

#NCQASUMMIT

NCQA
HEALTH ———
INNOVATION
————— SUMMIT

October 13-15, 2025 | **San Diego, CA**

THIS IS QUALITY

Integrated Behavioral Health

Lessons from Two Real-World Implementations



AGENDA

- 10:00 a.m. – Welcome & Introductions
- 10:05 a.m. – San Luis Walk-in Clinic
- 10:20 a.m. – Lessons from the CQC's CalHIVE BHI Program
- 10:35 a.m. – Q&A
- 10:45 a.m. – Session Concludes

Learning Objectives

By the end of this session, you will be able to:

1. Define measurement strategies, implement integrated workflows and approaches to sustain behavioral health integration across diverse settings.
2. Identify opportunities to enhance the development of measures monitoring the utilization and financial health of integrated behavioral health services.

Impact and Sustainability of Behavioral Health Integration

Lessons from CQC's CalHIVE BHI program



California Quality
Collaborative

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

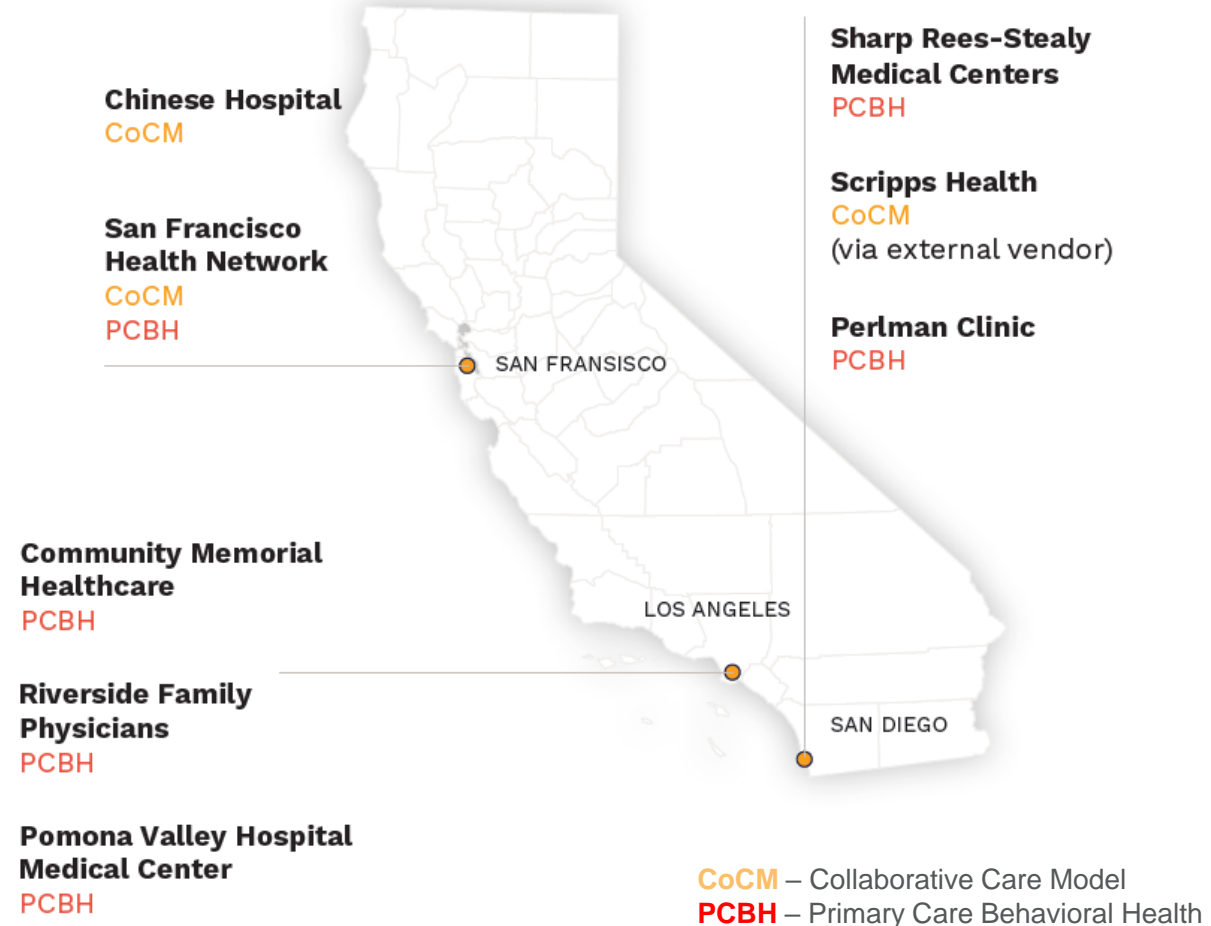
- Launched in 2007, CQC is a **multi-stakeholder quality improvement** program of the Purchaser Business Group on Health.
- **Aligns priorities and coordinates activities** across partners for greater collective impact.
- **Identifies and spreads best practices** across the outpatient delivery system in California.
- **The program trains 2,000 individuals** from 250+ organizations each year
- CQC's track record includes **20% relative improvement** in clinical outcomes and **10:1 ROI**

CalHIVE BHI (2023-2026)

A multi-year improvement collaborative to facilitate the integration of behavioral health (BH) services into the primary care setting. The collaborative aims to:

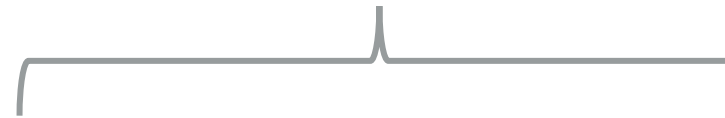
- Define and implement an integration pathway for each participant
- Increase access to BH services to support the management of depression and other disorders
- Improve BH and chronic disease outcomes across key indicators

CalHIVE BHI's participants provide care to 730,000 Californians across all major payers



Measuring the Impact of Integrated Care

Bridging the gap between clinical outcomes & sustainable BH services



Global Reporting		
1.	Depression Screening and Follow-Up	DSF-E
2.	Depression Remission or Response	DRR-E
3.	Glycemic Status Assessment for Patients with Diabetes	GSD

+

Pilot Site Reporting	
1.	Implementation Plan Measure
2.	Implementation Plan Measure

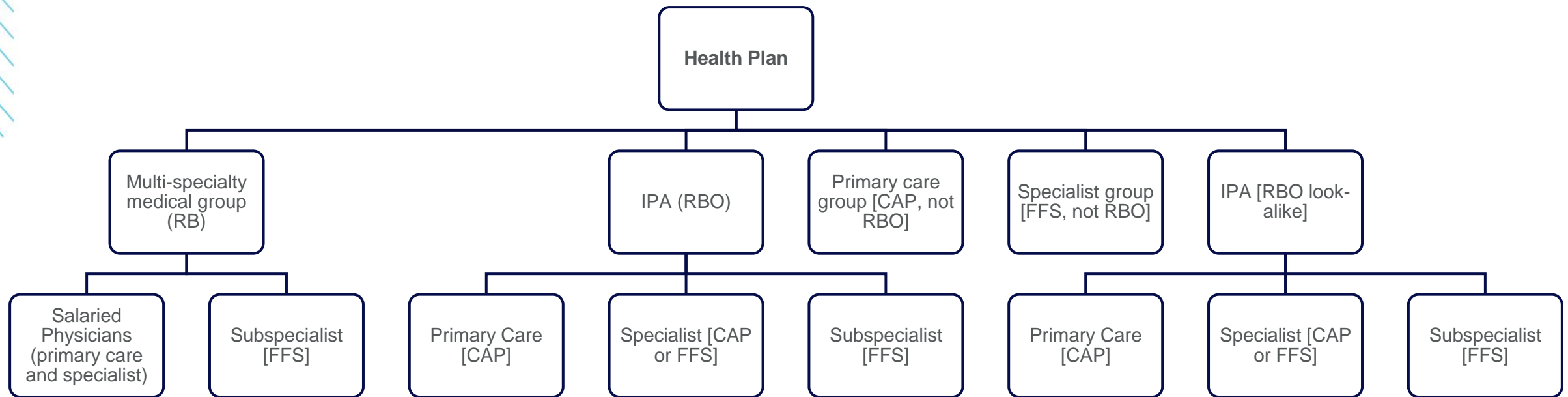
Global Reporting: Measure performance data reported across rolling 12 months measurement periods for the entire primary care network (includes pilot site)

Pilot Site Reporting: Measure performance data reported only for the pilot site. Measures focus on utilization of BH services and financial metrics

A Focus on Utilization & Reimbursement

Category – Definition	Measures	Stratification
<p>Utilization – Understand the ongoing utilization of BH services with primary care clinic</p>	<p>CalHIVE BHI examples:</p> <ul style="list-style-type: none"> • Volume of referrals • Scheduled first appointments • Engagement with Behavioral Health Consultant (BHC) 	<ul style="list-style-type: none"> • Primary care provider (care team) • Behavioral or physical condition (depression, anxiety, substance abuse)
<p>Financial – Understand reimbursement of BH services</p>	<p>CalHIVE BHI examples:</p> <ul style="list-style-type: none"> • Billed versus paid claims • Timeliness of payment (30, 60, 90 days) • Amount reimbursed vs billed 	<ul style="list-style-type: none"> • Payer • CPT Codes (Model Specific)

California | System Fragmentation Layers



Source: [California Health Care Foundation, California's Physician Practice Landscape \(2022\)](#)

Notes:

- CAP - Capitated
- FFS - Fee for Service
- IPA - Independent Practice Association
- RBO - Risk-bearing Organization

Key Takeaways

In conclusion of this session, you have learned:

- Integration is possible regardless of your setting or payer mix
- Engage payers early and often to resolve reimbursement issues
- Monitoring the ongoing utilization of BH services and financial return is critical to sustain these models of care



CQC Discussion Question

- What recommendations would you have for organization looking to begin the process to integrate behavioral health into primary care?





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