

Top Tips for Behavioral Health Integration

Explore and share the top 3 tips collaboratively created by CalHIVE BHI Participants during the 2026 CalHIVE BHI Convening.

PHQ-9 Screening

1. **Automated processes – pre visit portal screening.** Teams could encourage patients to complete screening themselves.
2. **Screening is inclusive of instructions for immediate help** when patients screen positive. This can help staff feel more comfortable.
3. **Clearly and visibly displayed results in EMR for visit team.**

BHI Billing & Coding

1. **Cross-team training (providers, coders, rev cycle)** that includes detailed coding workflows for various staff positions. Focus on training sessions and a way for end users to give feedback for process improvement.
2. **Routine reporting (quarterly at minimum),** but more frequently if possible.
3. **Provider enrollment with payer confirmation.** Essential when starting to bill for care provided.

BHI Staffing

1. **Building relationships in the community that helps us find & attract the right people for the jobs (higher education, like-minded orgs).** Explore pipeline training opportunities.
2. **Very clear, detailed job descriptions + scenario-based interviewing,** which will make performance expectations and review easier. Be clear but stay flexible in training staff.
3. **Benefits such as inclusive, warm culture, ongoing training, mentorship, growth opportunities & BH supervision.** Encourage cross-discipline relationships to support team culture.

BHI Workflows

1. **Share workflows with a kickoff meeting to help train & create buy-in.** It is important to involve key stakeholders early and in the development of workflows. Focus on incorporating sample clinical scenarios into the training and be prepared to train and retrain.
2. **Create detailed and robust training materials that are flexible and can be edited based on need.** Keep in easily accessible place where people often look.
3. **Involve feedback from all stakeholders (staff, physicians, operations, etc.)**

Patient and Provider Engagement

1. **Champions, trust and buy in.** For providers, try to set up a regularly occurring meeting to focus on team-based approach and addressing more difficult cases. For patients, focus on removing stigma around accessing care.
2. **Sharing the story and telling the data.** Use patient stories and examples to support your successes.
3. **Culturally and linguistically tailored BH care.** This can look different for various populations, ensure staff and patients are informed of expectations.

Program Sustainability and Spread

1. **Marathon, not a sprint AND everything moves at the speed of the RELATIONSHIP!** Focus on leadership buy – in and invest in regular check – ins and tracking of finances of the program.
2. **Clear job descriptions, with open and honest expectation setting.** Ensure that roles are defined and you provide training for non-BH staff on BH.
3. **Engage ALL other disciplines!** It would be great to include patient examples for each department.