BH-CONNECT

The California Behavioral Health Community-Based Organized Networks of Equitable Care and Treatment

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HEALTH AND HUMAN SERVICES AGENCY

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What is BH-CONNECT?

A transformative initiative to improve Behavioral Health services for Medi-Cal members

Three Key Authorities:

- 1115 Demonstration
- State Plan Amendment (SPA)
- Existing Medicaid Authorities

Goals of BH-CONNECT Demonstration

Required by CMS

- Reduce utilization and lengths of stay in EDs among Medi-Cal members with SMI and SED
- Reduce preventable readmission to acute care hospitals and residential settings
- Improved availability of crisis stabilization services (e.g., mobile crisis intensive outpatient)
- Improved access to community-based services
- Improved care coordination following episodes acute care

California-specific

- Expand community-based services and availability evidenced-based practices
- Improved outcomes for Medi-Cal members, including child welfare involved, justice-involved, and experiencing or at risk for homelessness
- Improved availability of TA and incentives to support implementation of high-quality services
- Expand behavioral health workforce

Goals of BH-CONNECT Demonstration, cont.

San Diego – Specific:

- Expand community-based services in alignment with Optimal Care Pathways (OCP) vision
- Improved outcomes supporting our work as a Health Plan
- Supports Behavioral Health Services Act (BHSA/Prop 1) efforts to advance system integration
- Expand behavioral health workforce and support Network Adequacy

Eligibility and Populations of Focus

Individuals with significant mental health and substance use disorders

- Including individuals with justice-involvement
- Youth in or at risk of child welfare involvement
- Individuals and families experiencing or at risk of homelessness

Key Features

Workforce Support	**Support for Children and Youth**	**Transitional Rent Assistance**	**Performance-based Incentives**
Community Transition Services	**Short-term Inpatient Psychiatric Care**	**New Evidence-Based Services**	**Clarified Existing Evidence-Based Services**

New Medi-Cal EBP Coverage

Assertive Community Treatment (ACT)

- Comprehensive, community-based, interdisciplinary team-based service model to help individuals with serious mental illness cope with the symptoms of their mental health condition and develop or restore skills to function in the community.

Forensic ACT (FACT)

- Tailored for individuals who are involved with the justice system.

Coordinated Specialty Care (CSC) for First Episode Psychosis (FEP)

- A comprehensive, community-based, interdisciplinary team-based service model to help individuals cope with the symptoms of early psychosis and remain integrated in the community.

New Medi-Cal EBP Coverage, cont.

Individual Placement and Support (IPS) Model of Supported Employment

- Community and team-based services that help individuals with behavioral health conditions to lead functional and productive lives in the community, including acquiring and/or maintaining competitive employment.

Clubhouse Services

- Services offered within rehabilitative programs that provide a physical location for people living with significant behavioral health needs to build relationships, engage in work and education activities, and receive supportive services. Utilizes Clubhouse International Standards for fidelity and Work-ordered day.

Community Health Worker Services

- Preventive services delivered through the specialty behavioral health delivery systems by trusted community members provide health education, advocacy, and navigation services to support members with accessing need health care and community resources to address social drivers of health.

Access, Reform, and Outcome Incentives

- **Statewide Proposed Measures**
  - Improve access to behavioral health services:
    - Improve penetration & engagement in services and improve performance on timely access standards
  - Improve health outcomes and quality of life
  - Targeted behavioral health system reforms
    - Reduce infrastructure gaps identified in NCQA assessment completed by Plans in Sept 2024
    - Improve data sharing

- **EBP Proposed Measures**
  - Improved outcomes and quality of life among members receiving BH-CONNECT EBPs

County Participation Requirements

- **To date, DHCS has published a draft Information Notice and Evidence Based Practices Policy Guide for public comment.**
  - To opt in, BHPs are required to submit a letter to DHCS stating which EPS's they intent to cover and the dates that coverage will take effect
    - Letters to be submitted at least 30 days prior to the proposed commencement of services.

- **BHPs that intend to draw down Federal Financial Participation for care provided during short-term stays in Institutions for Mental Diseases (IMDs) must cover the full array of BH-CONNECT EBPs on a timeline specified by DHCS.**
  - Additional information about the IMD option and associated requirements will be in forthcoming guidance.

Demonstration Timeline

Demonstration Year 0
MCP Foster Care Liaison
Effective January 2024

January 2025

Demonstration Year 1
- Workforce Initiative
- COEs
- Access, Reform, and Outcomes Incentive Program
- Clarification of EBPs for youth
- Activity stipends
- Initial child welfare/SMH assessment

Demonstration Year 2
- Cross-sector incentive program
- Evidence-based tools to ensure appropriate level of care/services

Rolling Basis
- County option to opt-in to any new community-based services
- County option to opt-in to full demonstration, receiving FFP for short-term stays in IMDs

Phased-In Approach for Opt-In Counties

January 2025
Demonstration goes live

Upon IMD Opt-In County Go-Live *(rolling basis)*
- Participate in the incentive program Meet accountability requirements
- Begin providing Peer services with justice involved specialization and CHW services
- Begin TA for ACT/FACT through COEs, completing preliminary fidelity assessment

Demonstration Year 2
- Cross-sector incentive program
- Evidence-based tools to ensure appropriate level of care/services

Within 2 Years of Go-Live
Begin providing FACT and CSC for FEP

Within 3 Years of Go-Live
Begin providing IPS Supported Employment

Call to Action

- BH-CONNECT objectives include reducing reliance on facility-based care and strengthening community support and establishing a robust continuum of care for members living with significant behavioral health needs.
- BH-CONNECT expands entitlements, access, and quality standards and has significant revenue opportunities that allow BHS to implement strategic goals (OCP) and ensure sustainable funding for critical recovery and rehabilitation services (Clubhouses, IPS, etc.).
- Requesting BHAB support for BHS opting in to all components of this comprehensive Initiative.
- Requesting BHAB support in advocating for the necessary resources and investments for planning, implementation and ongoing operations to ensure this transformative work is successful.

Questions?





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