



DATE: January 12, 2024

Behavioral Health Information Notice No: 24-006
Supersedes [BHIN 23-035](#)

TO: California Alliance of Child and Family Services
California Association for Alcohol/Drug Educators
California Association of Alcohol & Drug Program Executives, Inc.
California Association of DUI Treatment Programs
California Association of Social Rehabilitation Agencies
California Consortium of Addiction Programs and Professionals
California Council of Community Behavioral Health Agencies
California Hospital Association
California Opioid Maintenance Providers
California State Association of Counties
Coalition of Alcohol and Drug Associations
County Behavioral Health Directors
County Behavioral Health Directors Association of California
County Drug & Alcohol Administrators

SUBJECT: Updated guidance for the California Advancing and Innovating Medi-Cal Initiative (CalAIM) Behavioral Health Quality Improvement Program (BHQIP)

PURPOSE: This Behavioral Health Information Notice (BHIN) updates deliverable reporting requirements for the BHQIP March 2024 Reporting Period.

REFERENCE: Welfare and Institutions Code sections [14184.102\(d\)](#); [14184.405\(a\)](#); [BHIN 21-044](#); [BHIN 22-034](#); [BHIN 23-032](#).

BACKGROUND:

The Behavioral Health Quality Improvement Program (BHQIP) is a program intended to help support the implementation of ([CalAIM](#)).¹ Medi-Cal behavioral health delivery systems participating in BHQIP, referred to as participating entities, are able to receive incentive payments if they meet specified milestones and deadlines. Meeting the specified milestones and deadlines means: (1) the participating entity submits all requested documentation and deliverables on or before the calendar date specified by the Department of Health Care Services (DHCS); (2) DHCS determines the

¹ Welfare and Institutions Code (WIC) Section 14184.405(a).

documentation and deliverables submitted are complete, and compliant with applicable CalAIM requirements; and (3) DHCS approves the documentation and deliverables submitted by the participating entity.

This BHIN clarifies and revises guidance for the deliverables due in the March 2024 Reporting Period.

POLICY:

March 2024 Deliverables

To be eligible for funding for this March 2024 Reporting Period, participating entities shall submit the deliverables specified in this BHIN, and other specified guidance, to DHCS no later than March 1, 2024. Guidance for all deliverables due no later than March 1, 2024, in addition to clarifications for guidance shared in earlier communications, are provided in this BHIN.

Milestone 3b: Demonstrate an active Fast Healthcare Interoperability Resources (FHIR) application programming interface (API) that will allow the county Mental Health Plans, Drug Medi-Cal State Plan programs, and Drug Medi-Cal Organized Delivery System programs to be compliant with interoperability regulations of the Center for Medicare and Medicaid Services.

The Milestone 3b deliverable is revised as follows:

- **DHCS Required Deliverable:** Submit the completed Interoperability API Utilization Metrics Survey (DHCS to provide survey template).

Participating entities shall submit the Interoperability API Utilization Metrics Survey for the Interoperability APIs they attested to implementing in the Milestone 3b deliverable, which was due to DHCS on September 29, 2023, during the September 2023 Reporting Period. The survey replaces the previous deliverable requirement outlined in the [BHQIP Program Implementation Plan and Instructions](#), or [BHIN 23-035](#).

This deliverable is copied for reference:

- **DHCS Required Deliverable:** Signed attestation form from the county that certifies the implementation of FHIR API and description of the status of the API

implementation using the prompts included in the reporting template provided by DHCS.

Milestone 3d: Leverage improved data exchange capabilities to improve quality and coordination care, using the following three quality measures:

- Follow-up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence (FUA)
- Follow-up After Emergency Department Visit for Mental Illness (FUM)
- Pharmacotherapy for Opioid Use Disorder (POD)
- DHCS Required Deliverable: Submit updated narratives on projects, challenges, lessons learned, and next steps related to quality improvement on the three quality measures (FUA, FUM, POD) during the measurement period, as specified in the reporting template provided by DHCS.

Participating entities are not required to report baseline performance rates for FUA, FUM and POD for the March 1, 2024, submission.²

To complete the Milestone 3d deliverable for the March 2024 Reporting Period, participating entities shall:

- Focus on local experiences and data collected beginning October 1, 2023, through the date of the entity's March 1, 2024, Reporting Template submission;
- Build on the participating entity's prior Milestone 3d submissions, including the Milestone 3d submission due to DHCS on September 29, 2023; and
- Take into account DHCS feedback from prior submissions, including the Milestone 3d submission due September 29, 2023.

Template Submission

Participating entities shall submit their completed March 2024 Reporting Template and accompanying documentation through the DHCS E-Transfer MOVEit website. Each designated point(s) of contact authorized to submit their report will receive an invitation email to create a [MyApps\(Azure\)](#) account.

Reporting Period Deadline

All submissions are due to DHCS no later than March 1, 2024.

² Per [BHIN 23-005](#), the requirement to report baseline performance rates for FUA, FUM and POD was eliminated from the BHQIP reporting requirements.

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As March 2024 is the final Reporting Period for BHQIP, the March 2024 deliverables are not eligible for extensions, late submissions, or reduced payments for late submissions. March 2024 deliverables submitted after March 1, 2024, will not be eligible to receive any portion of incentive payments for that deliverable.

Questions regarding this BHIN may be directed to BHQIP@dhcs.ca.gov.

Sincerely,

Original signed by

Michele Wong, Chief
Medi-Cal Behavioral Health–Oversight and Monitoring Division