



## California Community College Statement of Interest Survey and Operational Readiness Application

California Community Colleges (CCCs) applying to participate in Cohort 2 of the Children and Youth Behavioral Health Initiative (CYBHI) fee schedule **must complete an application package that includes a statement of interest and information related to operational readiness** (see PDF below and survey link [here](#)).

This application package and supporting documentation must be submitted via survey to DHCS for approval by no later than close of business on **June 30, 2024**.

CCCs should only complete the below if they are interested in being part of Cohort 2. CCCs will have future opportunities to apply for Cohort 3.

DHCS will make final decisions and notify Cohort 2 participants no later than **July 31, 2024**.

DHCS will be holding technical assistance webinars in May – June 2024 to provide further guidance and answer questions about applying to participate in Cohort 2 (please see the [DHCS CYBHI website](#) for additional details). In addition, if you have questions about the application process or the CYBHI fee schedule, please contact DHCS at [DHCS.SBS@dhcs.ca.gov](mailto:DHCS.SBS@dhcs.ca.gov).



## Statement of Interest

1. CCC background information: Please provide the following information
  - a. Name of CCC:
  - b. District: *[dropdown selection]*
  - c. County: *[dropdown selection]*
  - d. Primary point of contact:
    - i. Contact name:
    - ii. Role in CCC:
    - iii. Email:
    - iv. Phone number:
  - e. Student enrollment for the 2023-2024 academic year (total approximate number, by age group):
    - i. <18 years old:
    - ii. 18-25 years old:
    - iii. >25 years old:

2. Rationale: Participation in Cohort 2 of the CYBHI fee schedule provider network will require CCCs to meet the CYBHI fee schedule program requirements and implement new policies, processes, and infrastructure (e.g., billing capabilities, IT systems).

DHCS intends for Cohort 2 implementation partners (i.e., DHCS, statewide Third-Party Administrator, health plans, CCCs, designated providers) to function in a collaborative learning environment with participants providing continuous feedback that will inform refinement of policy and operational guidelines.

Please refer to the [CYBHI Statewide Multi-Payer Fee Schedule draft guidance document](#) for more information.

Please select one of the below:

I have carefully read and understand the above information and agree that the CCC will participate and contribute to the collaborative learning environment



by sharing insights from service delivery, infrastructure, and other best practices.

I am unable to agree that the CCC will participate and contribute to the collaborative learning environment by sharing insights from service delivery, infrastructure, and other best practices.

**Explanation for selection (optional): [open text box for response]**

## Operational requirements

CCCs **must meet all minimum requirements below** and be deemed operationally ready by DHCS prior to approval for go-live. **CCCs will not be eligible to submit claims** for the CYBHI fee schedule services **until DHCS issues an approval** based upon its review of the CCC's documentation and demonstration of readiness. Retroactive billing to a period prior to this demonstration of readiness is not permitted.

CCCs will be required to demonstrate readiness prior to joining Cohort 2 across the following focus areas<sup>1</sup>: (A) Medi-Cal enrollment, (B) Service delivery infrastructure and capacity building, (C) Data collection and documentation, and (D) Billing infrastructure.

### A. Focus Area – Medi-Cal Enrollment

Cohort 2 participants must be Medi-Cal enrolled in order to receive both state and federal reimbursement for eligible services rendered under the CYBHI fee schedule (see below example deliverables, each of which is a federal and/or state Medi-Cal requirement).

Minimum Requirements:

1. CCCs must have or obtain a National Provider Identifier (NPI).
  - a. Does the CCC have an NPI?
    - i. Yes
    - ii. No
  - b. If yes, please provide the CCC's NPI:



2. To ensure compliance with state and federal requirements, DHCS may ask CCCs to complete additional Medi-Cal enrollment requirements prior to launch. Potential **example requirements** could include, but are not limited to:
- Completion of a Medi-Cal Provider Participation Agreement.
  - Completion of a CYBHI-specific fee schedule program agreement to confirm the CCC's commitment to comply with mandatory program requirements.
  - Completion of a Medi-Cal disclosure statement to gather information on the CCC (e.g., name, address, debts due to government that relate to federal or state health care programs, previous suspensions) and individuals who meet the definition of a managing employee<sup>1</sup> (e.g., social security number, past felonies, previous suspensions).
  - Submission of a certificate of general liability insurance covering the CCC and participating school sites. *General liability insurance covers premises and operation at the CCC address and includes costs of defense, legal costs, damage to property, claims expenses because of injuries to other persons, etc.*
  - Submission of a certificate of professional liability insurance covering the CCC and participating school sites. *Professional liability insurance covers against the loss, damage, or expense incident to a claim arising out of the harm of any person as a result of malpractice in rendering professional services by any person who holds a license or certificate.*
  - Submission of a certificate of workers' compensation insurance covering the CCC and participating school sites.

Please select one of the below:

I have carefully read and understand the above information and agree that the CCC will complete all additional requirements established by DHCS within requested timelines.

I am unable to agree that the CCC will complete all additional requirements established by DHCS within requested timelines. My rationale for not agreeing is: **[open text box for response]**

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<sup>1</sup> Any individual who exercises operational or managerial control over, or who directly or indirectly conducts the day-to-day operation of an applicant or provider.



## B. Focus Area – Service Delivery Infrastructure and Capacity Building

Cohort 2 participants must demonstrate that they have sufficient existing service delivery infrastructure and/or capabilities to expand service offerings to meet the needs of all students.

This includes employing or contracting with practitioners eligible to provide behavioral health services included in the CYBHI fee schedule. This could include:

- Employment of licensed behavioral health professionals,
- Employment of Pupil Personnel Service (PPS) credentialed practitioners, and/or
- Contracting or affiliating with behavioral health practitioners, provider groups, clinics, community-based organizations (CBOs), or county behavioral health departments.

Minimum Requirements:

1. Please explain the CCC's current capacity (e.g., physical space, staffing, resources, contracts) to provide applicable mental health services and substance abuse disorder services (e.g., SABIRT). In particular, please describe the CCC's capacity to provide mental health services and substance abuse disorder services to a range of students (e.g., universal supports administered to all students, intensified supports administered to some students). (500-word maximum) *If applicable, please attach relevant documentation and highlight where this question is referenced.*

*Note: If the CCC may need assistance with capacity building through the DHCS CYBHI's soon to be released School-Linked Partnerships and Capacity Building Grants, please indicate so in this response.*

2. Please **select all models** the CCC currently utilizes to deliver behavioral health services to students:
  - Employs practitioners full-time or part-time (e.g., licensed behavioral health providers, mental health specialists)
  - Contracts with CBOs or behavioral health provider organizations
  - Informal arrangements or affiliations with CBOs or behavioral health provider organizations
  - Contracts with county behavioral health department



- Contracts with Medi-Cal managed care plans
- Contracts with commercial health plans or disability insurance plans
- Not applicable – CCC does not provide behavioral health or substance use disorder services
- Other, please describe:

*Note: DHCS may require CCCs to provide more detailed information on existing partnerships with affiliated and/or contracted practitioners and providers during onboarding.*

3. If selected for Cohort 2, the CCC will be required to provide information about providers, practitioners, and services, including a detailed provider list and practitioner information for all employed, contracted, and affiliated providers.

I have carefully read and understood the above and agree that the CCC will provide required provider information to the TPA or DHCS upon request.

I am unable to agree that the CCC will provide required provider information to the TPA or DHCS upon request. My rationale for not agreeing is: **[open text box for response]**

### **C. Focus Area – Data Collection and Documentation**

Cohort 2 participants must have defined policies and protocols, or a concrete plan, for collecting, storing, and transmitting the following information to the State’s Third-Party Administrator (TPA) (as appropriate), including the following:

- i. Student data and healthcare coverage information (e.g., subscriber name, date of birth, insurance provider, policy number, group number),
  - ii. Provider network information (e.g., provider name, certification number), and
  - iii. Information on the provision of behavioral health services (e.g., date of service, name of recipient, service location, treatment plans).
1. Third Party Administrator: DHCS has contracted with a Third-Party Administrator (TPA), Caelon Behavioral Health, who will serve as a statewide clearinghouse for claims management and payment remittance. The TPA will also be responsible for CCC network oversight to centralize certain functions



(e.g., provider management, credential verification, quality oversight) necessary to maintain the integrity of the program.

a. Is the CCC willing to work with the State's TPA throughout their time submitting claims to the CYBHI fee schedule program?

Yes

No

Need more information

b. Does the CCC currently contract with a TPA vendor?

Yes

No

Not currently, but the CCC is considering this model

Need more information

c. If yes, which TPA entity?

2. Please describe the CCC's current policies and procedures, or concrete plan, related to the collection, storage, and transmission of data related to the provision of behavioral health services (e.g., collection of provider information, collection of student health-related records). Please include any systems or software used in your response and note any procedures in place to ensure the CCC complies with Health Insurance Portability and Accountability Act (HIPAA) or Family Educational Rights and Privacy Act (FERPA) regulations as needed. Provide any details relating to the training of staff on data privacy. *If applicable, please attach relevant documentation and highlight where this question is referenced.*

3. As appropriate, the TPA may share data with the relevant Medi-Cal managed care plan commercial health plan, and/or disability insurers (e.g., data required for payment of claims, utilization reporting, quality reporting). As such, the CCC must agree to complete all required data use agreements within DHCS established timelines and enter into a data use agreement with the TPA.

I have carefully read and understand the above and agree that the CCC will complete all required data use agreements within DHCS established timelines.



I am unable to agree that the CCC will complete all required data use agreements within DHCS established timelines. My rationale for not agreeing is: **[open text box for response]**

#### **D. Focus Area – Billing infrastructure**

Cohort 2 participants must demonstrate their ability to transmit sufficient data and information to be able to file a claim and must be able to receive payments.

1. What sources does the CCC use to fund behavioral health services? Please select all that apply and provide the rough percentage of total funding contributed by each category in the 2023-2024 academic year.
  - a. Student health fees
  - b. State funds (e.g., Proposition 98 General Fund)
    - i. Please specify the name of the fund(s)
  - c. Insurance coverage (e.g., Medi-Cal)
    - i. Please specify the insurer(s)
  - d. Other sources (please explain)
2. Who are the billing entity(ies) for behavioral health services at the CCC? (Select all that apply)
  - a. The CCC – student health services department
  - b. The CCC – other central department (e.g., Bursar’s Office)
  - c. The CCC contracts with a third-party entity for billing
  - d. Other (please explain)
  - e. Not sure / Need more information
3. Please describe the CCC’s current infrastructure for claims processing and submission (e.g., automated data sharing between providers and payers, medical billing software, claim analytics). You may also describe plans to expand this infrastructure in the future (e.g., ~1 year). *If applicable, please attach relevant documentation and highlight where this question is referenced.*





## **Additional information**

1. Is there anything else you'd like to share?