

**SUBMITTAL TO THE BOARD OF SUPERVISORS  
COUNTY OF RIVERSIDE, STATE OF CALIFORNIA**



**ITEM: 3.31  
(ID # 16988)**

**MEETING DATE:**  
Tuesday, August 17, 2021

**FROM :** RUHS-BEHAVIORAL HEALTH:

**SUBJECT:** RIVERSIDE UNIVERSITY HEALTH SYSTEM-BEHAVIORAL HEALTH: Ratify and Approve the First Amendment to the Memorandum of Understanding with the Inland Empire Health Plan (IEHP) for the Proposition 56 Value Based Payment Behavioral Health Integration Program, All Districts. [\$1,458,020 in Additional Funding, 100% Grant]

**RECOMMENDED MOTION:** That the Board of Supervisors:

1. Ratify and Approve the First Amendment to the Agreement with IEHP for the Behavioral Health Integration Grant to increase the grant funding by \$1,458,020 from \$5,642,995 to \$7,101,015 for the period of January 1, 2021 through December 31, 2022; and
2. Authorize the Director of Behavioral Health to accept and sign documents related to Agreement, and administer the grant. This authority shall include signature of necessary acceptance documents, exhibits, certifications and reports and non-substantive amendments that otherwise do not increase or modify the agreement. Amendments shall be approved by County Counsel.

**ACTION:Policy**


  
Matthew Chang, Director 8/5/2021

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**MINUTES OF THE BOARD OF SUPERVISORS**

On motion of Supervisor Hewitt, seconded by Supervisor Jeffries duly carried by unanimous vote, IT WAS ORDERED that the above matter is approved as recommended.

Ayes: Jeffries, Spiegel, Washington, Perez and Hewitt  
Nays: None  
Absent: None  
Date: August 17, 2021  
xc: RUHS-Behavioral Health

Kecia R. Harper  
Clerk of the Board  
By:   
Deputy

**SUBMITTAL TO THE BOARD OF SUPERVISORS COUNTY OF RIVERSIDE,  
STATE OF CALIFORNIA**

<b>FINANCIAL DATA</b>	<b>Current Fiscal Year:</b>	<b>Next Fiscal Year:</b>	<b>Total Cost:</b>	<b>Ongoing Cost</b>
<b>COST</b>	\$ 1,196,557	\$ 261,463	\$ 1,458,020	\$ 0
<b>NET COUNTY COST</b>	\$ 0	\$ 0	\$ 0	\$ 0
<b>SOURCE OF FUNDS: 100% Grant Funding</b>			<b>Budget Adjustment: No</b>	
			<b>For Fiscal Year: 20/21-22/23</b>	

**BACKGROUND:**

**Summary**

Riverside University Health System – Behavioral Health (RUHS-BH) operates a continuum of care system that consists of County-operated and contracted service providers delivering a variety of behavioral health treatment services within each geographic region of Riverside County.

The Inland Empire Health Plan (IEHP) administers the Behavioral Health Integration (BHI) Incentive Program. The primary purpose of the BHI Incentive Program is to seek ways to connect with individuals who typically would not seek services. The prevalence of behavioral health disorders varies greatly by economic status as well as race/ethnicity. Within district cultures and communities of color, stigma and cultural attitudes regarding behavioral health have a significant impact on whether individuals seek care and adhere to care plans. This information is a factor in designing care teams and treatment plans. The main objective of the IEHP BHI Program is to develop care teams that will assist with connections for those individuals.

On March 30, 2021 (#3.14), the Board approved the MOU with IEHP for the Proposition 56 Value-Based Payment Behavioral Health Integration Program in the amount of \$5,642,995 to improve follow-up care for children and youth after hospitalization for mental illness.

In May of 2021, IEHP reallocated previously approved funding to project proposals that were not previously approved by DHCS but scored high during the application process. IEHP has extended funding to RUHS-BH to improve follow-up cases for youth and adults after emergency department visits for behavioral health diagnoses, including substance use disorder (SUD) and co-occurring diagnoses. The additional funding approved for RUHS-BH would be in the amount of \$1,458,020. The new total funding amount for RUHS-BH is \$7,101,015.

The Follow-Up After Hospitalization for Mental Illness program will build on existing system infrastructure to enhance intensive care coordination following hospitalization by implementing multi-disciplinary Behavioral Health Navigation Teams that will focus on engaging in follow-up services and coordinating care across multiple systems, to include referrals to health care, social services, and community-based services. The Behavioral Health Navigation Teams will



**SUBMITTAL TO THE BOARD OF SUPERVISORS COUNTY OF RIVERSIDE,  
STATE OF CALIFORNIA**

participate as part of discharge planning by communicating with the patient and hospital treatment team and continuing to support the patient to ensure connection and engagement addressing all service needs following hospitalization.

**Impact on Citizens and Businesses**

These services are a component of Behavioral Health's system of care aimed at improving the health and safety of consumers and the community.

**Additional Fiscal Information**

There are sufficient appropriations budgeted in FY21/22 for the additional funding amount of \$1,196,557. The remaining amount of \$261,463 will be budgeted through the normal budget process. No county funds are required.

  
\_\_\_\_\_  
Gregory F. Priamos, Director County Counsel 8/11/2021

**CLERK'S COPY**

to Riverside County Clerk of the Board, Stop 1010  
 Post Office Box 1147, Riverside, Ca 92502-1147  
 Thank you.

Submittals to Inland Empire Health Plan Governing Board  
 Staff Reports and Recommendations #317  
 June 14, 2021

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**CONSENT AGENDA**

**HEALTH SERVICES DEPARTMENT**

**5. RATIFY AND APPROVE THE FIRST AMENDMENT TO THE MEMORANDA OF UNDERSTANDING WITH RIVERSIDE UNIVERSITY HEALTH SYSTEM BEHAVIORAL HEALTH**

**Recommended Action:**

That the Governing Board of the Inland Empire Health Plan (IEHP) ratify and approve the First Amendments to the Memoranda of Understanding (MOU) with Riverside University Health System – Behavioral Health, to fulfill the Department of Health Care Services (DHCS) BHI goals and objectives of the Behavioral Health Integration (BHI) Incentive Program for two (2) years effective January 1, 2021 through December 31, 2022.

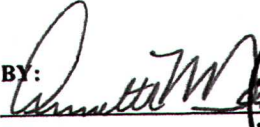

**Contact:**

Karen Hansberger, M.D. Chief Medical Officer

**Background:**

In November 2019, IEHP solicited its network Providers and encouraged BHI Incentive Program applications. Primary care, specialty care, perinatal care, hospital based and behavioral health providers, who provide services to Medi-Cal beneficiaries, were eligible to submit applications. Applicants were to demonstrate how they would meet various behavioral health integration project goals and objectives. As a result, IEHP was able to select one (1) or more BHI projects to implement over two (2) years. Each BHI project contained a target population, practice redesign components and corresponding performance measures. Each applicant was to describe what practice redesign component/tasks they would implement to achieve the goals and objectives of the BHI project(s) they selected. Below is a list of allowable BHI Projects that Providers could apply for in either a pediatric, adolescent or an adult practice:

1. Behavioral Health Integration
2. Maternal Mental Health and Substance Use
3. Medication Management for Beneficiaries with Co-occurring Chronic Medical and Behavioral Diagnoses
4. Diabetes Screening and Treatment for People with Serious Mental Illness
5. Improving Follow-Up after Hospitalization for Mental Illness
6. Improving Follow-Up after Emergency Department Visit

<b>Minute Order of the IEHP Governing Board</b>	
<p>On motion of Member Williams, seconded by Member Anderson and duly carried by unanimous vote, IT WAS ORDERED that the above matter is approved as recommended.</p> <p>Ayes: Anderson, Hagman, Rowe, Williams, Zorn                      Nays: 0                      Absent: Hewitt, Spiegel                      Vacancies: 0                      Date: June 14, 2021</p>	<p>ANNETTE M. TAYLOR                      SECRETARY TO THE GOVERNING BOARD</p> <p>BY: </p> <p>DATED: JUNE 14, 2021</p> 
<p><b>Minute Order: 21-158</b></p>	<p><b>Agenda Number: 5. (Consent);</b></p>

AUG 17 2021 3.31



**CONSENT AGENDA**

IEHP received 47 unique Provider applications which included a total of 83 projects. DHCS initially approved 32 projects spanning 19 unique Provider organizations to implement their projects with a total DHCS approved Grant funding of \$31,776,142 for the BHI Incentive Program. However, following DHCS' approval, it was determined that two (2) Provider organizations would not be moving forward. IEHP proposed to DHCS a reallocation of Grant funding related to the two (2) withdrawn Provider organizations to current BHI Incentive Program Providers. The proposal was approved by DHCS on March 4, 2021.

On March 8, 2021 under Minute Order 21-71, the Governing Board approved 17 individual MOUs with the DHCS awarded BHI Awardees to implement the BHI Incentive Program. DHCS has approved funding for the BHI Incentive Program in an amount not to exceed \$28,741,695, which will be disbursed amongst the 17 Providers. These MOUs are effective January 1, 2021 through December 31, 2022, in alignment with DHCS' program timeframes.

**Discussion**

On March 4, 2021, IEHP received approval from DHCS to reallocate the \$1,458,020 of the original Grant Funding to one (1) current BHI Incentive Program Providers: Riverside University Health System – Behavioral Health. The DHCS approved the following funding reallocation proposal:

- Riverside University Health System – Behavioral Health will be adding Project 3.6 to their scope and an additional \$1,458,020 previously approved by DHCS for other BHI Incentive Program Providers who are no longer participating. The new total DHCS approved funding amount for Riverside University Health System – Behavioral Health is \$7,101,015.

IEHP will execute one (1) MOU Amendment with this DHCS awarded BHI Awardee to implement the BHI Incentive Program. This Amendment will be effective January 1, 2021 through December 31, 2022, in alignment with DHCS' program timeframes.

The BHI Incentive Program is a unique opportunity that will benefit IEHP, its Members and Providers. IEHP will benefit by increasing network integration for Providers at all levels of integration (those just starting behavioral health integration in their practices as well as those that want to take their integration to the next level) and allow them to focus on new target populations, improve their level of integration and care delivery impact on the Member. The funding will allow Providers the opportunity to implement DHCS recommended practice redesign components and tasks of effective integrated behavioral health care programs, which will contribute towards the improvement of physical and behavioral health outcomes of IEHP Members, including care delivery efficiency and patient experience.

**Strategic Priorities:**

- |   |  |   |
|---|--|---|
| <input checked="" type="checkbox"/> Quality of Care | <input checked="" type="checkbox"/> Access to Care | <input checked="" type="checkbox"/> Practice Transformation |
| <input type="checkbox"/> Human Development          | <input type="checkbox"/> Technology                | <input type="checkbox"/> Not Applicable                     |

**Fiscal Impact:**

None

**Reviewed by Counsel:**

Yes



**FIRST AMENDMENT**  
**TO THE MEMORANDUM OF UNDERSTANDING**  
**FOR PROPOSITION 56 VALUE-BASED PAYMENT BEHAVIORAL HEALTH**  
**INTEGRATION PROGRAM**

**BETWEEN**  
**INLAND EMPIRE HEALTH PLAN**  
**AND**  
**RIVERSIDE UNIVERSITY HEALTH SYSTEM – BEHAVIORAL HEALTH**

WHEREAS, Inland Empire Health Plan (“Plan”), a local public entity of the State of California and Riverside University Health System – Behavioral Health (“Provider”), agree to amend the Memorandum of Understanding (the “Agreement”) between them dated February 1, 2021.

NOW THEREFORE, the parties agree as follows:

- A. ATTACHMENT A is hereby deleted and replaced with the ATTACHMENT A attached hereto.
- B. Notwithstanding the date of execution, unless otherwise referenced, this First Amendment shall be effective as of the date of the last signature.
- C. Except as amended hereby, all of the other terms and conditions of the Agreement are to remain in full force and effect.
- D. Provider certifies that the individual signing below has the authority to execute this First Amendment on behalf of Provider and may legally bind Provider to the terms and conditions of this First Amendment, and any attachments hereto.

(SIGNATURE PAGE TO FOLLOW)



IN WITNESS WHEREOF, the parties hereto have signed this First Amendment to the Memorandum of Understanding as set forth below.

**RIVERSIDE UNIVERSITY HEALTH SYSTEM – BEHAVIORAL HEALTH:**

By: \_\_\_\_\_  
Matthew Chang, MD  
Director, Behavioral Health

Date: \_\_\_\_\_

Form approved County Counsel by:

By: Gregg Gu  
Eric Stopher

Date: \_\_\_\_\_

Digitally signed by Gregg Gu  
DN: cn=Gregg Gu, o=County Counsel,  
ou=PS&LD, email=gg@direc.org, c=US  
Date: 2021.06.06 07:45:33 -0700

**INLAND EMPIRE HEALTH PLAN:**

By: Keenan Freeman  
Keenan Freeman, Chief Financial Officer, for:  
Jarrod McNaughton, MBA, FACHE  
Chief Executive Officer

Date: 6/15/2021  
\_\_\_\_\_

By: Eric Stopher  
Vice Chair, IEHP Governing Board

Date: 6/15/2021  
\_\_\_\_\_

Attest: Eric Stopher  
Secretary, IEHP Governing Board

Date: 6/15/2021  
\_\_\_\_\_

Approved as to Form:

DS  
MP

By: Anna W. Wang  
Anna W. Wang  
General Counsel  
Inland Empire Health Plan

Date: 6/15/2021  
\_\_\_\_\_





ATTACHMENT A

BEHAVIORAL HEALTH INTEGRATION INCENTIVE PROGRAM

APPROVED BHI GRANT AWARD SUMMARY AND MILESTONE BUDGET

**BHI Grant Award Summary**

<b>County</b>	<b>Organization</b>	<b>Project Option</b>	<b>Program Readiness</b>	<b>PY 1 up to</b>	<b>PY 2 up to</b>	<b>Total Eligible Funding</b>
Riverside	Riverside University Health System- Behavioral Health	3.5	\$1,025,999.00	\$2,308,498.00	\$2,308,498.00	\$5,642,995.00
Riverside	Riverside University Health System- Behavioral Health	3.6	\$265,094.00	\$596,463.00	\$596,463.00	\$1,458,020.00
			<b>\$1,291,093.00</b>	<b>\$2,904,961.00</b>	<b>\$2,904,961.00</b>	<b>\$7,101,015.00</b>





**BEHAVIORAL HEALTH INTEGRATION INCENTIVE PROGRAM**

**APPROVED MILESTONE BUDGET**

<b>Project #5- Improving Follow-Up after Hospitalization for Mental Illness</b>			
<b>Program Readiness</b>			
<b>Program Readiness Activities</b>	<b>Evidence of Program Readiness Activity</b>	<b>Completion Date</b>	<b>Associated Proposed Incentive Funding</b>
Readiness Tasks: Baseline Reporting Implementation	Development of forms to collect the data for this project and an evaluation outline of the outcomes that will be reported.	Upon execution of the MOU	\$195,000.00
Readiness Tasks: Program Implementation	Provide addresses of the program locations; evidence of ownership of vehicles, laptops and other purchased up front operating expenses (such as air cards, docking stations, monitors and other accessories); administrative planning will be evidenced by providing meeting schedules.	Upon execution of the MOU	\$230,999.00
Readiness Tasks: Program Staff Implementation	Hiring requisitions for program staff including the Supervisor, Research Analyst and others as detailed in the budget.	Upon execution of the MOU	\$350,000.00
Readiness Tasks: Program Infrastructure Implementation	Proof of IT system capability would include purchase of servers, software, data storage and hosting fees.	Upon execution of the MOU	\$250,000.00
<b>Total Amount:</b>			<b>\$1,025,999.00</b>



<b>Project #5- Improving Follow-Up after Hospitalization for Mental Illness</b>			
<b>Project Year 1</b>			
<b>Milestones/Accomplishments</b>	<b>Evidence of Milestone Completion</b>	<b>Completion Date</b>	<b>Associated Proposed Incentive Funding</b>
<b>Quarter 1</b>			
<b>Milestone #1:</b> Establish stakeholder coalition to ensure effective communication and collaboration. The coalition will meet one time prior to 3/31/2021 and then bi-monthly through 12/31/2022.	Sign in sheets and agendas for each meeting	3/31/2021	\$75,000.00
<b>Milestone #2:</b> Stakeholder input from youth, parents and other caregivers, primary care providers, social workers, and other child serving individuals will be gathered through the implementation of stakeholder surveys. 100 surveys will be distributed.	The stakeholder surveys and lists of how and to whom the surveys were distributed. This will include the number of surveys that we distributed.	3/31/2021	\$75,000.00
<b>Total Q1 Amount:</b>			<b>\$150,000.00</b>
<b>Quarter 2</b>			
<b>Milestone #3:</b> Training of 100% of the staff in Motivational Interviewing and Trauma Informed Care will be completed.	Training completion certificates for each staff for Motivational Interviewing and Trauma Informed Care	6/30/2021	\$350,000.00
<b>Milestone #4:</b> Evaluation unit will analyze and report stakeholder survey results. A report will be produced with the results. The report will be presented to the Steering Committee at their first meeting and program design will be adjusted upon findings.	A stakeholder survey report will be generated. Changes to program design as a result will be written into the report.	6/30/2021	\$350,000.00





<b>Total Q2 Amount:</b>	<b>\$700,000.00</b>
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<b>Quarter 3</b>			
<b>Milestone #5:</b> Launch Steering Committee for oversight and accountability of the project. The Steering Committee will meet quarterly.	Sign in sheets and agendas for each meeting	9/30/2021	\$75,000.00
<b>Milestone #6:</b> RUHS-BH management will begin meeting one (1) time per month with hospital leads to develop written policies and procedures.	Sign in sheets, meeting agendas and policies and procedures	9/30/2021	\$150,000.00
<b>Milestone #7:</b> Two Navigation Teams will provide services to youth and families in line with the project goals. A minimum of 40 youth and families will receive navigation services during this quarter.	A service data report will be provided which will indicate the number of youth served as well as the type and number of services provided to each youth	9/30/2021	\$400,000.00
<b>Total Q3 Amount:</b>			<b>\$625,000.00</b>

<b>Quarter 4</b>			
<b>Milestone #8:</b> Evaluation unit will track and report the core metric, Follow Up After Hospitalization for Mental Illness - Ages 6-17. Review target to increase connection to physical and behavioral health by using primary care settings by 2% in Year 1.	Report will be generated that will state the timeliness to follow up after hospitalization. Report will include data for each youth follow up to both behavioral health and physical health care. It will include a comparison of how many of the youth received primary care services pre and post hospitalization.	12/31/2021	\$300,000.00
<b>Milestone #9:</b> Full implementation of the tracking system for referrals to any health care, social services, and other community-based resources.	Screen shots of the tracking system and training sign in sheets for all staff.	12/31/2021	\$300,000.00



<b>Milestone #10:</b> Review number of consumers impacted by project, referrals to specialty care, social services, and other community-based resources. A minimum of 60 unduplicated youth and families will be served in this quarter.	A service data report will be provided which will indicate the number of youth served as well as the type and number of services provided to each youth. Report will be generated from the tracking system which will document the types of referrals made by category.	12/31/2021	\$233,498.00
		<b>Total Q4 Amount:</b>	<b>\$833,498.00</b>
		<b>Total PY 1 Amount:</b>	<b>\$2,308,498.00</b>

<b>Project #5- Improving Follow-Up after Hospitalization for Mental Illness</b>			
<b>Project Year 2</b>			
<b>Milestones/Accomplishments</b>	<b>Evidence of Milestone Completion</b>	<b>Completion Date</b>	<b>Associated Proposed Incentive Funding</b>
<b>Quarter 1</b>			
<b>Milestone #1:</b> Trained Navigation Teams are in place. A minimum of 80 unduplicated youth will be served this quarter.	A service data report will be provided which will indicate the number of youth served as well as the type and number of services provided to each youth	3/31/2022	\$350,000.00
<b>Milestone #2:</b> Full implementation of the tracking system for referrals to any health care, social services, and community-based services. 80% of the youth and families will be referred to at least one (1) resource with 50% of those referrals being followed up on by the youth and/or	Report will be generated from the tracking system that will document the number of referrals per youth and the follow up rate by each youth.	3/31/2022	\$116,749.00





families. This will be evidenced by utilization of the resource.			
<b>Milestone #3:</b> Navigation Team members will attend existing meetings designed to assist with system navigation including the monthly Interdisciplinary Care Team (ICT) meetings with IEHP, Molina and Kaiser. At least one (1) Navigation Team member will attend each of the ICTs each month.	Monthly meeting sign in sheets and meeting agendas for each ICT meeting.	3/31/2022	\$116,749.00
		<b>Total Q1 Amount:</b>	<b>\$583,498.00</b>

Quarter 2			
<b>Milestone #4:</b> Trained Navigation Teams are in place. A minimum of 80 unduplicated youth will be served this quarter.	A service data report will be provided which will indicate the number of youth served as well as the type and number of services provided to each youth	6/30/2022	\$350,000.00
<b>Milestone #5:</b> Full implementation of the tracking system for referrals to any health care, social services, and community-based services. 80% of the youth and families will be referred to at least one (1) resource with 50% of those referrals being followed up on by the youth and/or families. This will be evidenced by utilization of the resource.	Report will be generated from the tracking system that will document the number of referrals per youth and the follow up rate by each youth.	6/30/2022	\$112,500.00
<b>Milestone #6:</b> Consumer satisfaction surveys will be sent to a random sample of 40 consumers on a quarterly basis, both youth and parents, to gain feedback on the program and use the	Copies of the youth and parent satisfaction surveys; a list of individuals the surveys were sent to (in an	6/30/2022	\$112,500.00



information to make changes as needed. 70% of those that respond will rate the services as Satisfactory or higher.	unidentifiable manner); and a report with the overall satisfaction ratings.		
		<b>Total Q2 Amount:</b>	<b>\$575,000.00</b>

Quarter 3			
<b>Milestone #7:</b> Trained Navigation Teams are in place. A minimum of 80 unduplicated youth will be served this quarter.	A service data report will be provided which will indicate the number of youth served as well as the type and number of services provided to each youth	9/30/2022	\$350,000.00
<b>Milestone #8:</b> Full implementation of the tracking system for referrals to any health care, social services, and community-based services. 80% of the youth and families will be referred to at least one (1) resource with 50% of those referrals being followed up on by the youth and/or families. This will be evidenced by utilization of the resource.	Report will be generated from the tracking system that will document the number of referrals per youth and the follow up rate by each youth.	9/30/2022	\$112,500.00
<b>Milestone #9:</b> Consumer satisfaction surveys will be sent to a random sample of 40 consumers on a quarterly basis, both youth and parents, to gain feedback on the program and use the information to make changes as needed. 70% of those that respond will rate the services as Satisfactory or higher.	Copies of the youth and parent satisfaction surveys; a list of individuals the surveys were sent to (in an unidentifiable manner); and a report with the overall satisfaction ratings.	9/30/2022	\$112,500.00
		<b>Total Q3 Amount:</b>	<b>\$575,000.00</b>

Quarter 4			
<b>Milestone #10:</b> Trained Navigation Teams in place. A minimum of 80 unduplicated youth will be served this quarter.	A service data report will be provided which will indicate the number of youth	12/31/2022	\$350,000.00





	served as well as the type and number of services provided to each youth		
<b>Milestone #11:</b> Evaluation unit will track and report the core metric, Follow Up After Hospitalization for Mental Illness - Ages 6-17. Review target to increase connection to physical and behavioral health by using primary care settings by 4% in Year 2.	Report will be generated that will state the timeliness to follow up after hospitalization. Report will include data for each youth follow up to both behavioral health and physical health care. It will include a comparison of how many of the youth received primary care services pre and post hospitalization.	12/31/2022	\$112,500.00
<b>Milestone #12:</b> Steering Committee will receive an overall outcomes report from evaluation unit for review. The report will be disseminated to interested stakeholders.	The overall outcomes report will be completed. Agenda for the Steering Committee will include presentation of the overall outcomes report.	12/31/2022	\$112,500.00
		<b>Total Q4 Amount:</b>	<b>\$575,000.00</b>
		<b>Total PY2 Amount:</b>	<b>\$2,308,498.00</b>

<b>Project #6- Improving Follow-Up after Emergency Department Visit for Behavioral Health Diagnosis</b>			
<b>Program Readiness</b>			
<b>Program Readiness Activities</b>	<b>Evidence of Program Readiness Activity</b>	<b>Completion Date</b>	<b>Associated Proposed Incentive Funding</b>
Readiness Tasks: Baseline Reporting Implementation	Development of data collection methods for this project and an evaluation outline of the outcomes that will be reported.	Upon execution of the MOU	\$66,273.50



Readiness Tasks: Program Implementation	Provide staffing detail for positions funded under this project	Upon execution of the MOU	\$66,273.50
Readiness Tasks: Program Staff Implementation	Hiring requisitions for program staff	Upon execution of the MOU	\$66,273.50
Readiness Tasks: Program Infrastructure Implementation	Office space established with associated equipment (laptops, etc.)	Upon execution of the MOU	\$66,273.50
Total Amount:			\$265,094.00

<b>Project #6- Improving Follow-Up after Emergency Department Visit for Behavioral Health Diagnosis</b>			
<b>Project Year 1</b>			
<b>Milestones/Accomplishments</b>	<b>Evidence of Milestone Completion</b>	<b>Completion Date</b>	<b>Associated Proposed Incentive Funding</b>
<b>Quarter 1</b>			
**NO MILESTONES TO REPORT			\$0.00
<b>Total Q1 Amount:</b>			<b>\$0.00</b>
<b>Quarter 2</b>			
<b>Milestone #1:</b> Begin staff recruitment process. Also, begin communication strategies to build stakeholder coalition and form a stakeholder group to ensure effective communication and collaboration. Solicitation of stakeholder and community input. Meet with ED and Hospital Management.	Hiring requisitions for program staff. Sign in sheets and agendas for each meeting.	4/30/2021	
<b>Milestone #2:</b> Confirm commitment to Steering Committee from stakeholders and launch initial meetings for oversight and accountability of the project. RUHS-BH management will meet with	Sign in sheets and agendas for each meeting.	5/31/2021	\$20,000.00





emergency room leads. The monthly meetings will focus on establishing policies, procedures, and accountabilities to support effective collaboration and ongoing communication.			
<b>Total Q2 Amount:</b>			<b>\$20,000.00</b>

Quarter 3			
<b>Milestone #3:</b> Have 75% of BHNT hired	Hiring requisitions for program staff. Sign in sheets and agendas for each meeting.	7/31/2021	\$200,000.00
<b>Milestone #4:</b> BHNT staff will receive training on Mental Health Assessment and Effective Treatment Planning, Brief BH Screening Tools, Effective Care Coordination, and Available Resources within the IEHP provider network and the RUHS System. Trainings will also include evidence-based practices with particular emphasis on substance abuse screening such as Motivational Interviewing, ASAM B and ASAM C	Training completion certificates for each staff.	7/31/2021	\$86,463.00
<b>Milestone #5:</b> BHNT will receive referrals and start serving consumers.	Referral tracking report.	7/31/2021	\$85,000.00
<b>Milestone #6:</b> 100% BHNT hired and trained.	Training completion certificates for each staff.	8/30/2021	\$125,000.00
<b>Total Q3 Amount:</b>			<b>\$496,463.00</b>

Quarter 4			
<b>Milestone #7:</b> RUHS-BH has the data infrastructure to monitor the core metrics. RUHS-BH will also track referrals to any health care and other community-based resources	Service data and referral tracking report, including outcomes.	9/30/2021	\$80,000.00
<b>Total Q4 Amount:</b>			<b>\$80,000.00</b>

<b>Total PY 1 Amount:</b>	<b>\$596,463.00</b>
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<b>Project #6- Improving Follow-Up after Emergency Department Visit for Behavioral Health Diagnosis</b>			
<b>Project Year 2</b>			
<b>Milestones/Accomplishments</b>	<b>Evidence of Milestone Completion</b>	<b>Completion Date</b>	<b>Associated Proposed Incentive Funding</b>
<b>Quarter 1</b>			
<b>Milestone #1:</b> Full implementation of the tracking system for data collection.	Service data and referral tracking report, including outcomes.	1/31/2022	\$290,000.00
<b>Total Q1 Amount:</b>			<b>\$290,000.00</b>
<b>Quarter 2</b>			
<b>Milestone #2:</b> RUHS-BH management and emergency room leads meet monthly to examine program functioning.	Sign in sheets and agendas for each meeting.	4/31/2022	\$25,000.00
<b>Milestone #3:</b> BHNT members will attend existing meetings designed to assist with system navigation, such as the monthly BHI, CCT and ICT.	Sign in sheets and agendas for each meeting.	4/31/2022	\$20,000.00
<b>Total Q2 Amount:</b>			<b>\$45,000.00</b>
<b>Quarter 3</b>			
<b>Milestone #4:</b> The Steering Committee will evaluate program effectiveness and outcomes.	Sign in sheets and agendas for each meeting.	10/31/2022	\$35,463.00
<b>Total Q3 Amount:</b>			<b>\$35,463.00</b>
<b>Quarter 4</b>			
<b>Milestone #5:</b> BHNT staff will continue to provide services to youth and adults.	A service data report will be provided which will indicate the number of consumers served as well as the type and number of services provided	12/31/2022	\$91,000.00





<b>Milestone #6:</b> BHNT will build collaborative relationships with health care and community providers.	Sign in sheets and agendas for each meeting, presentations.	12/31/2022	\$25,000.00
<b>Milestone #7:</b> Completion of metric reporting and submission to IEHP	The overall outcomes report will be completed and presented IEHP and interested stakeholders.	12/31/2022	\$110,000.00

<b>Total Q4 Amount:</b>	<b>\$226,000.00</b>
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<b>Total PY2 Amount:</b>	<b>\$596,463.00</b>
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