



FAQs on the Behavioral Health Integration (BHI) Incentive Program

Q: Where do I find the online application?

A: The online application can be found on the Department of Health Care Services (DHCS) website at https://www.dhcs.ca.gov/provgovpart/Pages/VBP_BHI_IncProApp.aspx or the IEHP Provider portal at: www.iehp.org > For Providers > Special Programs > BHIIP.

Q: The State mentioned that total available funding is \$95 million. As a Managed Care Plan (MCP), does IEHP have a ceiling for each application it receives?

A: We are currently unsure of how much funding will be allocated to IEHP for this program. At this time, there is no ceiling for each application.

Q: What sources of funding would be available at the end of the project to continue the services?

A: There may be potential funding opportunities through Cal Aim, however it is uncertain at this time. Further discussion will be needed to define funding sources after the project.

Q: Do the projects we select for this grant funding have to be completely new clinical activities or projects?

A: Yes, the grant funding is to enhance or develop new services.

Q: Will there be a platform to send the data?

A: The Secure File Transfer Protocol (SFTP) server will most likely be used for data exchange.

Q: How can we get a copy of the PowerPoint that was just presented in the webinar?

A: The PowerPoint is posted on the IEHP Provider portal at: www.iehp.org > For Providers > Special Programs > BHIIP.

Q: Is this different from the Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) Merit Based Incentive Payments System (MIPS)?

A: Yes, MACRA and MIPS are Centers for Medicare and Medicaid Services (CMS) Programs. This is a State Program for Behavioral Health Integration.

Q: Who selects the performance data? IEHP, DCHS, or the Clinic Site?

A: In the application under each project, there is a list of required measures for which the clinic will be required to report on. Additionally, projects one (1) and two (2) contain a list of additional measures by which the clinic site will need to choose from.

Q: Are home health agencies allowed to participate?

A: At this time, it is unknown. IEHP is awaiting DHCS response to this question.

Q: Will there be a specified format or just need to upload the progress notes specified?

A: DHCS is developing templates for providers to submit data.

Q: What date will the Providers start receiving the first payment for the program?

A: At this time, it is unknown. IEHP is awaiting DHCS response to this question.

Q: Is this solely for Primary Care Physicians or can Specialists participate?

A: Specialty Providers are eligible to participate in the program.

Q: Is this geared more towards Providers than IPAs?

A: Yes, we will be targeting Providers directly for the proposals.

Q: Do Providers submit reports to IEHP or DHCS directly? And at what intervals - monthly, quarterly? Or are these defined milestones per the provider's original application?

A: The data will come to IEHP first and IEHP will then submit to the State. Year one (1) will be an upfront payment. The frequency of data submission is still to be determined.

Q: Do Providers need to select the measures?

A: Yes, there will be a set of required measures and an additional set of specified measures that will need to be selected from on the application.

Q: How do we obtain the required Letters of Support?

A: Letters of Support will come from the Department of Behavioral Health and Substance Use Program and are only required for specified projects. Please email the IEHP BHIIP Team at BHIIP@iehp.org to request a County contact for the Letter of Support.

Q: Are the Letters of Support specific to each Provider?

A: If your clinic system has multiple Providers, you will submit one application for your proposal and cite within the body of the proposal the plan that involves each Provider.

Q: If up front funding is given on year one (1) and in years two (2) & three (3) milestones are not met, will those funds need to be repaid?

A: At this time, it is unknown. IEHP is awaiting DHCS response to this question.

Q: Do we screen and cater only to the existing patients in our practice or should we expect to receive new patients who need mental health services?

A: You would treat your current patient population and any new patients. You would not receive additional new patients as a result of participating in this program.

Q: Our patient population is a mix of Medicare, Medicaid, Medicaid Health Maintenance Organization (HMO) and Medicare HMO. Are we providing services to all demographics or focusing on a specific population?

A: The goal is to treat any patient that could benefit from these services.

Q: Is there a minimum number of patient encounters we are expected to see per week?

A: The application does not specify a minimum number of patient encounters, however, depending on the project(s) selected, you will be required to report on the required measures and additional selected measures on a to-be-determined frequency.

Q: If new patients are referred to our clinic, is there a separate payment for the encounter or is it included in the incentive?

A: Your current payment reimbursement methodology for clinical services (capitated or fee-for-service [FFS]) will not change; that will continue as usual. Your application must include a detailed budget for your defined milestones and associated proposed incentive funding.

Q: Will there be any uninsured patients, and if yes, where will they be sent for labs, etc.?

A: You would treat your current patient population as per usual and utilize the labs that you are already using.

Q: Who at IEHP we should ask for if we have questions regarding our application?

A: IEHP can provide support and guidance by way of answering and clarifying project application questions. Please address all questions related to BHIP to the IEHP BHIP team at BHIP@iehp.org.