

Braiding Funding Streams to Provide More Person-Centered Care for People with Complex Health and Social Needs

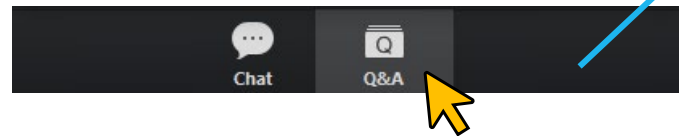
September 18, 2025

1:00 – 2:00 pm PT/ 4:00 – 5:00 pm ET

Made possible by the California Health Care Foundation

Questions?

To submit a question, please click the Q&A icon located at the bottom of the screen.

A window titled 'Q&A' with standard window controls (minimize, maximize, close). Inside the window, there is a large text input field with the placeholder text 'Please input your question...'. Below the input field, there is a checkbox labeled 'Send Anonymously' and a 'Send' button.

Agenda

- Welcome and Introduction
- Choice in Aging: *Meeting the Needs of Older Adults and People with Disabilities*
- RH Community Builders: *Supporting People Experiencing Housing Instability*
- Children's Institute: *Addressing Behavioral Health Care Needs for Children and Adults*
- Moderated Q&A
- Closing



Center for Health Care Strategies

Dedicated to strengthening the U.S. health care system to ensure better, more equitable outcomes, particularly for people served by Medicaid.

Together with our partners, our work advances:



Effective models for prevention and care delivery that harness the field's best thinking and practices to meet critical needs.



Efficient solutions for policies and programs that extend the finite resources available to improve the delivery of vital services and ensure that payment is tied to value.



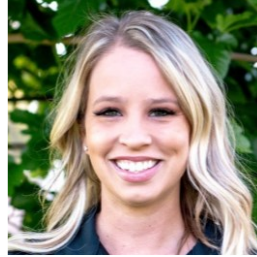
Equitable outcomes for people that improve the overall wellbeing of populations facing the greatest needs and health disparities.



Meet Today's Presenters



Debbie Toth
President and CEO
Choice in Aging



Katie Wilbur, LCSW
Executive Director
RH Community Builders



Gene Straub, MPH
Executive Vice President & Chief
Operating Officer
Children's Institute



Melora Simon, MPH
Associate Director, People-Centered Care
California Health Care Foundation



Logan Kelly, MPH
Senior Program Officer
Center for Health Care Strategies



Sarah Triano
Associate Director of Long-Term Services and
Supports & Disability Policy
Center for Health Care Strategies

CHCF Resource Center

Visit CHCF's website to explore the collection of tools and resources aimed at helping organizations understand and implement CalAIM. www.chcf.org/calaim

New report that lifts up the needs and experiences of people with complex needs: www.chcf.org/TheirOwnWords



CalAIM Background

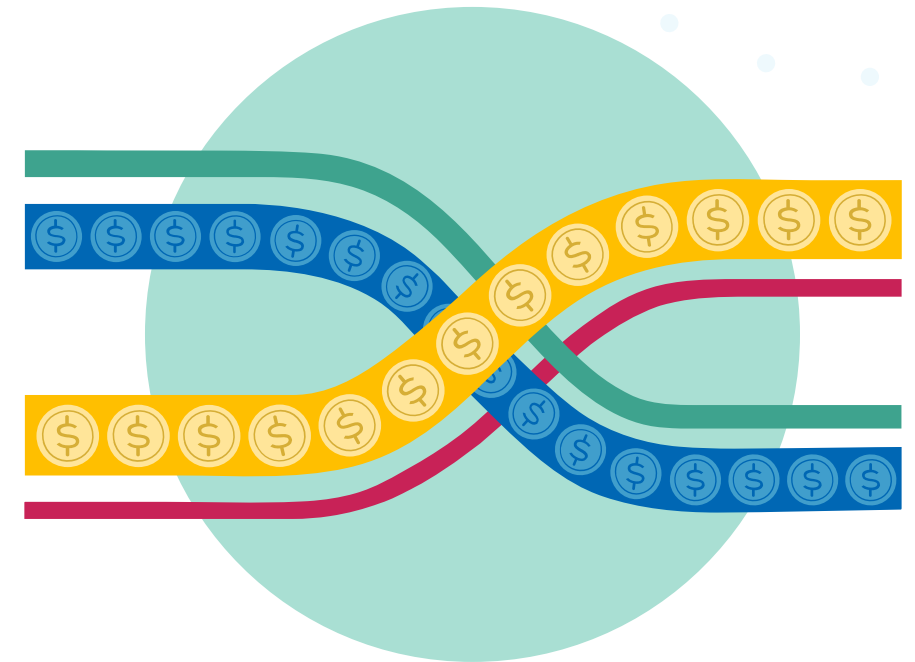
- CalAIM is a multi-year care delivery and payment reform initiative that includes Enhanced Care Management (ECM) and Community Supports
 - Expands the types of services and organizations eligible for Medi-Cal reimbursement
 - Currently authorized by 1115 and 1915(b) waivers through 2026
 - Many states cover similar services through range of mechanisms
- Recent concept memo by the California Department of Health Care Services states intentions to “continue and strengthen” initiatives including ECM and Community Supports in upcoming waiver renewals

Sources: Department of Health Care Services, “Continuing the Transformation of Medi-Cal: Concept Paper,” July 2025, <https://www.dhcs.ca.gov/CalAIM/Documents/Medi-Cal-Transformation-Concept-Paper.pdf>.

Center for Health Care Strategies, "National Context for California's Renewal of CalAIM in 2026," August 2025, <https://www.chcs.org/resource/national-context-for-californias-renewal-of-calaim-in-2026/>.

Braided Funding Approaches and Terminology

- **Braiding:** Combining funds that originate from multiple sources and support a common goal
 - Must carefully track each funding source to meet all requirements
- **Sequencing:** Applying multiple funding sources in a specific sequential order
- **Stacking or Layering:** Strategy of combining multiple funding streams by using additional “layers” of funds that supplement a core funding source



Rationales for Braiding

- ✓ **Serve anyone who walks in the door**, rather than only those who are eligible for services from a specific funding source
- ✓ **Provide more comprehensive services** to support more integrated care
- ✓ **Extend services and coordinate seamless transitions** for clients entering or leaving services
- ✓ **Address budget gaps and support financial sustainability** amid significant changes to federal funding

Profiled Braiding Approaches

- Braiding can take place at two levels:
 - Funding for services delivered to client
 - Funding for client-facing staff
- Table shows primary braiding strategy of each organization featured during today's event

	Single Funding Source per Client	Multiple Funding Sources per Client
Single Funding Source per Client-Facing Staff Member	<i>(Not braiding)</i>	Children's Institute
Multiple Funding Sources per Client-Facing Staff Member	Choice in Aging	RH Community Builders

Choice in Aging: Meeting the Needs of Older Adults and People with Disabilities

Debbie Toth



CHOICE IN AGING

Celebrating Living Independently

Our Mission



"To create opportunities where people can learn, grow, and age independently with dignity in community."

Founded in 1949, Choice in Aging (formerly Rehabilitation Services of Northern California) was established by a compassionate physical therapist seeking better care for children with polio — who, at the time, were being treated on pews in a church basement. As the needs of the community changed and polio declined, we expanded our focus to include rehabilitation for traumatic brain injuries, job training, and other vital services. Over time, we evolved into what is now Choice in Aging.

We are dedicated to being a part of creating a world where ALL people can live and age in their setting of choice with the support they need. Our person-centered health and social services not only provide critical care but also challenge ageism and ableism, empowering individuals and families to feel included, valued, and connected in their communities.

- ✓ Adult Day Health Care
- ✓ Complex Care & Case Management
- ✓ Mental Health Services
- ✓ Transitions Out of Skilled Nursing
- ✓ Caregiver Education & Support
- ✓ Intergenerational Programming
- ✓ Accessible Transportation
- ✓ Policy & Budget Advocacy



Serving Our Community



Who We Serve

- ✓ Frail Elders
- ✓ Adults with Disabilities
- ✓ Adults with Serious Mental Illness
- ✓ Adults with Substance Use Disorder

All are at risk of placement/higher cost care settings/homelessness

Barriers to Care

- ✓ Age
- ✓ Income
- ✓ Language
- ✓ System Navigation
- ✓ Limited Scope
- ✓ Cultural Competency

Why We Braid

- ✓ Funding deficits
- ✓ Eligibility constraints
- ✓ Different levels of need
- ✓ Waitlists and cracks
- ✓ BUREAUCRACY!



How We Braid

Addressing Challenges

- ✓ Cuts at the Federal/Local Levels
- ✓ Different Reporting Requirements
- ✓ Different Tracking Systems
- ✓ Different Staff Tools/Training

Developing Strategies

- ✓ DB Systems, Training, Grants, OhMy!
- ✓ All Hands on Deck!
 - ✓ Direct Service
 - ✓ Grant Writer
 - ✓ Operations
 - ✓ Finance



Our “Why”

- ♥ Everyone deserves to live in their setting of choice with the support they need to live with dignity, purpose, and joy
 - ♥ No waitlists
 - ♥ Supplemental care for those who need it
 - ♥ Triage based on needs
 - ♥ One size does not fit all



RH Community Builders: Supporting People Experiencing Housing Instability

Katie Wilbur

Braiding Funds & Enhancing Services



RH COMMUNITY
BUILDERS

RH Community Builders & CalAIM Services

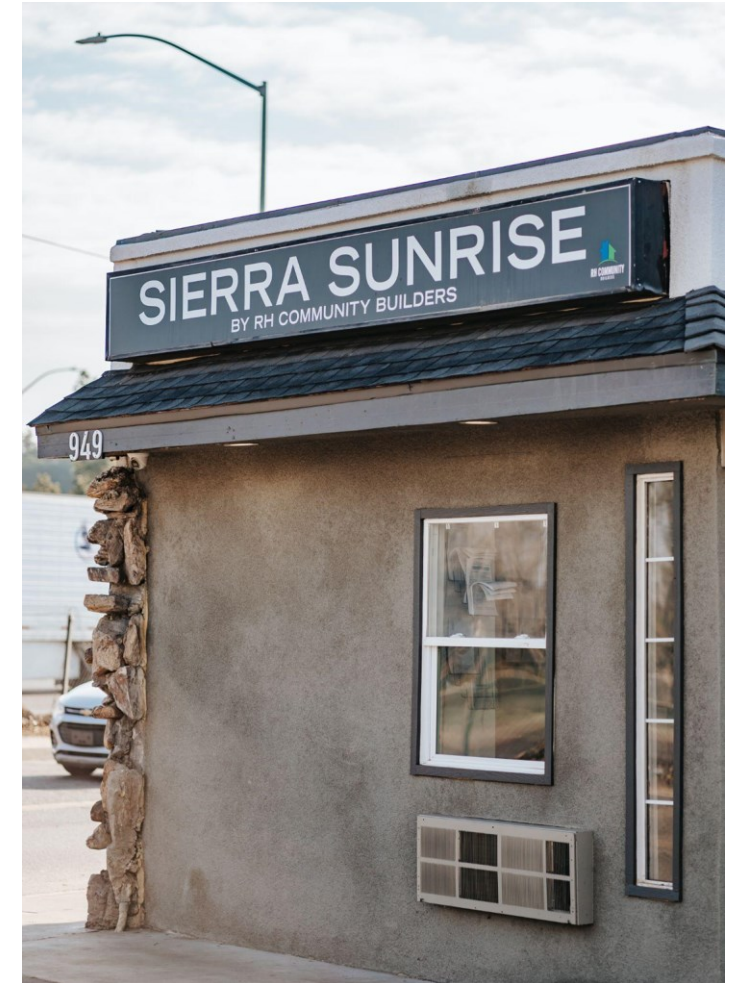
- Community-based organization serving Central Valley established in 2019
 - Fresno County DSS
 - Fresno County DBH
 - City of Fresno
 - Madera County
 - Madera County BHS
 - Managed Care Plans
- Community Supports
 - Housing Navigation
 - Housing Deposits
 - Housing Tenancy Services
 - Post Short Term Hospitalization
 - Recuperative Care
- Enhanced Care Management
 - Experiencing homelessness
 - High risk for avoidable hospital utilization
 - SMI/SUD
 - Transitioning from incarceration
 - Children & Youth involved in Child Welfare

Why We Braid

- Increased opportunities for enhancing services without increasing usage of flexible funds
 - The Flats - nightly rates haven't increased since 2020
- Sustainability of program and organization
- New funding source for match funds
- Fill gaps in the system
 - Behavioral Health Bridge Housing

Historic Braiding of Funds

- Behavioral Health Bridge Housing
 - BHBH Operational Funds
 - Specialty Mental Health
 - CalAIM ECM & Housing Navigation
- Care Teams
 - LCM & Housing Navigator
 - Clinician & Peer Support Specialist



Challenges In Braiding

- Contracting process with CalAIM created new unknowns
 - Contract directly with MCP vs contracted with County/City departments
- Right sizing services & balancing spending
 - Fluxes in billing, but other services are dependant on the full system operating
- Rate structures
 - Different MCPs = different structures
 - Different than County reimbursement contracts
- Documentation streamlining
- Uncertainty of funds

Katie Wilbur

Executive Director

RH Community Builders

katie@rhcbfresno.com



RH COMMUNITY
BUILDERS

Children's Institute: Addressing Behavioral Health Care Needs for Children and Adults

Gene Straub



**children's
institute**

Blending & Braiding in support of ECM/CS

9/18/25

Who We Are

- 120 years old, \$100M, 900+ employees
- Multi-service agency supporting children and families in Los Angeles
 - Specialty Mental Health
 - Community Health (including ECM/CS)
 - Early Childhood Education
- Serving 30,000 youth and families (direct and collateral services)
- ECM/CS directly with Anthem, Blue Shield, HealthNet, Molina, and LA Care, and Kaiser via Full Circle Health.
- Providing care management to most populations of focus via ECM.
- Providing housing services (tenancy, navigation, and deposits) via CS.
- Involved with ECM since the Community-Based Care Management Entity (CBCME) Health Homes pilot.

**North Star: Emotional well-being and educational success
lead to economic mobility and lifelong health**

Why We Braid at CII

- Offers a more comprehensive array of services based on the client's changing needs.
- Offers services to new populations, including family members of existing clients, to enhance a multi-generation approach.
- Provides the necessary staffing and resources to implement services.
- Ensures sustainability during the client acquisition ramp-up period.
- Provides scope and scale to achieve meaningful levels of services and billing.
- Supports the long-term development of disparate service modes and models.
- Diversifies funding, duration, and scope:
 - Staff
 - Technology
 - Marketing
- Partnerships build client acquisition:
 - Primary Care
 - Community Outreach

How Braiding Works at CII

- Staff and expenditures are spread across various funding streams with various durations and scopes.
- Staff have added resources beyond the reach of PMPM-funded resources:
 - Systems
 - Support staff
 - Marketing
 - Consulting
 - Community Engagement
- Multiple funding sources build scope and scale and diversify risk.
- Stacked funding builds a sustainable rate structure.
- Case conferencing ensures richness and non-duplicative services.
- Creates greater security for staff.

Contracting and Managing

- Variety of funders, terms/duration, scopes, and outcomes
- Various forms of data, rates, and client populations
- Multiple platforms (inputs and outputs)
- Required third-party integrations for billing, data manipulation, and reporting.

Challenges

- Variety of funders, terms, scopes, and outcomes
- Lack of clarity about long-term stability (waivers, rates, take-up)
- Costs
 - Systems
 - Integration (HIE, LANES, etc.)
- Provider data and systems; playing by the rules
- Client acquisition processes (MIFF, bottom-up, cold calling)
- Case load requirements
- Changing rates, rate structures, payment models



Moderated Q&A

Additional Resources

- New CHCS brief: *Braiding Medi-Cal Funds to Sustain Aging, Disability, Housing, and Behavioral Health Services*
- 2024 CHCS brief: *Braiding Medicaid Funds to Support Person-Centered Care: Lessons from Medi-Cal*
- Questions? Please contact **Logan Kelly** (lkelly@chcs.org)

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- **Download practical resources** to improve health care for people served by Medicaid.
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