



Wednesday, June 5, 2024 | 11:00 a.m. PT

# Behavioral Health Integration — Children and Youth Collaborative Learning Exchange

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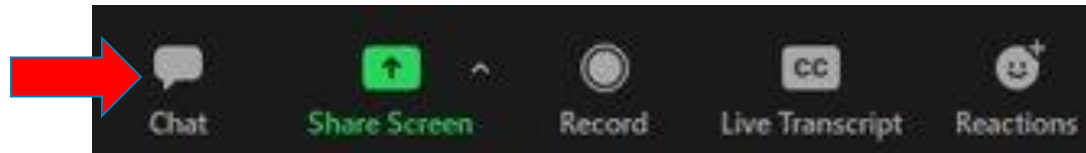
## Informational Webinar



California Quality  
Collaborative

# Zoom Tips

- Attendees are automatically **MUTED** upon entry
- Use the **chat box** for questions

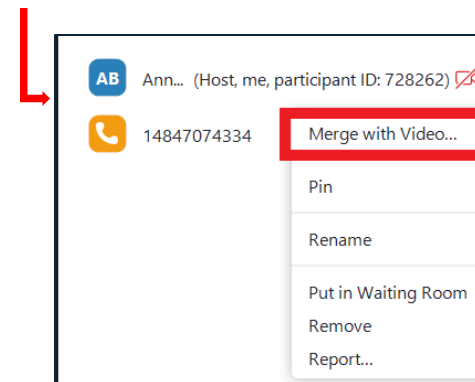


- Request closed captioning with 'Live Transcript' button

**Direct message  
Anna Baer**  
if you have any technical  
issues



- If you've dialed in, please link your phone to your video/computer



# California Quality Collaborative

**Advancing the quality and efficiency of the outpatient health care delivery system by creating scalable, measurable improvement.**

Launched in 2007, CQC is a **multi-stakeholder quality improvement program** of the Purchaser Business Group on Health. Core funding comes from health plans sharing a delivery system.

**Identifies and spreads best practices** across outpatient delivery system in California

**Trains 2,000 individuals** from 250 organizations each year

CQC's track record includes **20% relative improvement** in clinical outcomes and **10:1 ROI**

## Sponsors



# Today's Agenda



Identify how behavioral health integration (BHI) can support children, youth and families



Review objectives of Behavioral Health Integration — Children and Youth Collaborative Learning Exchange



Take steps to join the collaborative

# Today's Speakers



**Kristina Mody**  
Director,  
Practice Transformation

[kmody@pbgh.org](mailto:kmody@pbgh.org)



**Anna Baer**  
Program Coordinator,  
Care Transformation

[abaer@pbgh.org](mailto:abaer@pbgh.org)



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# Behavioral Health Integration Children and Youth

Background

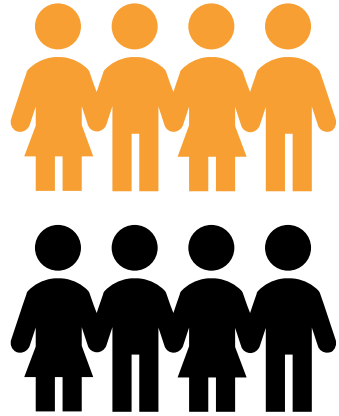
## Poll: Sharing

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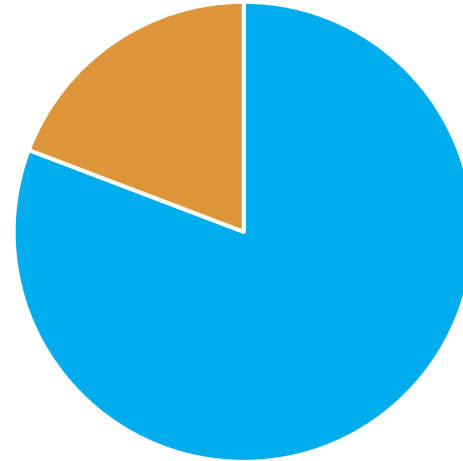
Where is your organization in providing integrated behavioral health services for children/youth?

- Planning
- Just started
- Been doing 2+ years
- Not a health care provider

# What We See



Half of all lifetime cases of mental illness begin by age 14



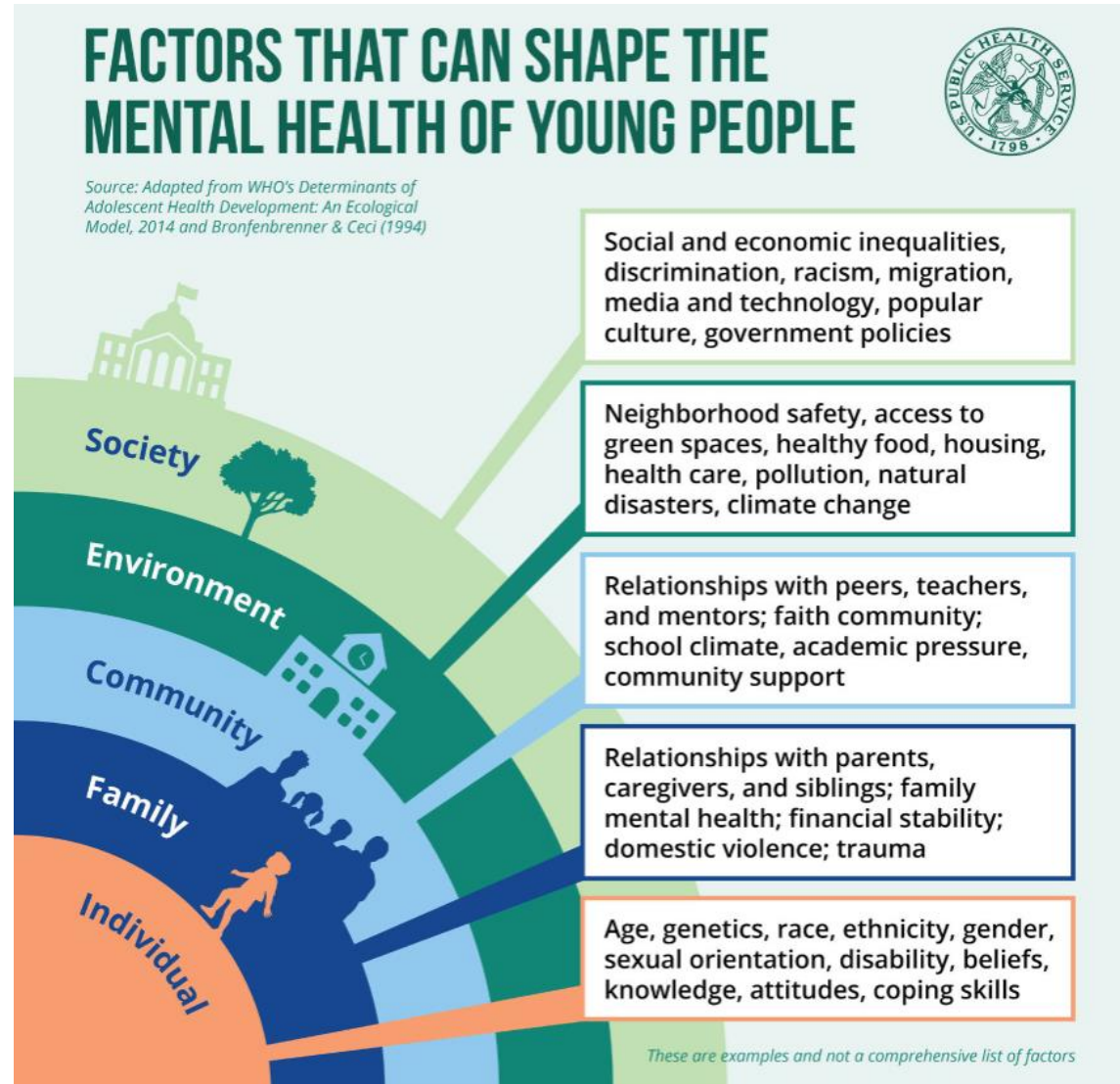
1.8 million California children may be living with a behavioral health diagnosis



Mental health conditions + COVID-19 recovery = syndemic



# Mental Health Factors



Source: U.S. Surgeon General's Advisory, [Protecting Youth Mental Health](#)

# Opportunities in California

- [Master Plan for Kids' Mental Health](#)
- [Children and Youth Behavioral Health Initiative \(CYBHI\)](#)
  - Launched in 2021; five-year initiative that seeks to reimagine the systems, regardless of payer, that supports behavioral health for all California's children, youth and their families
  - Behavioral Health Virtual Services Platforms
  - Evidence-Based Practices and Community Defined Evidence Practices Grants
  - School-Linked Services



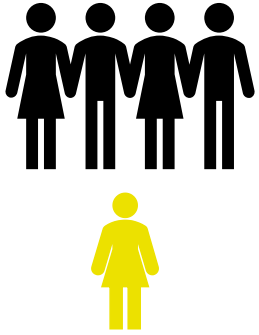
# Moving to Integrated Care

## Six Levels of Collaboration/Integration

Coordinated		Co-Located		Integrated	
<b>Level 1</b> Minimal Collaboration	<b>Level 2</b> Basic Collaboration at a Distance	<b>Level 3</b> Basic Collaboration Onsite	<b>Level 4 Close</b> Collaboration Onsite with Some System Integration	<b>Level 5</b> Close Collaboration Approaching an Integrated Practice	<b>Level 6</b> Full Collaboration in a Transformed/ Merged Integration Practice

Behavioral health integration fortifies primary care by bringing together **primary care and behavioral providers**, working with patients and families, using a systematic approach to provide patient-centered care for mental health and substance use disorders, life stressors and crises and stress-related physical conditions.

# Models of Behavioral Health Integration

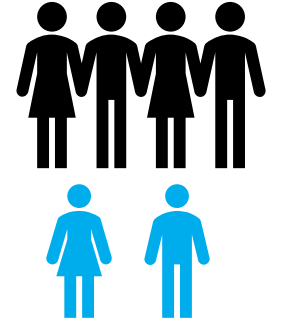


## Primary Care Behavioral Health Model

- Available for primary care population for any behaviorally-influenced concern
- Adds licensed behavioral health professional as behavioral health consultant
- Often billed under behavioral health benefits

## Collaborative Care Model

- Targets specific population (mild-to-moderate depression) using registry and PHQ-9 and psychotropic medication
- Adds psychiatrist consultant and behavioral health care manager
- Often billed under medical benefits, “incident to” PCP



### Learn more:

- CQC [BHI Implementation Snapshot: Selecting an Integration Model](#)
- CQC [Webinar: BHI Concepts & Models \(6/13/23\)](#)

# Potential of BHI for Children/Youth

- Meet families where they are
- Leverage existing trusting relationship with pediatrician/ family medicine provider
- Improve screening to capture and address patient/family needs
- Provide earlier intervention
- Increase behavioral health access
- Coordinate with needed services



# Implementing BHI in Pediatric Settings Nuances

- Including patient's family/caregivers
- Adolescent
  - Privacy, confidentiality, consent
- Partnerships and coordination
  - Schools, community organizations, specialty BH/MH
- Wide range of ages and conditions
- Opportunity to address social drivers



## Sharing: Chat

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What opportunities do you see to improve integrated behavioral health services for children/youth?

# Implementing BHI in Pediatric Settings

## Opportunities



### Workforce

- BHI requires culture shift (not therapy, interventions)
- Difficult to find BH/BHI providers with pediatric experience (especially with cultural/linguistic competencies)



### Financing

- Difficulty billing for BHI services (especially same-day, carve-out)

### Sustainability / Spread



- Challenging to set up sustainable programs and/or spread



# Implementing BHI in Pediatric Settings

## Resources

- California Children's Hospital Association, [Improving Behavioral Health Care for Children in California](#)
- Children's Hospital Association, [Pediatric Behavioral Health Integration in Primary Care](#)
- Collaborative Care
  - AIMS Center: [Pediatric Collaborative Care Implementation Guide](#); 4/16/24 [Whole Person Care Through Pediatric Collaborative Care webinar](#)
- Primary Care Behavioral Health
  - Collaborative Family Healthcare Association: 8/2/23 [Developing a Family-Centered Perspective in PCBH Practice: Future Directions and Opportunities webinar](#)



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# Behavioral Health Integration — Children and Youth Collaborative Learning Exchange

Overview: October 2024 – July 2025

# Behavioral Health Integration — Children and Youth Collaborative Learning Exchange

A nine-month learning collaborative (Oct. 2024 - Jul. 2025) that will engage provider organizations to improve integrated care for children and youth.

Organizations will:



**Share** successful practices with a dynamic network of peer organizations



**Spread** adoption of promising solutions addressing real-world challenges that improve delivery of integrated behavioral health care for children/youth



**Showcase** successes in a public toolkit synthesizing recommendations, experience and contributions to the field

# Who can participate?

BHI – CYCLE is open to provider organizations across California with at least two years of experience integrating behavioral health into clinical settings treating children and youth.

- Identifies at Level 3 or above

Eligible California organizations may include:

- Federally Qualified Health Centers
- Health Systems
- Independent Physician Associations
- Management Services Organizations
- Accountable Care Organizations

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# How will BHI-CYCLE support participants?

Participants will have access to a variety of technical assistance, including:

- **Virtual learning events** – learning from a dynamic network of peer health care organizations
- In person **site visit** to exemplar organization
- **Project support** addressing real-world challenges
- **Seed funding** to support participation
- Inclusion in **public toolkit** highlighting successful practices



# Participant Project Focus Areas



Organizations will determine a project focus area to pilot improvements throughout the course of BHI-CYCLE

Possible project applications include:

- Implementation of dyadic services
- Sustainable financial planning for behavioral health integration
- Patient, family and caregiver engagement

# Commitment

Supported by an engaged and committed project team, participating organizations will:

- Regularly attend, contribute to and present during monthly virtual peer-sharing learning webinars
- Attend the in-person exemplar site visit
- Identify and pilot a solution addressing a local challenge
- Participate in evaluation activities (interview and survey) supporting public toolkit



# Timeline

Recruiting



Learning  
Collaborative



Toolkit  
Published

## May 2024 – September 2024

- 1:1 conversations with potential participants and CQC team
- Applications to be reviewed on rolling basis (by 8/30/24)
- CQC to announce up to **8 participants** September 2024

## October 2024 – July 2025

- Monthly virtual learning events with peers and SME
- Q1 2025: In person site visit to exemplar site
- Piloting of solution to address a local challenge
- Participants sharing successful practices for public toolkit

## October 2025

- CQC to publish toolkit summarizing recommendations and lessons learned for providing integrated care for children/youth



# How do I apply?



*Applications will be reviewed and accepted on a rolling basis until eight participants have been selected.*

Step 1: Review

- [Program Webpage](#)
- [Prospectus](#)

Step 2: If interested, contact

- Anna Baer [abaer@pbgh.org](mailto:abaer@pbgh.org)

Step 3: Meet with CQC

Step 4: Complete Application (if invited)

Step 5: Onboard (if accepted)

- Complete the collaborative participation agreement



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# Questions & Answers

## Q&A (1 of 2)

- What is the expected commitment for this project in terms of ongoing monthly meetings and the site visit?
  - Attend monthly meetings for the nine month duration of the program
  - Attend in person site visit in Q1 2025
- How long are the monthly meetings?
  - Monthly meetings will be 90 minutes (content presentation and peer sharing)
- Would multiple people from team be able/ expected to attend monthly meetings?
  - We encourage at least teams of two, but you are welcome to extend the invite to members of your organization if specific topics apply to their work
- Do we have to know our project when we apply?
  - No; the application includes a question about possible projects you may work on during the collaborative
  - You are welcome to share multiple ideas; our team wants to get a sense of what project you may work on during the collaborative

## Q&A (3 of 2)

- Does this project use PDSAs?
  - Yes; at CQC, we utilize the Model for Improvement methodology and will share resources during the collaborative to help with your project PDSA cycles.
- Are Electronic Medical Record improvements allowed as a project?
  - Yes; it would be a great opportunity to think through documentation and improvements.
- Do we apply along with who will be on the team?
  - In the application, we ask who might be on your project team to help you think internally about who might fill some of the roles (e.g., clinical and operational lead)
- Will we be required to submit a final report about our project?
  - There is no required reporting
  - Participants will be asked to review and contribute to the public toolkit being created by the CQC team

# CQC Team



**Kristina Mody**  
Director,  
Practice Transformation

[kmody@pbgh.org](mailto:kmody@pbgh.org)



**Anna Baer**  
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# Poll: Webinar Feedback

**1. Would you like CQC to follow up with you to discuss participation in the in Behavioral Health Integration — Children and Youth Collaborative Learning Exchange?**

- Yes
- No

**2. The content of this webinar was helpful.**

- Strongly Agree, Agree, Neither Agree nor Disagree, Disagree, Strongly Disagree

**3. Where are you dialing in from?**

- Northern California, Southern California, Other West Coast, East Coast, Midwest, Southwest

**4. What type of organization do you represent?**

- Patient, Provider/Practice, Health Plan, Government Agency, Technical Assistance Org, Research Agency, Other



# Stay Connected to CQC



- Visit program website to access webinar materials:

[pbgh.org/initiative/behavioral-health-integration-children-and-youth-collaborative-learning-exchange/](https://pbgh.org/initiative/behavioral-health-integration-children-and-youth-collaborative-learning-exchange/)



- Sign-up to receive the CQC Newsletter:

[pbgh.org/cqc-newsletter-sign-up-page](https://pbgh.org/cqc-newsletter-sign-up-page)



- Join in on the conversation on social media:

[LinkedIn](#) | [X](#)



- Email us with questions or feedback:

[cqcinfo@pbgh.org](mailto:cqcinfo@pbgh.org)



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**Thank you!**