
Children and Youth Behavioral Health Initiative Overview of Workstreams

California Association of Health Plans – May 18, 2022



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Overview of Children and Youth Behavioral Health Initiative Workstreams

As of April 6, 2022

Children and Youth Behavioral Health Initiative (CYBHI) Leadership

DHCS		HCAI	DHCS / DMHC	CDPH	OSG	MHSOAC
BH Services Virtual Services Platform	Student Behavioral Health Incentive Program (SBHIP)	BH Coach Workforce	Statewide All-Payer Fee Schedule for School-Linked BH Services	Public Education and Change Campaign	ACEs Awareness Campaign	Mental Health Student Services Act (MHSSA) Partnership Grant Program*
CBO Network	School-Linked Partnership and Capacity Grants		Broad BH Workforce Capacity			
Pediatric, Primary Care and Other Health Care Providers	CalHOPE Student Services					
E-Consult	BH Continuum Infrastructure Program (Initiative Only)					
Enhanced Medi-Cal Benefits – Dyadic Services	Evidence-Based and Community-Defined Practices					

* MHSOAC will provide workstream updates for this program

Source: California Health and Human Services Agency, DHCS, DMHC, HCAI, CDPH, OSG



DHCS: Behavioral Health Virtual Services Platform

As of April 6, 2022

Workstream description

- DHCS will procure a business services vendor to launch a Behavioral Health Virtual Services Platform for all children, youth and families in California regardless of payer
- The platform will support delivery of equitable, appropriate, and timely behavioral health services and supports from prevention to treatment to recovery
- The platform will also offer E-Consult functionality for pediatric and primary care providers to consult with BH providers
- Seeks to drive adoption of the platform by diverse children, youth and families statewide



Funding, dollars in thousands^{1,2}

CY 21-22		BY 22-23		BY 23-24		BY 24-25		BY 25-26		Total Funding (over 5 years)	
General Fund	Federal Fund	General Fund	Federal Fund	General Fund	Federal Fund	General Fund	Federal Fund	General Fund	Federal Fund	General Fund	Federal Fund
10,000	-	120,000	-	109,900	27,000	128,900	32,000	163,900	41,000	532,700	100,000

Detail: Example platform capabilities

- Interactive educational resources, tools, and games
- Behavioral health screenings
- Short-term counseling / Peer and coaching supports
- Access to BH peer, coaches, and licensed providers
- Built-in CBO network
- Referrals / Warm hand-offs
- E-consult

Ongoing activities

- Engaging experts and stakeholders to identify and operationalize the features of the platform
- Conducting landscape analysis and market scan to identify potential capabilities, understand interdependencies (e.g., data sharing), and determine opportunities (e.g., CalHOPE) for collaboration, as well as lessons learned

Milestones



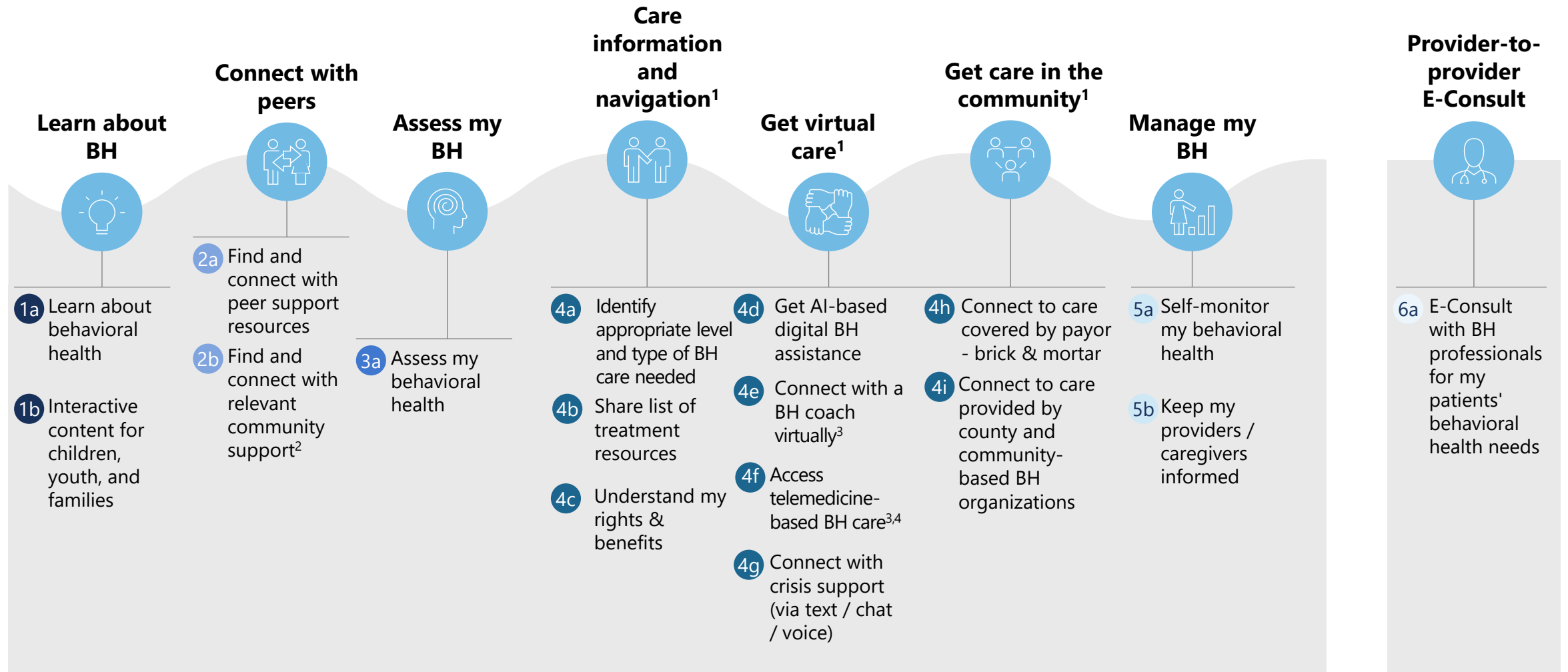
2024

January – Platform launch

1. Per the 2021 Budget Act, 2021-22 resources are available for encumbrance or expenditure until June 30, 2024; 2. The 2022 Governor's Budget proposes 2022-23 resources be available for encumbrance or expenditure until June 30, 2025

BH Virtual Services and E-Consult Platform – potential capabilities

Platform capabilities for consideration



1. Part of 'Find and get BH care' capability

2. Community organizations based on my identity / affiliation

3. May include scheduling care

4. Connect with therapist, psychologist, or psychiatrist virtually

Source: Capabilities based on DHCS and OSP leadership discussion from Jan-Apr 2022 and discussions with behavioral health experts

Capabilities to consider for BH Virtual Services and E-Consult Platform (1/3)

Capability group	Capabilities	Description
1 Learn about BH	1a Learn about behavioral health	Educational content (e.g., testimonials, videos, podcasts, informational documents) on behavioral health and related topics (e.g., sexual orientation, mental health, gender identity, suicide, anxiety, depression, bullying, relationships, emotions, eating disorders, substance use, food, housing, or job insecurity) for children, youth, families, caregivers, educators, or providers
2 Assess my BH	1b Interactive content for children, youth, and families	Educational content on behavioral health topics (e.g., signs of a panic attack) communicated through interactive content (e.g., video games, AI-based quizzes and chats)
3 Connect with peers		
4.1 Care information and navigation	2a Assess my behavioral health	Screeener to assess behavioral health status via self assessment (e.g., user survey tailored by age group); potential to augment assessment via data outside of self-assessment (e.g., claims data, location of children / youth in low HPI quartile regions)
4.2 Get virtual care	3a Find and connect with peer resources	Tool to search and connect with relevant peer resources
4.3 Get care in the community	3b Find and connect with relevant community support	Tool to search and connect with in-person or virtual community organizations based on my identity / affiliation (e.g., interest / affinity groups, afterschool programs)
5 Manage my BH	4a Identify appropriate level and type of BH care needed	Tool to identify potential levels (e.g., low acuity) and appropriate type of care needed based on patient needs (e.g., peer group, BH coach, psychiatrist)
6 Provider-to-provider E-Consult	4b Share list of treatment resources	

Capabilities to consider for BH Virtual Services and E-Consult Platform (2/3)

Capability group	Capabilities	Description
1 Learn about BH	4c Understand my rights & benefits	Tool to understand patient rights and health insurance coverage (or lack thereof) for relevant services and direct to appropriate contacts for further questions about coverage
2 Assess my BH	4d Get AI-based digital BH assistance	AI-based tool to provide automated cognitive behavioral therapy (iCBT) and point to appropriate resources
3 Connect with peers	4e Connect with a BH coach / peer virtually	Tool to connect live with behavioral health coach / peer and manage billing for services
4.1 Care information and navigation	4f Access telemedicine-based BH care	Tool to connect children, youth and their families (e.g., website referral) with psychologist / therapist for virtual clinical services and manage billing for services
4.2 Get virtual care	4g Connect with crisis support (via text / chat / voice)	Tool to refer out to a service or website providing crisis support services (e.g., hotline, drop-in centers)
4.3 Get care in the community		
5 Manage my BH		
6 Provider-to-provider E-Consult		

Capabilities to consider for BH Virtual Services and E-Consult Platform (3/3)

Capability group	Capabilities	Description
1 Learn about BH	4h Connect to care covered by payor	Tool to identify potential providers tailored to the specific patient need (e.g., BH condition, location preferences, virtual / in-person needs) based on coverage (e.g., providers that are accepting new patients and work with user plans, commercial plans, county behavioral health services, managed care organizations)
2 Assess my BH		
3 Connect with peers	4i Connect to care provided by county and community-based BH organizations	Tool to identify and provide warm hand-offs to county behavioral health services, community mental health centers or school-based health centers based on the specific patient need (e.g., BH condition, geography)
4.1 Care information and navigation		
4.2 Get virtual care	5a Self-monitor my behavioral health	Tool to enable children / youth to monitor their behavioral health on a regular basis (e.g., manual entry, ingestion / integration with external data such as sleep monitors)
4.3 Get care in the community	5b Keep my providers / caregivers informed of my behavioral health	Tool to provide caregivers (e.g., parents) and providers information of behavioral health status and actions taken
5 Manage my BH	6a E-Consult with BH professionals for my patients' behavioral health needs	Tool for pediatric and family practice providers to consult with BH professionals virtually to manage behavioral health conditions of their patients (i.e., children and youth) and provide ongoing practice-focused training and education
6 Provider-to-provider E-Consult		

DHCS: Scaling Evidence-Based and Community-Defined Practices

As of April 6, 2022

Workstream description

- With input from stakeholders, DHCS will select a limited number of evidence-based practices (EBPs) and/or community-defined promising practices (CDPPs) to scale throughout the state based on robust evidence for effectiveness, impact on racial equity, and sustainability
- Grants will be administered through a third-party grant administrator and grantees required to share standardized data in a statewide BH dashboard



Funding, dollars in thousands^{1,2}

CY 21-22		BY 22-23		BY 23-24		BY 24-25		BY 25-26		Total Funding (over 5 years)	
General Fund	Federal Fund	General Fund	Federal Fund	General Fund	Federal Fund	General Fund	Federal Fund	General Fund	Federal Fund	General Fund	Federal Fund
-	-	429,000	-	-	-	-	-	-	-	429,000	-

Ongoing activities

- Engaging experts and stakeholders to solicit input on the selection of EBPs and CDPPs for scaling and synthesize evidence of impact to inform prioritization of practices for scaling
- Developing a project plan for the launch of grant applications and disbursement of funds in 2022-23

Milestones



- 2022**
September-December – Release grant funding opportunity and open application period

1. The 2022 Governor's Budget proposes 2022-23 resources be available for encumbrance or expenditure until June 30, 2025; 2. Of the \$429 million in 2022-23, \$42.9 million is to support the Mental Health Services Oversight and Accountability Commission

Work Stream Goals

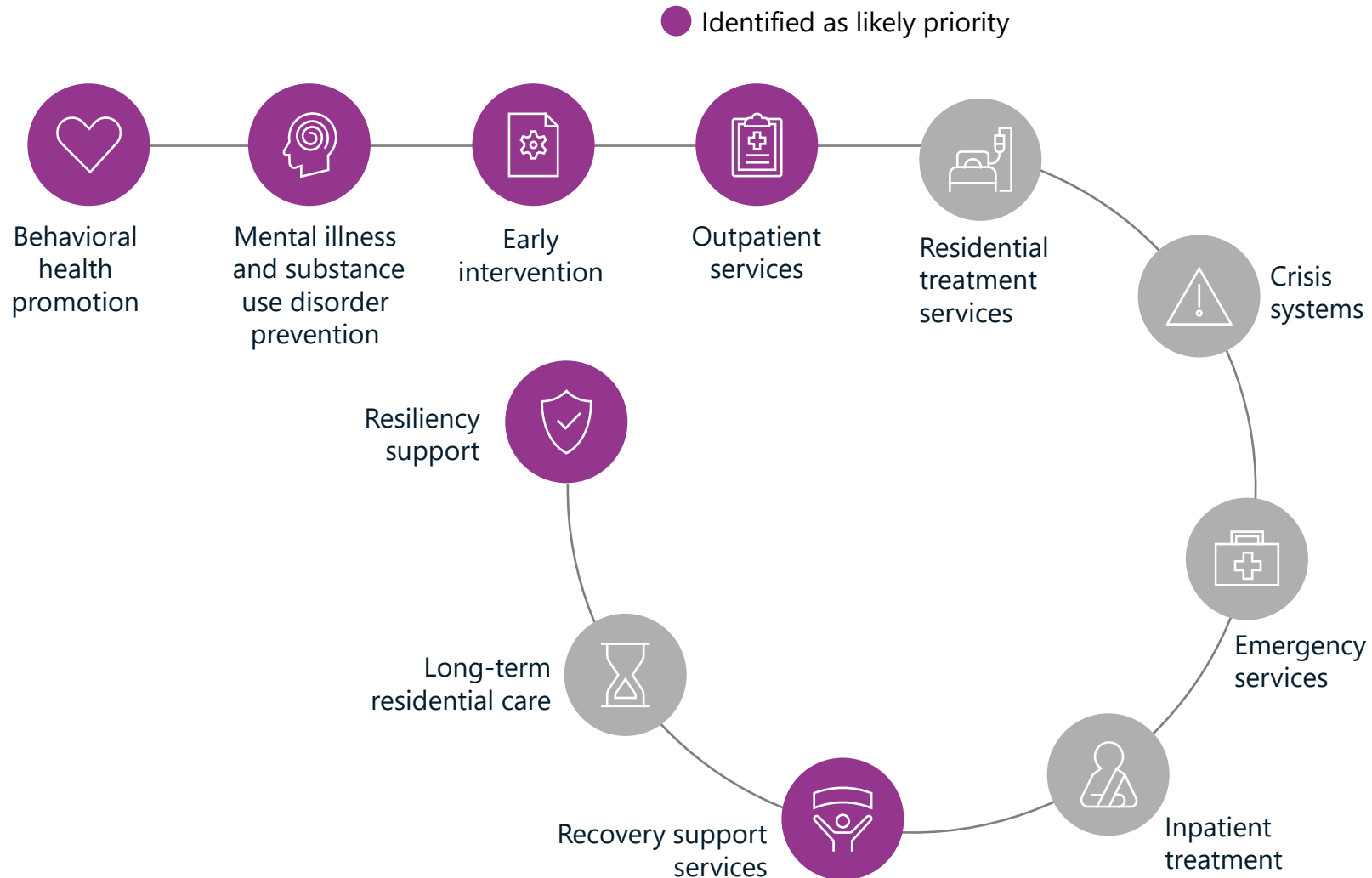


The goal for the EBI & CDP workstream is to select an **appropriate set of practices to scale with the allocated funding by the end of the year**

The aim is to be **solution-oriented** and **aligned with our guiding principles** as we select practices that are **within our span of control** and **can influence as a workstream – practices that:**

- Have meaningful impact on outcomes for children and youth
- Have demonstrated impact within the communities we want to reach, or can be adapted to do so
- Are scalable
- Are appropriate to scale
- Can be implemented with fidelity (e.g., support for codification, tech support)
- Are sustainable

The Behavioral Health Continuum of Care



Potential prioritization is focused on upstream promotion, recovery, and resilience to

- Address behavioral health *before* children and youth have high needs
- Complement other efforts already under way
- Enable efforts that are feasible for DHCS to sustain and scale

DHCS: Student Behavioral Health Incentive Program (SBHIP)

As of April 6, 2022

Workstream description

- Seeks to make incentive payments to qualifying Medi-Cal managed care plans that meet predefined goals and metrics associated with targeted interventions that increase access to preventive, early intervention, and BH services by school-affiliated BH providers for K-12 children in schools
- DHCS will develop interventions, goals, and metrics to determine eligibility to receive incentive payments in consultation with the State Department of Education (CDE), Medi-Cal managed care plans, county BH Departments, local education agencies, and other affected stakeholders



Funding, dollars in thousands¹

CY 21-22		BY 22-23		BY 23-24		BY 24-25		BY 25-26		Total Funding (over 5 years)	
General Fund	Federal Fund	General Fund	Federal Fund	General Fund	Federal Fund	General Fund	Federal Fund	General Fund	Federal Fund	General Fund	Federal Fund
32,416	32,416	64,831	64,831	97,246 ²	97,246 ²			-	-	194,493	194,493

Ongoing activities

- Stakeholder engagement and education through technical assistance
- MCP assessment / gap analysis with technical assistance to support engagement between Local Education Agencies (LEAs), counties, and MCPs
- MCPs design and implement interventions in coordination with counties and LEAs
- MCPs receive payments bi-annually based on metrics achieved

Milestones



2022

January – Program implementation

October 2022-December 2024

Implementation of interventions and incentive payments released

1. Per the 2021 Budget Act, 2021-22 resources are available for encumbrance or expenditure until June 30, 2024

2 Based on guidance from Department of Finance, amount initially budgeted in FY2024-25 is reflected under FY2023-24

DHCS: CalHOPE Student Services

As of April 6, 2022

Workstream description

- Seeks to support communities of practice in all 58 County Offices of Education to enhance Social Emotional Learning Environments by identifying and sharing best practices to support youth in transitioning between distance and in-person classes



Funding, dollars in thousands¹

CY 21-22		BY 22-23		BY 23-24		BY 24-25		BY 25-26		Total Funding (over 5 years)	
General Fund	Federal Fund	General Fund	Federal Fund	General Fund	Federal Fund	General Fund	Federal Fund	General Fund	Federal Fund	General Fund	Federal Fund
11,000	-	17,000	-	17,000	-	-	-	-	-	45,000	-

Ongoing activities

- Working to put contract in place to support this work

Milestones



2022

January-June – Contracts in place with Sacramento COEs and youth partner organization; Promotion of video / co-curricular tools for schools

July 2022-June 2024

CalHOPE Student support in full motion

1. Per the 2021 Budget Act, 2021-22 resources are available for encumbrance or expenditure until June 30, 2024

DHCS: School-Linked Partnership and Capacity Grants

As of April 6, 2022

Workstream description

- Seeks to provide direct grants to support new services to individuals 25 years of age and younger from schools, providers in school, school-affiliated CBOs, or school-based health centers
- Will support statewide school-linked fee schedule and BH network of providers



Funding, dollars in thousands^{1,2,3}

CY 21-22		BY 22-23		BY 23-24		BY 24-25		BY 25-26		Total Funding (over 5 years)	
General Fund	Federal Fund	General Fund	Federal Fund	General Fund	Federal Fund	General Fund	Federal Fund	General Fund	Federal Fund	General Fund	Federal Fund
100,000	-	450,000	-	-	-	-	-	-	-	550,000	-

Detail: Funding examples

- Administrative costs
- Linking plans, counties & school districts with local social services & CBOs
- Incentives for hiring BH school workforce
- Implementing telehealth & virtual systems
- Implementing IT investments to connect plans to BH services
- Flexible funding to address student needs identified by teachers, staff, students, & families

Ongoing activities

- Engaging experts and stakeholders to identify to solicit input on capacity gaps and needs
- Developing a project plan for the launch of grant applications and disbursement of funds in 2022-23
- Conducting landscape analysis of existing, related State efforts (e.g., school-based health incentives programs)

Milestones



2022

September-December – Release grant funding opportunity and open application period

1. Per the 2021 Budget Act, 2021-22 resources are available for encumbrance or expenditure until June 30, 2024; 2. The 2022 Governor's Budget proposes 2022-23 resources be available for encumbrance or expenditure until June 30, 2025; 3. Of the \$100 million in 2021-22, \$70 million is available for grants focused on individuals in preschool through secondary educational institutions and \$30 million is available for grants focused on individuals in institutions of higher education. The 2022 Governor's Budget proposes that of the \$450 million in 2022-23, \$330 million be for grants focused on individuals in preschool through secondary educational institutions and \$120 million be available for grants focused on individuals in institutions of higher education

DMHC / DHCS: Statewide All-Payer Fee Schedule for School-Linked BH Services

As of April 6, 2022

Workstream description

- DHCS, in collaboration with DMHC, seeks to develop and maintain a school-linked statewide fee schedule for outpatient mental health and substance use disorder services provided for a student (25 years or younger) at or near a school-site
- Build a statewide school-linked provider network of (at or near) school-site BH counselors



Funding, dollars in thousands

CY 21-22		BY 22-23		BY 23-24		BY 24-25		BY 25-26		Total Funding (over 5 years)	
General Fund	Federal Fund	General Fund	Federal Fund	General Fund	Federal Fund	General Fund	Federal Fund	General Fund	Federal Fund	General Fund	Federal Fund
-	-	-	-	-	-	-	-	-	-	-	-

Ongoing activities

- Convene meetings to gather initial inputs from Medi-Cal managed care plans, commercial plans, county behavioral health departments, and other stakeholders
- Develop a comprehensive list of questions and areas of concerns for plans to be addressed in guidance from DHCS, DMHC and CDI
- Determine scope of services to be provided at schools and reimbursement amounts in the statewide fee schedule

Milestones



2023

Issue initial guidance and publish fee schedule

2024

Implement BH network and fee structure
Begin enforcement of guidance for commercial plans

1. The Medi-Cal delivery system, including Medi-Cal managed care plans and county BH plans, and commercial health plans are required to reimburse providers for a predefined set of medically necessary outpatient MH and SUD services provided to a student (25 years of age or younger) at or near a school-site; 2. Stakeholders may include commercial plans, the California Association of Health Plans (CAHP), the Association of California Life and Health Insurance Companies (ACLHC). The California Department of Insurance (CDI) will also be involved as they have mirrored requirements in law.

Listening Tours Objective and Participants



Timeline

April 21 – May 31



Description

Collect insights from stakeholders on current state needs, gaps, and priorities



Goals

Understand what various stakeholder partners have implemented to date regarding school-linked behavioral health services

Discuss potential opportunities where grant funding, reimbursement changes, or workforce capacity augmentation and expansion could enable stakeholder partners to increase or enhance the behavioral health service they provide in or near school settings

Stakeholder Groups Involved in DHCS Listening Tours

- Early education organizations/ childcare agencies
- K-12 Local Education Agency (LEAs)
- Higher education institutions
- Community Based Organizations (CBOs) and providers
- Afterschool programs
- School-based mental health workforce and education organizations
- **Commercial plans, Medi-Cal, counties**
- Tribal communities

Listening Tour Schedule

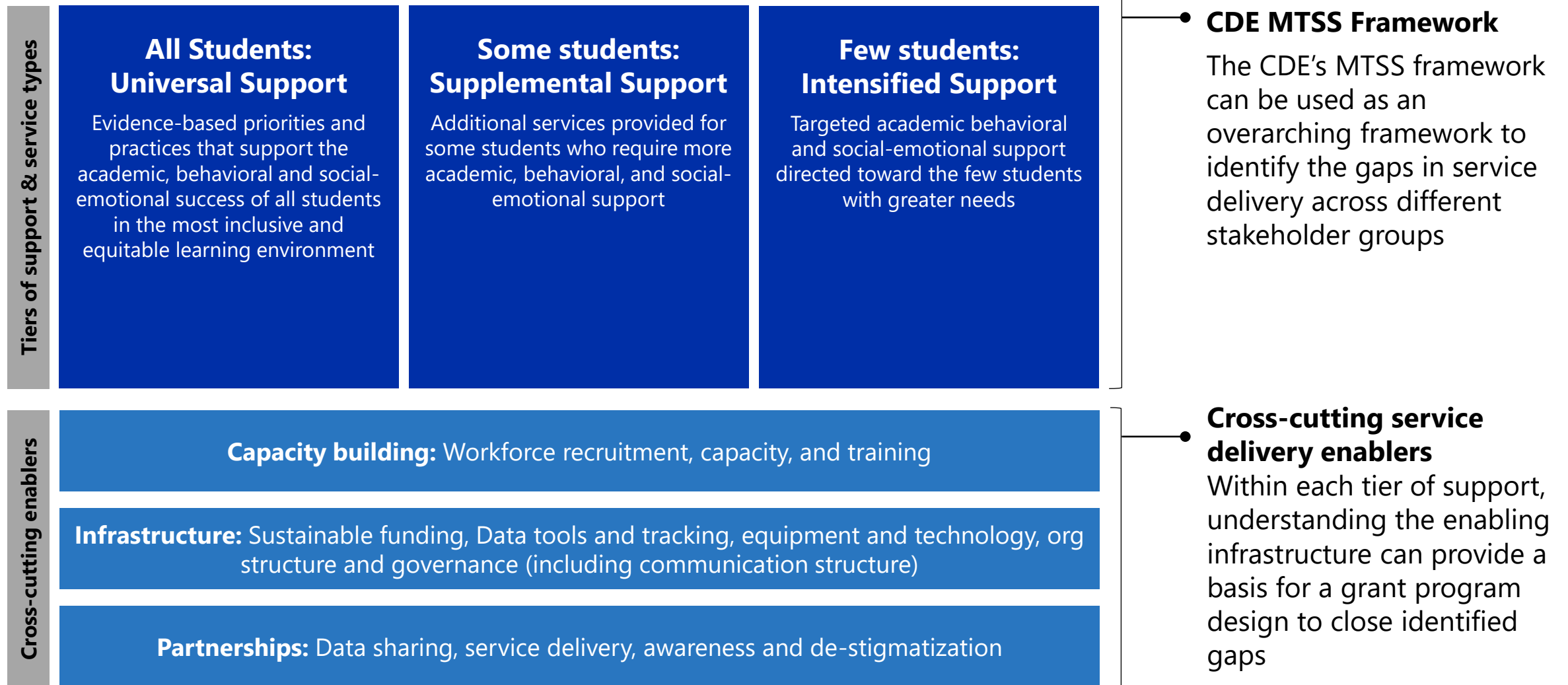
	Stakeholder Group	Date	Time (PT)
①	K-12: Session 1	4/21	4 – 7p
②	K-12: Session 2	5/3	4 – 5:30p
③	Higher Ed: Community Colleges	5/5	10 – 11:30a
④	Higher Ed: Universities	5/9	10 – 11:30a
⑤	Commercial Plans & Medi-Cal MCPs	TBD	10 – 11:30a
⑥	County BH Departments	TBD	10 – 11:30a
⑦	Additional listening tours¹	5/26	10 – 11:30a
⑧	Additional listening tours¹	5/31	4 – 5:30p
⑨	Additional listening tours¹	6/7	4 – 5:30p

1. Open to providers and CBOs, K-12 personnel, school-based education workforce, and afterschool programs



Multi-Tiered System of Support Framework

PRELIMINARY AS OF 4/21/2022



Questions?

DHCS CYBHI Contact
Information

Autumn Boylan

Autumn.Boylan@dhcs.ca.gov

DHCS Contact Information for Questions/Feedback:

CYBHI@dhcs.ca.gov

DHCS Children & Youth Behavioral Health Initiative

[Webpage](#)

DHCS Student Behavioral Health Incentive Program

(SBHIP) [Webpage](#)

CYBHI: DMHC Overview



Amanda Levy, Deputy Director, Health Policy and Stakeholder Relations

20 YEARS



DMHC Mission Statement

The California Department of Managed Health Care protects consumers' health care rights and ensures a stable health care delivery system.

CYBHI Language

- The CYBHI requires commercial health plans to reimburse for certain behavioral health services for individuals 25 years of age or younger provided or arranged by local educational agencies and public institutions of higher education.
- These services will be provided without the utilization management.
- The services will not be subject to copayment, coinsurance, deductible, or any other form of cost sharing.

CYBHI Language

Definitions:

- School site
- Local educational agency (LEA)
- Institution of higher education
- Mental health and substance use disorder (MH/SUD)
- Medically necessary treatment of a MH/SUD
- Health Care Provider

DMHC Guidance

The Department of Managed Health Care (DMHC) will issue guidance via an All Plan Letter by **December 31, 2023** to address commercial plan coverage of school-linked Behavioral Health services.

Stakeholder Engagement

Issues to be discussed:

- Fee Schedule/Scope of Services
- Provider Issues
- Billing Issues
- Timeline/Implementation
- HCAI-Workforce Issues

Stakeholder Engagement

- Current Stakeholder Meetings
 - Quarterly Plan Roundtable
 - Regular Check-ins with CAHP
- Future Stakeholder Meetings
 - Series of meetings to discuss CYBHI policies and implementation

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Questions?

Contact information

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