

## Follow-Up Item from July 29, 2021, BH-SAC Webinar

*Carmela Coyle, California Hospital Association:* Thanks for all the effort going into this historic investment in behavioral health. Could DHCS create a concise chart or document to help us track the funding and purposes across the multiple budget bills?

### Behavioral Health FY21-22 Budget Initiatives

Source	Description	Summary	Amount	Timeframe
<b>Budget Bill Language (BBL) Senate Bill (SB) 129</b>	Behavioral Health Continuum Infrastructure Project (BHCIP)	The <a href="#">BHCIP</a> provides DHCS funding to award competitive grants to qualified entities to construct, acquire, and rehabilitate real estate assets, or to invest in mobile crisis infrastructure to expand the community continuum of behavioral health treatment resources. A portion of the funding is available for increased infrastructure targeted to youth aged 25 and younger.	\$443,499,000  \$150 million allocated to mobile crisis infrastructure	Fiscal Year (FY) 2021-22, through June 30, 2026
<b>BBL SB129</b>	Children and Youth Behavioral Health Initiative (CYBHI): School Incentive Program	(a) \$194,493,000 is available to support incentive payments to qualifying Medi-Cal managed care plans (MCP) to implement interventions that increase access to prevention, early intervention, and behavioral health services by school-affiliated BH providers for children in schools in grades K-12. (b) \$100 million is available to support school-linked partnership, capacity, and infrastructure grants to qualified entities to support implementation of the initiative for BH services in schools and school-linked settings. Of this amount, \$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.	\$550 million	FY 2021-22, through June 30, 2024

		(c) \$45 million is available to support the CalHOPE Student Support Program. (d) \$10 million is available to support a BH services and supports virtual platform.		
<b>BBL SB 129</b>	BH-Quality Improvement Program (BH-QIP)	Deploys start-up funds and incentive payments to support county BH plans to build new capacity and infrastructure to support administrative priorities.	(see below)	(see below)
<b>BBL SB 129</b>	BH-QIP	BH-QIP for CalAIM implementation	\$86.6 million	FY 2021-22 (\$21.75 million), through 2024
<b>BBL SB 129</b>	BH-QIP	BH-QIP for CYBHI (evidence-based projects and school-linked grants)	\$550 million	FY 2021-23
<b>BBL SB 129</b>	BH-QIP	BH-QIP to support the transitions to community-based care for youth in short-term residential therapeutic programs that are at risk of being determined an Institution for Mental Disease and, therefore, no longer eligible for federal funding.	\$7.5 million	Starting in FY 2021
<b>BBL SB 129</b>	Providing Access and Transforming Health (PATH)*	\$100 million is available for justice-involved initiatives within the PATH supports	\$100 million	FY 2021-22, through June 30, 2024
*Not strictly BH				

<b>Home and Community-Based Services (HCBS) Spending Plan</b>	CalBridge	\$40 million in enhanced federal funding to build upon the successful CalBridge BH program, which provides grants to acute care hospitals to support hiring trained BH navigators in emergency departments to screen patients and, if appropriate, offer intervention and referral to mental health or substance use disorder (SUD) programs. Applicants will include general acute care hospitals or health systems, hospital foundations, or physician groups. The proposed funding is dedicated to new activities (expanding the role of the navigator to better address mental health conditions as well as SUDs), new services (covering the costs for hospitals already participating in CalBridge to add a new navigator and expand hours of coverage or patients served), and new grantees (expanding CalBridge to hospitals that have not yet participated).	\$40 million	April 1, 2021, through March 31, 2024
<b>HCBS Spending Plan</b>	Contingency Management	Contingency management is an evidence-based intervention that uses small motivational incentives combined with behavioral treatment to treat stimulant use disorder. DHCS proposes to offer contingency management via a pilot, as it is the only treatment repeatedly shown in studies to work for stimulant use disorder.	\$58.5 million (\$26.8 million General Fund (GF)/\$31.7 million Federal Funds (FF))	July 1, 2021, through March 31, 2024
<b>Budget Change Proposal (BCP)</b>	BH Plan 274 Expansion Project	The BH Plan 274 expansion project will implement a more robust and standardized file for the collection and maintenance of BH provider network data. Data will be used for a variety of purposes, including, but not limited to, addressing network shortages and deficiencies, aligning network monitoring and compliance processes, and ensuring program and data integrity.	\$1.08 million (\$108,000 GF/\$972,000 FF)	FY 2021-22

<b>Enrollment, Caseload, and Population (ECP) (Local Assistance) Approved in budget PC 248</b>	Increased Access to Student Behavioral Health Services	This proposal seeks to implement a \$389 million (\$194.5 million GF, \$194.5 million FF) local assistance incentive program through MCPs, in partnership with schools and county BH departments, to increase the number of K-12 students receiving preventive, early intervention, and behavioral health services from school-affiliated behavioral health providers. This proposal pre-dates the CYBHI, but will be closely aligned with CYBHI once implemented.	\$388,986,000 million (\$194,493,000 GF/ \$194,4903,000 FF)	FY 2021-22
<b>ECP (Local Assistance) Approved in budget, outside the estimate</b>	Adult Use of Marijuana Act: Proposition 64	Funds issued to community-based organizations to support youth prevention, focused on communities most affected by the war on drugs, guided by a stakeholder committee.	\$456,834,000 million (\$781,962,000 GF/ \$1,238,796 FF)	FY 2021-22