ECM and CS providers through this application process. Funds will be awarded by CenCal Health based on a consistent and equitable review process and until such time as available IPP funds are exhausted.

Applications will be accepted on a rolling basis. Applications received before the 15th of each month will be reviewed at the following month's IPP Review Committee meeting.

Funding Opportunities

CenCal Health is accepting applications from current and anticipated ECM and CS providers to support the following activities:

- 1. Staffing Costs, Including Recruitment and Retention
- 2. Capital Investments
- 3. System and Infrastructure Development
- 4. Ongoing Operations to Support Start-Up and Sustainability
- 5. Staff Training and Development

All funding should support the development and expansion of sustainable ECM and CS services for CenCal Health members.

About CenCal Health

Founded as the Santa Barbara Regional Health Authority, CenCal Health is the oldest managed care Medicaid health plan of its kind, having launched in 1983. CenCal Health utilizes the County Organized Health System (COHS) model and is the exclusive Medi-Cal health plan in the two county service area, and serves one in four residents in Santa Barbara County and one in five in San Luis Obispo County.

We work in partnership with our contracted providers, including with local primary and specialty providers, all hospitals in both counties, county health departments, health systems, Federally-Qualified Health Centers, Indian Health Centers, private medical groups and individual physicians.

CenCal Health has been recognized by the National Committee for Quality Assurance (NCQA) for our innovation and consistently ranks among the top health plans serving Medi-Cal members in California. Our work results in the delivery of innovative community-based health care services, better medical outcomes, and cost savings.

Funding Application

Section One: Overview

20 points possible

- 1. Please provide an overview of your proposal, including:
 - Purpose of funding and key anticipated outcomes
 - Individuals or communities served
 - Overview of how funds will be spent
 - Timeline against which funds will be utilized

500 words max

Section One: Overview (cont.)

2.	Which of the following activities will IPP funding support? (select all that apply)		
	and Retention		
	 Capital Investments 		
	 System and Infrastructure Development 	nt	
	Ongoing Operations to Support Start-U	p and Sustainability	
	O Staff Training and Development		
3.	Does your organization currently hold a provide	er agreement with CenCal Health?	
	○ Yes		
	○ No		
4. What services will your organization provide? (select all that apply)			
	 Enhanced Care Management 		
	Community Supports		
	Please list the Community Supports which will	be provided: (select all that apply)	
	O Medically Tailored Meals O Hou	sing Transition Services	
	O Recuperative Care O Hou	sing Deposits	
	O Sobering Centers O Hou	sing Tenancy & Sustaining Services	
	Go Live: 1/1/24	Go Live: 7/1/24	
	Short Term Post Hospitalization	Nursing Facility Transition/Diversion to Assisted Living Facility (ALF	
	Respite Services	or Residential Care Facility for the Elderly (RCFE)	
	Day Habilitation Services	Nursing Facility Transition to Home	
	Personal Care & Homemaker Services	Environmental Accessibility Adaptations (Home Modifications)	
		Asthma Remediation	
5.	How much IPP funding are you requesting?	litional grant funding, including PATH funding? If so, please describe.	
	will this program be supported through any add	ntional grant funding, including PATH funding? It so, please describe.	

• Current operating budget

Section Two: Organization Information

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1.	Legal name of your organization.
2.	Address and phone number for your organization.
3.	Name and position of staff person submitting this application.
4.	Please provide your organization's mission statement.
5.	Which counties does your organization serve? (Santa Barbara, San Luis Obispo, or both)
6.	What cities does your organization serve within each county?
7.	Tell us about your current programs and activities.
	7. Please upload/attach the following financial documents:
	 Cash flow statement Audited financial statements

Section Three: Proposal Details

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40	points	possible

1.	Please describe the need which you seek to meet through IPP funding.
2.	Please provide an overview of your proposed timeline for utilizing IPP funds.
3.	Please describe how many members you anticipate serving through ECM and CS, including the populations of focus whom you intend to serve.
4.	Please describe your organization's plan for sustainability of ECM and/or CS services after IPP funds have been exhausted.

¹As of July 2022, eligible populations of focus include CenCal Health members who are: Individuals and Families Experiencing Homelessness; Adults At Risk for Avoidable Hospital and Emergency Department (ED) Utilization; and Adults with SMI/SUD needs. As of January 2023, eligibility expands to include CenCal Health members who are: Adults Living in the Community At Risk for Institutionalization and Adults who are Nursing Facility Residents Transitioning to the Community.

Section Four: Evaluation Information

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Please describe the desired outcomes which will be achieved through use of IPP funds, including their anticipated timeline. Include specific measures of performance, including a description of the measure numerator, denominator, and the estimated rate of performance that will be achieved at the conclusion of use of IPP funds.
Include applicant's current baseline rate of performance for each measure.
How will success be measured?
Up to 10 additional points will be awarded for the overall quality of the proposal and the indicated impact and sustainability of services. Applications will be reviewed and scored against a potential of 100 points.
This application for IPP funding is submitted by the below party, who has the authority to submit such application on behalf of the applicant organization.
Name:

Please submit this application and all supporting documents to IPP@cencalhealth.org

Thank you for your application.

CenCal Health will review the information provided and will follow up with any additional questions.

Date:

Title:

Signature: