

# BH-CONNECT Workforce Initiative

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- The Workforce Initiative will support the training, recruitment and retention of behavioral health practitioners to provide services across the continuum of care.
- Between 2025 and 2029, in partnership with the Department of Health Care Services (DHCS) and HCAI will invest up to \$1.9 billion in five workforce programs.
- Recipients of workforce funding will commit to serving Medi-Cal members living with significant behavioral health needs for 2-4 years.
- The state may carry unused workforce initiative expenditure authority from one year to the next. After Demonstration Year 2, the state may redistribute up to 30% of Workforce Initiatives funding across programs.



# **BH-CONNECT Workforce Programs**

Medi-Cal Behavioral Health Student Loan Repayment Program

Medi-Cal Behavioral Health Scholarship Program

Medi-Cal Behavioral Health Recruitment and Retention Program

Medi-Cal Behavioral Health Community-Based Provider Training Program

Medi-Cal Behavioral Health Residency Training Program

# Eligible Professions

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## Professions

Licensed providers with prescribing privileges

Non-prescribing associate level pre-licensure practitioners

Non-prescribing licensed practitioners

Non-prescribing certified behavioral health providers

Providers and practitioners that meet the California Medicaid State Plan, such as:

- Community Health Worker services
- Rehabilitative Mental Health services
- Substance Use Disorder Treatment services
- Expanded Substance Use Disorder Treatment services

*Non-exhaustive list*

# Eligible Sites

## Sites\*

Federally Qualified Health Centers (FQHC)

Community Mental Health Centers (CMHC)

Rural Health Clinics (RHC)

Settings with the following payer mix:

- Hospitals with 40 percent or higher Medicaid and/or uninsured population
- Rural hospitals with 30 percent or higher Medicaid and/or uninsured population
- Other behavioral health settings with 40 percent or higher Medicaid and/or uninsured population

*To fulfill the full-time service commitment, qualified practitioners may work at a single organization, or hold part-time positions across multiple provider organizations, so long as all organizations meet the safety net setting definition in STC 6.1(a) (available at <https://www.dhcs.ca.gov/CalAIM/Documents/BH-CONNECT/BH-Connect-STCs.pdf>)*

**\*Service commitments** must be fulfilled in these types of **safety net settings**.

# Medi-Cal Behavioral Health Student Loan Repayment Program

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This program facilitates awards to behavioral health professionals with educational debt:

- Licensed, prescribing behavioral health practitioners are eligible for up to \$240k in loan repayment; four-year service obligation
- Non-prescribing licensed or associate level pre-licensure practitioners are eligible for up to \$180K; four-year service obligation
- Non-licensed, non-prescribing practitioners, including SUD Counselors, Community Health Workers, Peer Support Specialists and Wellness Coaches are eligible for up to \$120K: service obligation:
  - \$20K or greater is four years
  - \$10K - \$20K is three years
  - Less than \$10K is two years

# **Medi-Cal Behavioral Health Scholarship Program**

This program facilitates access to scholarships and certificates to individuals pursuing behavioral health degrees or certifications:

- Individuals participating in educational programs to become licensed, prescribing behavioral health practitioners are eligible for up to \$240K in scholarship funding; four-year service obligation
- Individuals participating in educational programs to become non-prescribing licensed practitioners are eligible for up to \$180K; four-year service obligation
- Individuals participating in educational programs to become non-prescribing, non-licensed practitioners are eligible for up to \$120K; four-year service obligation:
  - \$20K or greater is four years
  - \$10K - \$20K is three years
  - Less than \$10K is two years
- Scholarships will be awarded directly to the education or training institution

# Medi-Cal Behavioral Health Recruitment and Retention Program

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Eligible settings may receive funding to:

- Provide recruitment bonuses of up to \$20,000
- Provide retention bonuses of up to \$4,000 each
- Provide bonuses of up to \$50,000 per individual to support students completing required training in advance of their final year of education
- Provide up to \$1,500 per practitioner to cover licensing or certification fees
- Support supervision hours of pre-licensure or pre-certificate practitioners (up to \$35,000 per year)
- Cover backfill costs to support behavioral health practitioners receiving training in Evidence Based Practices
- Recruitment and retention service obligations:
  - \$20K or greater = four years
  - \$10K - \$20K = three years
  - Less than \$10K = two years

# Medi-Cal Behavioral Health Community-Based Provider Training Program

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This program facilitates grants to organizations to support the development of community-based providers such as SUD Counselors, Community Health Workers, and Peer Support Specialists

- Training programs may receive up to \$10,000 per individual to train Alcohol or Other Drug Counselors, Community Health Workers and Peer Support Specialists; funds may be used for:
  - Program tuition and required program fees for course curriculums necessary to achieve the professional titles of Alcohol or Other Drug Counselor
  - Community Health Worker or Peer Support Specialist
  - Textbooks and supplies as required by the educational program curriculum
  - Professional exam fees and certification or licensure costs
- Requires 3-year full-time service obligation for qualified individuals receiving this support

# Medi-Cal Behavioral Health Residency Training Program

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- This program facilitates up to \$250K in awards for residency programs to expand the number of graduate medical education slots for:
  - General Psychiatry residency
  - Child Psychiatry fellowships
  - Addiction Psychiatry/Addiction Medicine fellowships
- Funds pay resident and fellowship salaries
- Requires residents and fellows to participate in the Medi-Cal Behavioral Health Student Loan Repayment Program during their residency/fellowship with a four-year service obligation requirement after graduation

# BH-CONNECT Budget and Timeline: Indicative

Program	Total
Behavioral Health Scholarship Program	\$234,000,000
Behavioral Health Student Loan Repayment Program	\$530,000,000
Behavioral Health Recruitment and Retention Program	\$966,000,000
Behavioral Health Community-Based Provider Training Program	\$85,000,000
Behavioral Health Residency Program	\$85,000,000
<b>Total</b>	<b>\$1,900,000,000</b>

	2025	2026	2027	2028	2029
Behavioral Health Student Loan Repayment Program	Jul Launch				
Behavioral Health Residency Program	~Sep Launch				
Behavioral Health Scholarship Program		Q1 Launch			
Behavioral Health Community-Based Provider Training Program		Q1 Launch			
Behavioral Health Recruitment and Retention Program		Mid 2026 Launch			

# Stakeholder Engagement

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- Current Completed/Planned Engagements:
  - Behavioral Health Task Force (January 2025)
  - California Behavioral Health Planning Council (January 2025)
  - HCAI Behavioral Health Advisory Committee (Feb 2025)
  - DHCS-Behavioral Health Stakeholder Advisory Committee (Feb 2025)
  
- Does the Council have any recommendations for further engagement?

# 2026-2030 Workforce Education and Training (WET) Five-Year Plan

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- State law\* requires HCAI to develop a plan every five years that describes the workforce requirements for serving people with chronic behavioral health conditions and how available funds will address workforce shortages.
- HCAI will work with the California Behavioral Health Planning Council to finalize and approve the plan for final publication by HCAI.
- The WET Plan was a part of the Mental Health Services Act (MHSA) adopted in 2004 as Proposition 63. This requirement continues under the Behavioral Health Services Act (BHSA) that was approved by the voters as Proposition 1 in March 2024, and now includes addressing workforce needs and shortages around serving people with chronic substance use disorders.
- The BHSA also provides a 3% set-aside to fund workforce development. After meeting the state matching requirements for the BH-CONNECT Workforce Initiative, a portion of these funds would be used to fund the activities of the 2026-2030 WET Five-Year Plan.

\*Welfare and Institutions Code Sections 5820-5822.

# 2026-2030 Five-Year BHSA WET Plan Work Plan Timeline

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	
1. Background Information for Stakeholder Engagement Process	■																
2. Conduct Stakeholder Engagement				■													
3. Prepare First Draft of WET Plan for internal HCAI review						■											
4. Secure CBHPC Workforce and Employment Committee review and approval*; revise as necessary								▲	■								
5. Secure CHHSA review and approval of Draft; revise as necessary										▲	■						
6. Secure CBHPC Full Council review and approval**; revise as necessary													▲	■			
7. Publish FINAL WET Plan																	▲
8. High-Level Presentation to the HCAI Health Workforce Education and Training Council																	▲
* Off-calendar meeting. ** Mid-April 2026 scheduled meeting																	

# WET Plan Stakeholder Engagement Organizations and Other Groups

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## Community and Consumers

- Consumers and Family Members and Organizations and Groups representing Consumers and Family Members

## Statewide and local public agencies and orgs.

- State and Local Government Agencies and Commissions

## Non-governmental orgs. and associations

- Professional Associations, including Peer Support Specialist-Run Organizations
- Associations representing Non-Profit Service Providers
- Housing and Other Organizations Serving Chronically Homeless Individuals who have Chronic Behavioral Health Conditions
- Educational Institutions and Training Organizations that prepare providers to deliver care
- Educational Institutions and Training Organizations that prepare providers to deliver care
- Criminal and Juvenile Justice Organizations and Agencies

**All Groups:** Subject matter experts in the field of SED/SMI needs and services

# WET Plan Stakeholder Engagement Process

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## Focus groups:

- Topic-Focused
- State-wide and Regional (frontier, rural, urban)

## Individual Interviews Representing

- Key Organizations/Agencies
- Subject Matter Experts
- Consumers and Their Representatives

## Other Convenings as Necessary

## Engagement Topics

1. Consumer Perceptions of Care
2. Pipelines and Pathways
3. Education and Training
4. Workplace Well-Being
5. Retention and Attrition
6. Diversity and Equity
7. Work-Based Learning
8. Credentialing and Licensing
9. Technology & Telehealth Impact
10. Innovation