



# *Words to Deeds*

## **From Silos to Solutions:**

Cross System Implementation in California's Behavioral Health & Criminal Justice Reform Initiatives

**September 25 - 26, 2025**  
**Los Angeles, California**

# Early Lessons Learned in CalAIM's Justice-Involved Reentry Initiative Implementation

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# EARLY LESSONS LEARNED IN CALAIM'S JUSTICE- INVOLVED REENTRY INITIATIVE IMPLEMENTATION

Words 2 Deeds

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September 25, 2025

# CALIFORNIA ADVANCING AND INNOVATING MEDI-CAL

THE CENTERS FOR  
MEDICARE & MEDICAID  
SERVICES (CMS) 1115 WAIVER  
WAS APPROVED JANUARY  
26, 2023

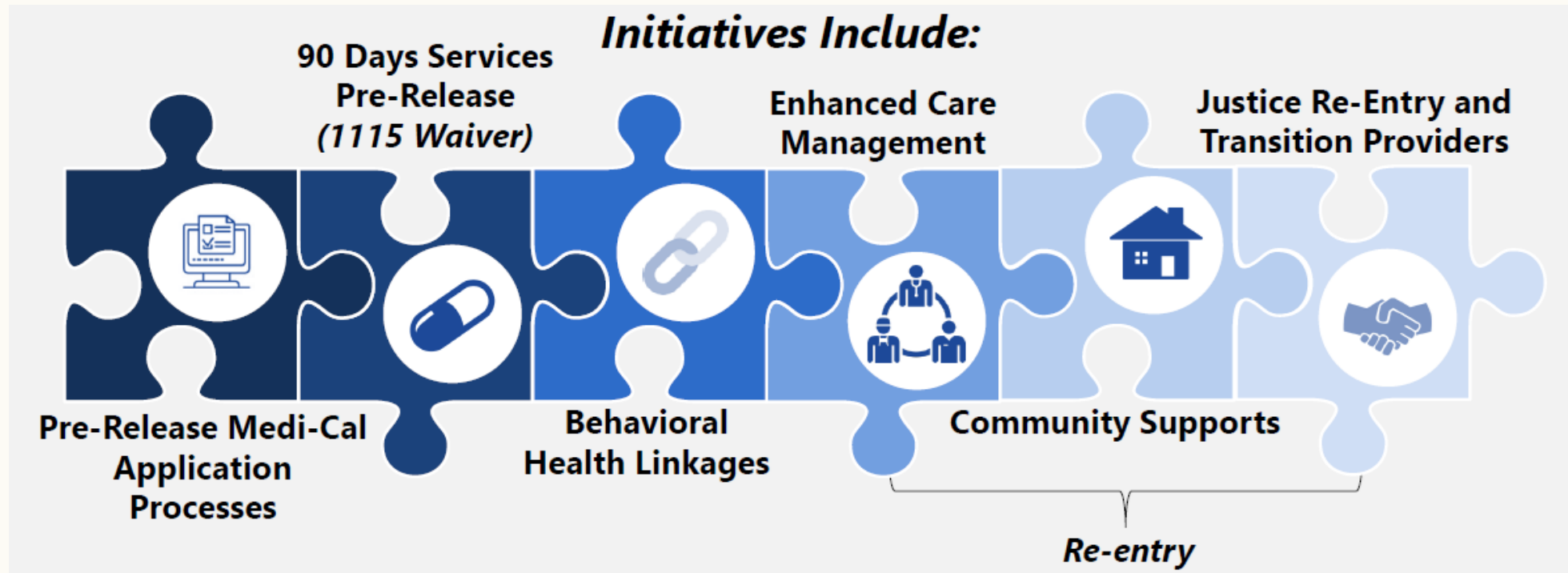
ALLOWS ELIGIBLE  
CALIFORNIANS WHO ARE  
INCARCERATED TO ENROLL  
IN MEDI-CAL AND RECEIVE A  
TARGETED SET OF SERVICES  
IN THE 90 DAYS BEFORE  
THEIR RELEASE.

## NEWS RELEASE



CALIFORNIA SET TO BECOME FIRST STATE IN NATION TO EXPAND  
MEDICAID SERVICES FOR JUSTICE-INVOLVED INDIVIDUALS

# CALIFORNIA ADVANCING AND INNOVATING MEDI-CAL



# CDCR/CCHCS JUSTICE-INVOLVED REENTRY MODELS

## Embedded

Care managers directly employed or contracted by correctional facilities (CFs)

Provide all pre-release care management services

Post-release services provided by a community-based ECM Lead Care Manager (Warm Handoff required)

## Hybrid

Directly employed Care Manager/Coordinator AND community-based ECM Lead Care Manager

Care Manager/Coordinator provide pre-release services and completes the Health Risk Assessment

Community-based ECM Lead Care Manager identify and provide appointments and resources

Post-release services provided by ECM Lead Care Manager (Warm Handoff required)

## In-Reach

Community-based care managers through ECM Lead Care Manager

Provides all pre-release care management services

Post-release services provided by ECM Lead Care Manager (Warm Handoff NOT required)

# CALIFORNIA ADVANCING AND INNOVATING MEDI-CAL

## Medi-Cal Eligible:

- Adults
- Parents
- Youth under 19
- Pregnant or postpartum
- Aged
- Blind
- Disabled
- Current children and youth in foster care
- Former foster care youth up to age 26

## CHIP Eligible:

- Youth under 19
- Pregnant or postpartum



## Criteria for Pre-Release Medi-Cal Services

*Incarcerated individuals must meet the following criteria to receive in-reach services:*

- ✓ Be part of a **Medicaid or CHIP Eligibility Group**, and
- ✓ Meet **one** of the following health care need criteria:
  - Mental Illness
  - Substance Use Disorder (SUD)
  - Chronic Condition/Significant Clinical Condition
  - Intellectual or Developmental Disability (I/DD)
  - Traumatic Brain Injury
  - HIV/AIDS
  - Pregnant or Postpartum

**Note:** *All incarcerated youth are able to receive pre-release services and do not need to demonstrate a health care need.*



# WHAT'S NEW AND HOW WE DO IT

210-160  
days

- Transitional Case Management Program (TCMP) (UC San Diego Benefit Workers) at each institution offer application services to all incarcerated persons

135 days

- Submit Medi-Cal Application (Benefit Workers submit to County)
- [Access Eligibility Determined \(IT System\)](#)
- Medi-Cal Approval Received ([no later than 91 days](#)) (County notifies Benefit Workers)

90-60 days

- [Justice-Involved \(JI\) Aid Code system activated through JI Screening Portal](#)
- [90 Day Pre-Release Services Begins \(Nursing, Mental Health, Dental, Medical\)](#)
- [Health Risk Assessments](#)
- American Society of Addiction Medicine (ASAM) Reentry Interview Script Enhancement (RISE) assessment to determine level of care (Medical LCSWs)

What we currently do for Enhanced Pre-Release and Transition Services does not include the New CalAIM tasks ([new outlined in blue](#)).



# WHAT'S NEW AND HOW WE DO IT

60 days

- Integrated weekly pre-release meetings (DAPO CTP, Nursing, Mental Health, Medical)
- Patient Interview
- **Begin Care Coordination with External Enhanced Care Manager/Managed Care Plan/Behavioral Health (Mental Health, Nursing, UM)**

30-20 days

- **Warm Hand-off with Participant to External Enhanced Care Manager/Managed Care Plan/Behavioral Health.**
- **Reentry Care Plan generated to meet reentry health care and supportive services needs**
- Care Coordination with internal and external partners for continuity of care

7-0 days

- **Release with Reentry Care Plan with ECM Contact**, list of appointments, DME and medications (Nursing)
- Naloxone education (Nursing)

What we currently do for Enhanced Pre-Release and Transition Services does not include the New CalAIM tasks (**new outlined in blue**).

# WHAT'S NEW AND WHO DOES IT

Step	Description	Who
1	CalAIM Medi-Cal Pre-Release Services Aide Code Activated	Automated CCHCS IT Function
2	Conduct Health Risk Assessments	Resource Nurse/Mental Health
3	Assigned to Managed Care Plan (MCP)	Automated DHCS Function
4	Assigned to ECM	MCP
5	Send Health Risk Assessment to ECM	Pre-Release Care Manager
6	ECM works with community supports to generate CalAIM Reentry Care Plan	ECM/Pre-Release Care Manager
7	ECM sends CalAIM re-entry plan to Pre-Release Coordinator	ECM/Pre-Release Care Manager
8	Virtual Warm Hand-Off appointment with ECM/Patient/Pre-Release Care Manager, MH if applicable	Pre-Release Care Manager
9	Discharge with CalAIM Reentry Care Plan	R&R Release Nurse

# CDCR/CCHCS CALAIM IMPLEMENTATION PHASES

**2025**

## **Phase 1 – February 3, 2025 Identification/Eligibility/ Pharmacy Medications Billing**

- Identification and tracking of individuals preparing for release
- Eligibility determination for pre-release services
- System notifications to County SSDs of eligible residents' Release Date
- System notifications to DHCS and County SSDs of the resident's Medi-Cal eligibility and pre-release services
- Pharmacy medication claims submission for reimbursement

**Phase 1 Implemented 2/3/25**

## **Phase 2 – April 1, 2025 Care Management Billing**

- Medical Service Care Management claims submission for reimbursement
- Claim validation
- Claim receipt
- Claim resubmission
- Applicable reporting

**Phase 2 Implemented 4/1/25**

## **Phase 3 – July 21, 2025 Clinical Services Billing**

- Medical Service applicable service billing submission for reimbursement
  - Laboratory Services
  - Radiology Services
  - Medications – Non-Patient Specific Medications
  - Medication Administration
  - Medication Assisted Treatment (MAT) – Medications
  - Medication Assisted Treatment (MAT) – Psychosocial services
  - Durable Medical Equipment (DME)

**Phase 3 Implemented 7/21/25**

# REENTRY CARE PLAN



Develop a Reentry Care Plan with the patient and a consulting clinician



Provide the Reentry Care Plan to the patient



Confirm all connections and appointments



Complete a data exchange



Confirm the patient has medications/prescriptions in hand upon release



Confirm the patient has needed DME in hand upon release

# MEETING THE WARM HANDOFF REQUIREMENTS



Participation in a face-to-face or telehealth meeting



Review and update Health Risk Assessment and Reentry Care Plan with the patient



Provide education on Reentry Care Plan and reentry services



Modify Reentry Care Plan based on new information and discussion during the Warm Handoff

# EARLY LESSONS LEARNED



**COLLABORATION**



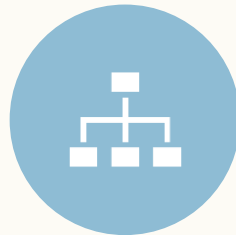
**EDUCATION**



**COMMUNICATION**



**SUPPORT FROM  
HIGHEST LEVEL**



**PATH FUNDING**



**POLICY  
DECISIONS**



**DATA SHARING**





If you have any additional questions, please contact: [Janene.DelMundo@cdcr.ca.gov](mailto:Janene.DelMundo@cdcr.ca.gov)





# Early Lessons Learned in CalAIM's Justice-Involved Re-entry Initiative Implementation

# Collective Objectives



- **Design** of promising practices for jail in-reach services in rural settings
- **Understanding** of client interests, motivations and needs
- **Identification** of system roles in ensuring individuals receive high quality pre-release services
- **Real Time Problem-Solving** of barriers to collective impact, multi-system, multi-sector collaboration
- **Strategies** for maximizing Medi-Cal billing

# Unique Regional Collaboration



## Structures of Regional Collaboration

- **Bi – County** Mental Health Plan (MHP) serving **Sutter and Yuba Counties** lead by Sutter County
- **Bi – County** Public Health Officer Position **within** Yuba County serving **Sutter and Yuba Counties**
- **Tri – County** Juvenile Hall **lead** by Yuba County Probation serving **Sutter, Yuba and Colusa Counties**

## Ingredients of Regional Collaboration

- The region sees itself as one geographic area
- Permission to collaborate given by electeds and county leadership
- Be allowed to care about issues beyond your organizational responsibilities
- Seek to understand systemic failure points
- Do no harm approach
- Care about and contribute philosophy – relationship based

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# Regional Collaboration



## Examples

### Regional Health Care Network Development

- Why it works
- What it needs

### CalAIM Justice Involved (JI) Initiative:

Regional Courts + District Attorney + Public Defender + Law Enforcement (Patrol and Jail) + Probation + Health and Human Services (including Behavioral Health, Medi-Cal Eligibility, and Public Health) + Medi-Cal Managed Care

# CalAIM JI In Action



Art by Justice-Involved  
Individual

04/01/2025-08/31/2025	Total
Total Participants (Active + Released)	703
Releases of Information Signed	369
Participants with Behavioral Health Issue Identified during MDT	186 71 (SMI) 115 (Mild/Moderate)
Health Risk Assessments Completed (Ampla - FQHC)	180
Reentry Plans Completed	94
Participants identified as housing insecure during MDT	145
Stimulant Use Disorder	138
Opioid Use Disorder	79
Alcohol Use Disorder	93
Cannabis Use Disorder	46
Traumatic Brain Injuries	70
Medi-Cal Screenings Completed	915
Probation Connected Individuals	112

# Sutter County Strengths



## Law Enforcement Collaboration

Building mutual trust and authentic relationships



CELEBRATE  
**NATIONAL NURSES WEEK**

MAY 6 - 12





# Sutter County Strengths



## Law Enforcement Collaboration

Building mutual trust and authentic relationships





# Sutter County Strengths



## Embedding selective staff in the jail

### **CalAIM JI Program Manager**

Provides program oversight

### **Public Assistance Specialist for Medi-Cal Eligibility**

- Screens for current Medi-Cal enrollment
- Assists with Medi-Cal applications

### **County Behavioral Health Resource Specialist**

- Completes linkage to County behavioral health for those with severe needs

# Sutter County Strengths



## Multidisciplinary Team Meetings

- Cross-systems coordinated care
- Held Monday through Thursday every week
  - Jail staff, County behavioral health, probation (social work minded), In-Reach provider, jail medical provider staff, CalAIM JI program manager



# Sutter County Strengths



## **Person-centered care model**

- Active participation of JI individual in their care and reentry planning
- Focusing on the unique needs of the individual
- Holistic approach that considers the whole person

**Continuum of care from pre-release to post-release & beyond**

**Multiple engagements with the JI individual to build rapport**

# Maximizing Medi-Cal Billing



- **Pre-release medical and behavioral health services are billed through Medi-Cal Fee-For-Service (FFS) through Correctional Facility NPI**
- **Behavioral Health Linkages are billed through Short-Doyle via FFS (non IGT)**
- **Patient specific prescriptions are billed through Medi-Cal Rx**
  - Stock medications through CA-MMIS
  - Transitioning away from stock medication to patient-specific medications

# Challenges



## **Unplanned releases in local county setting**

Short-term stay model utilized for majority of participants

## **Co-occurring Traumatic Brain Injuries**

- Seventy participants have been identified with Traumatic Brain Injury (TBI), being referred to specialized supports for TBI's, which prior to this collaborative, were underutilized (California Department of Rehabilitation).
- Sutter County is hoping to utilize PATH JI Round 4 to address this TBI unmet need

## **Stigma and SUD Residential Policy Issues with Medication Assisted Treatment (MAT)**

# Peer-to-Peer Guidance



## Reentry Planning starts at booking

- Custody staff asks all incarcerated individuals if they want Medi-Cal (MC)
- Embedded Public Assistance Specialist screens for MC and assists with applications
- Release of Information signed that covers all participating entities
- Participant discussed in Multidisciplinary Meeting
- In-Reach provider and Resource Specialist (when needed) engage participant
- Reentry care plan developed and shared with participant prior to release





# Q & A



# Contact Information



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*2025 Convening - Los Angeles, CA*