

Medi-Cal Behavioral Health Student Loan Repayment Program (MBH-SLRP) Technical Assistance Guide

Department of Health Care Access and Information

July 2025

Background and Mission

- HCAI is offering this Medi-Cal Behavioral Health Student Loan Repayment Program (MBH-SLRP)
 as part of the Behavioral Health Community-Based Organized Networks of Equitable Care and
 Treatment (BH-CONNECT) Workforce Initiative. The program is committed to expanding access to
 critical mental health and substance use disorder services across California.
- The goal of the MBH-SLRP is to expand the availability of behavioral health professionals in Medi-Cal safety net settings by alleviating student loan burdens and incentivizing practice in these settings.
- Behavioral health professionals who commit to providing services to Medi-Cal enrollees and underserved communities have an opportunity to reduce their educational loan debt. Eligible behavioral health practitioners can receive up to \$240,000 in loan repayment with a commitment to a multi-year service obligation.



Application Release Dates

Informational Webinar: July 9, 2025 and July 10, 2025

Application released: July 1, 2025

Application deadline: August 15, 2025

Applications open and close at 3:00 p.m.



Before You Apply

- Applicants must agree to the terms and conditions before receiving funds.
- HCAI will not make changes to the terms and conditions specified in the Grant Agreement.
- Funds shall not supplant existing state or local funds.



Information to Gather

- Employer contact information so they can be sent an Employment Verification Form (EVF).
- If you worked or volunteered for the State of California in the past, you will need to submit a **Conflict-of-Interest (COI)** letter (a template is available at the end of the application).
- A copy of your unofficial transcript.
- A professional license or certificate number (if the category requires it).
- Loan servicer information which should include the following: Lender account number, origination date, loan servicer, current balance, repayment amount requested, and most current eligible loan statement(s).
- Two additional points of contacts which will include their full name, phone number and email.
- National Provider Identification number.



Available Funding

- Total MBH-SLRP Funding Available is \$90,100,000
- Up to \$120,000 per certified practitioner, including AOD (Alcohol and Other Drugs) Counselors, Certified Peer Support Specialists, Certified Wellness Coaches, Community Health Workers (Promotores/ Representatives), and Mental Health Rehabilitation Specialists.
- Up to \$180,000 per non-prescribing licensed or associate level pre-licensure practitioner, including Associate
 Clinical Social Workers, Associate Marriage and Family Therapists, Associate Professional Clinical
 Counselors, Licensed Clinical Psychologists, Licensed Clinical Social Workers, Licensed Marriage and Family
 Therapists, Licensed Professional Clinical Counselors, Licensed Psychiatric Technicians, Licensed Vocational
 Nurses, Occupational Therapists, Psychology Associates, and Registered Nurses.
- Up to \$240,000 per licensed practitioner with prescribing privileges, including Addiction Medicine Physicians, Psychiatrists, Addiction Psychiatrists, Child and Adolescent Psychiatrists, Nurse Practitioners, and Physician Assistants.



Helpful Resources

- 2025 MBH-SLRP Homepage
- 2025 MBH-SLRP Grant Guide
- 2025 MBH-SLRP Application



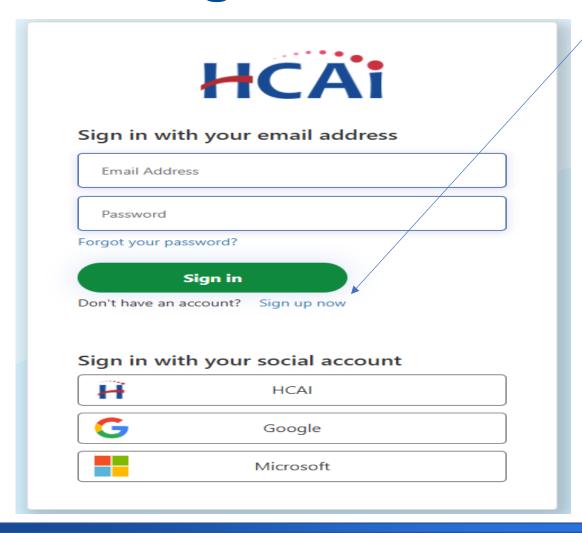


Apply Today



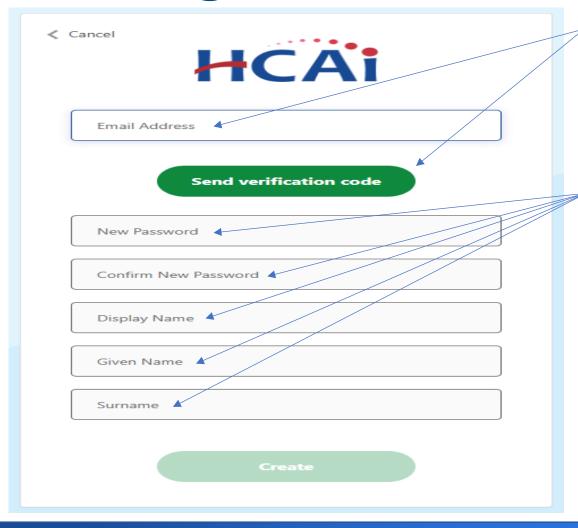


If you are a **new** applicant, click "**Log In**".



If you are a new applicant, click "Sign up now".

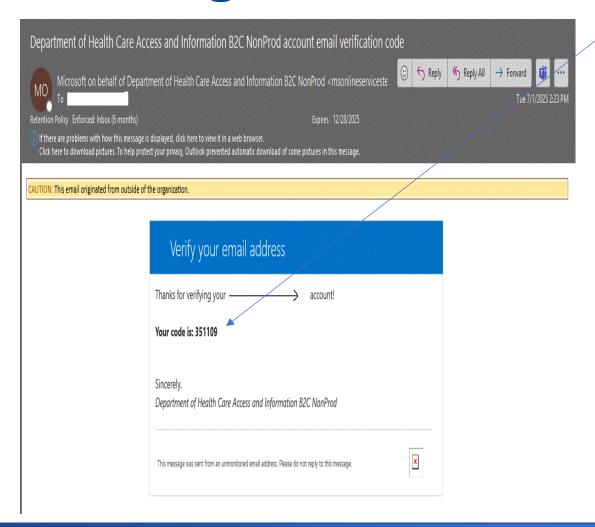




If you are a new applicant, HCAI will need to confirm your email address. Type in your email address and click the "**Send verification code**" button.

Once you receive the verification code that HCAI sends you via email, then you may proceed and complete the remaining fields. Click the "Create" button once completed.





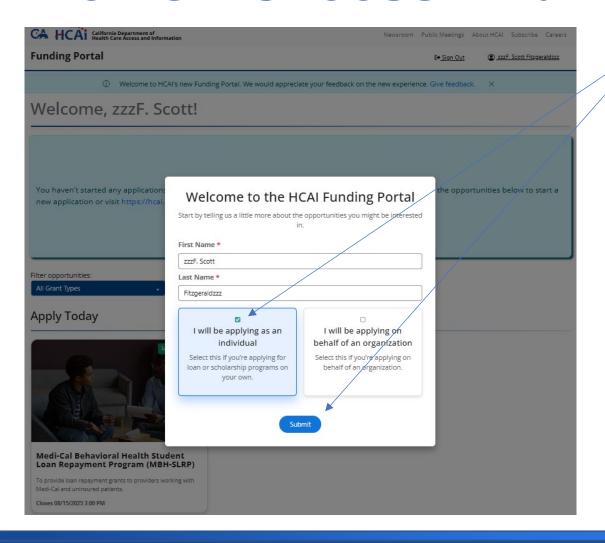
This is an example of the verification code email. You may need to check your junk or spam folder. Save the customized code to continue setting up your account.



Creating an MBH-SLRP Profile



Profile - Choose "Individual"

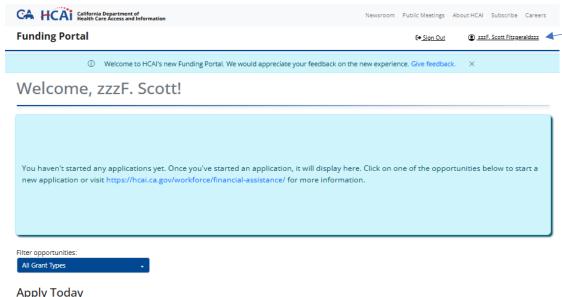


If you are applying for the Medi-Cal Behavioral Health Student Loan Repayment Program (MBH-SLRP), please click "I will be applying as an individual" and then select "Submit".

The option to choose "organization" leads to other HCAI grant opportunities and will take you away from the MBH-SLRP application. Please <u>do not</u> select that option.



Profile – Recommend Completing Profile



Apply Today



Medi-Cal Behavioral Health Student Loan Repayment Program (MBH-SLRP)

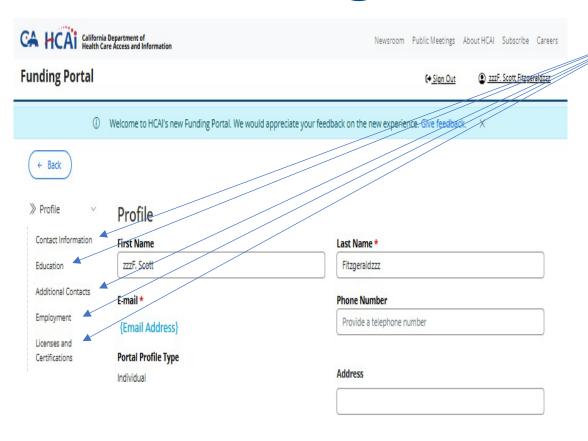
To provide loan repayment grants to providers working with

Closes 08/15/2025 3:00 PM

If you are applying for the Medi-Cal Behavioral Health Student Loan Repayment Program (MBH-SLRP), you should complete your personal profile first. This will save you some time and effort later in the application process. To do so, please **click your name**.



Profile - Navigation

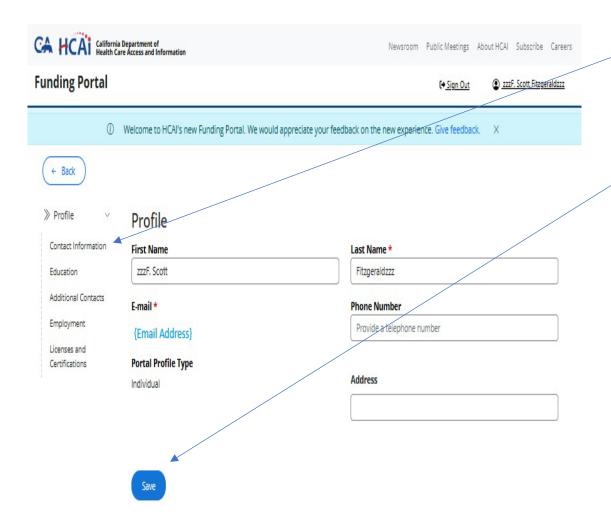


Please complete these fields below. If you made a mistake entering any information on the verification page, the information entered here will override the previously submitted information.





Profile - Contact Information

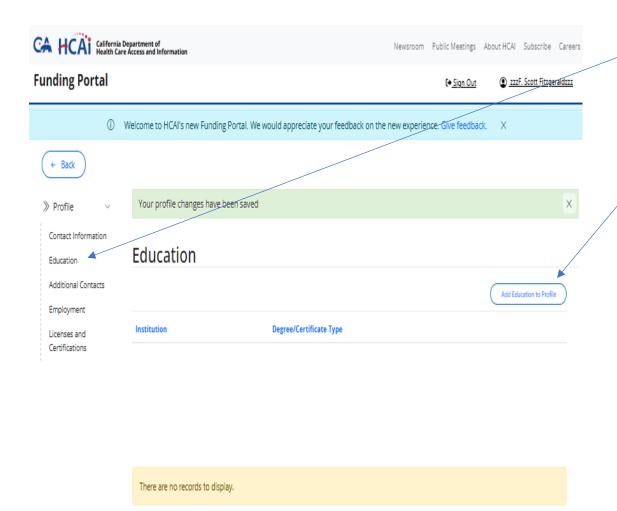


The first profile question requires collecting your personal contact information. To navigate please select "Contact Information" in the left margin and complete the fields.

When you are done, please select "Save".



Profile - Education

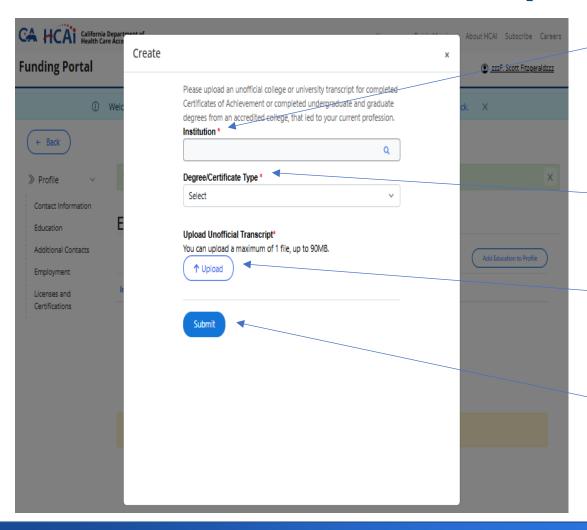


The first profile question requires collecting your personal contact information. Please select "**Education**" in the left margin and complete the fields.

Please click "Add Education to Profile". Clicking this will result in a pop-up box. See pop-up example on next slide.



Profile - Education (Continued)



Institution: The search feature provides a list of schools to choose from. There are hundreds of schools to choose from on this list. Note: If you do not see your school on the drop-down list, please select "**Other**" and type in the name of your school.

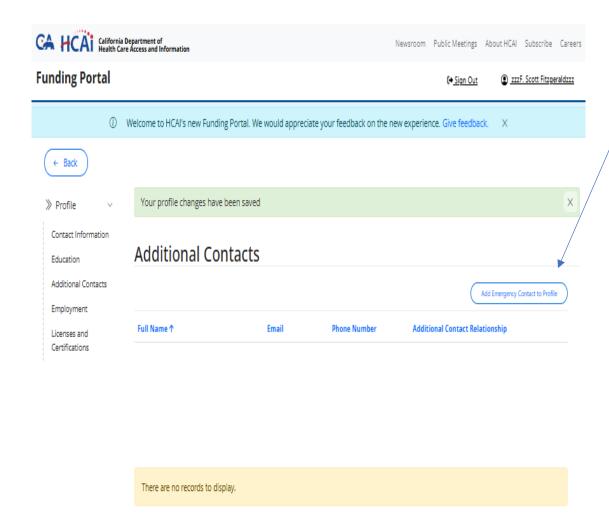
Degree/Certificate Type: Associate, Bachelor's, Certificate of Achievement, JD, Master's, MD, PhD/PsyD

Upload Unofficial Transcript: A copy of your unofficial transcript is needed by HCAI for consideration in issuing a possible award.

Please click "Submit".



Profile - Additional Contacts

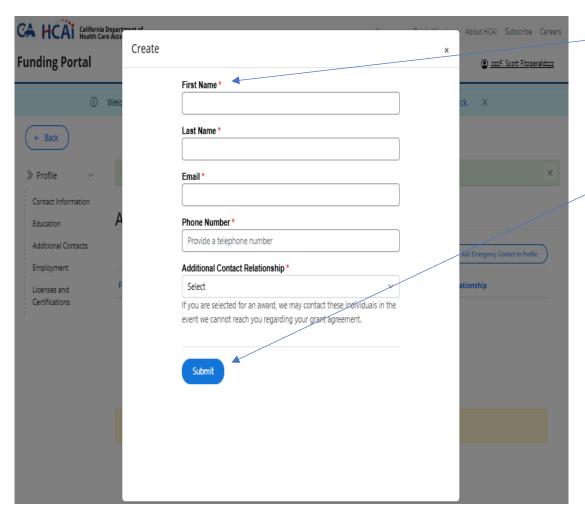


Please click "Add Emergency Contacts to Profile". Clicking this will result in a pop-up box.

Reminder: You will need to add two contacts later in the application. See pop-up example on next slide.



Profile – Additional Contacts (Continued)

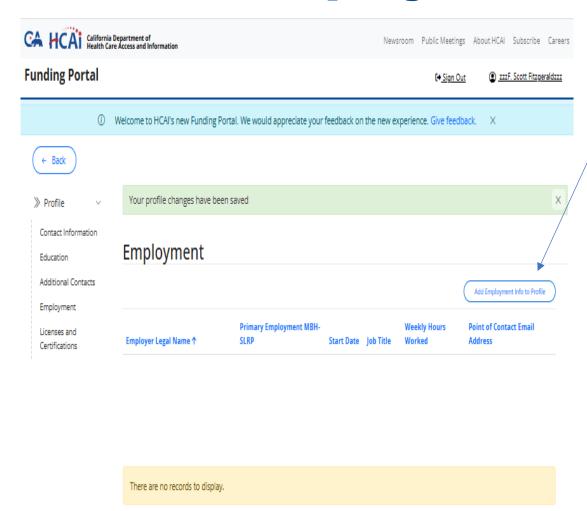


The purpose of this page is to collect two additional contacts in case HCAI cannot reach you.

When you have added the additional contact information, please click "**Submit**".



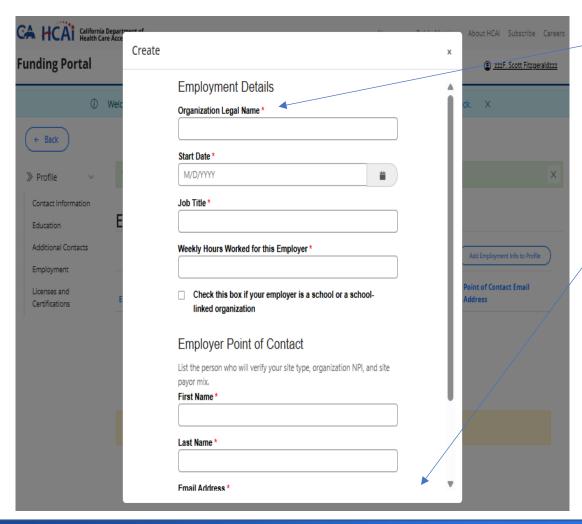
Profile – Employment



Please click "Add Employment Info to Profile". Clicking this will result in a pop-up box. See pop-up example on next slide.



Profile – Employment (Continued)



The purpose of this page is to collect your current employment information which should be an eligible profession for the grant opportunity that you are applying for.

When you have added your employment information (which will include a contact person who will need to verify your employment information), please click "**Submit**".

IMPORTANT: If you finish and submit your application, the employment contact person you entered here will be contacted via email. Contacting your employer is a required step in the grant process.



Profile – Employment (Follow-Up)



Hi (Employment Contact Person's Name),

Your employee, {Your Name}, has applied to HCAI's Medi-Cal Behavioral Health Student Loan Repayment Program. As part of the application we must verify {Your Name} employment.

Please fill out and submit an Employment Verification Form for the listed employee within 5 business days of this email using this link.

Thanks, HCAI Team

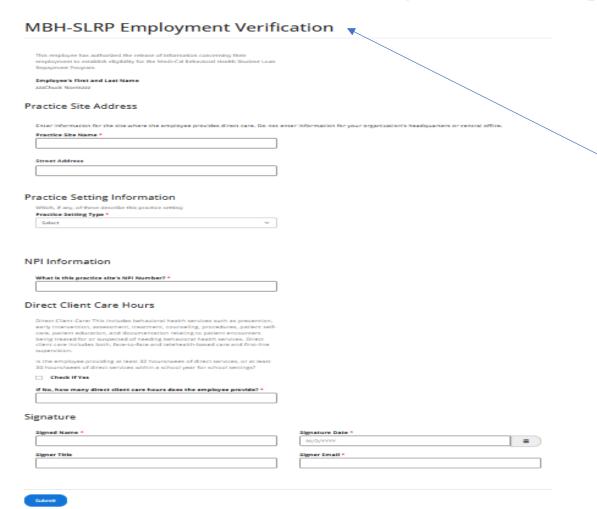
IMPORTANT: You will not see this, nor be sent a copy.

 Your employer's contact person will receive an email that looks like this.

See next slide for what the employer contact will see when they click this link.



Profile – Employment (Follow-Up)

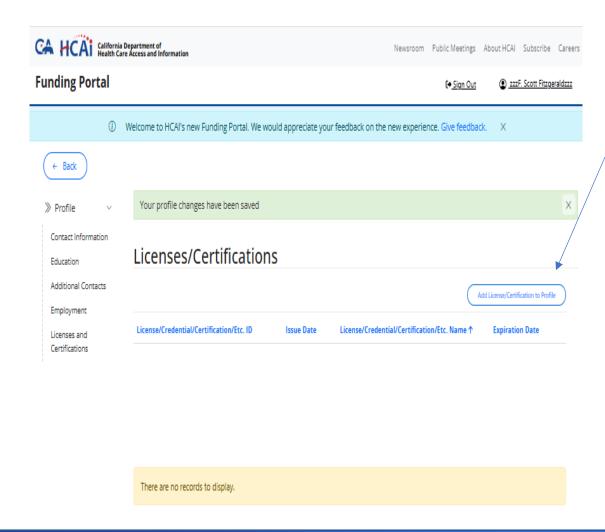


IMPORTANT: You will not see this, nor be sent a copy. There is nothing for you to complete. Your employer contact must complete and submit this information to HCAI.

After clinking the link that was provided to your employer contact via email, it will open a portion of the application specifically assigned to them, and this is what they would see.



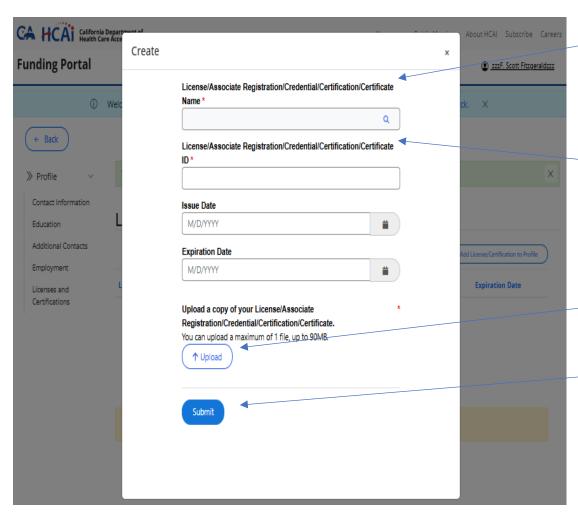
Profile - Licenses/Certifications



Please click "Add your License/Certification to Profile" to your profile. Clicking this will result in a pop-up box. See pop-up example on next slide.



Profile - Licenses/Certifications (Continued)



License/Associate

Registration/Credential/Certification/Certificate: HCAI provides a dropdown list of professions for you to choose from. Choose the one that best fits this program's requirements.

License/Associate

Registration/Credential/Certification/Certificate ID:

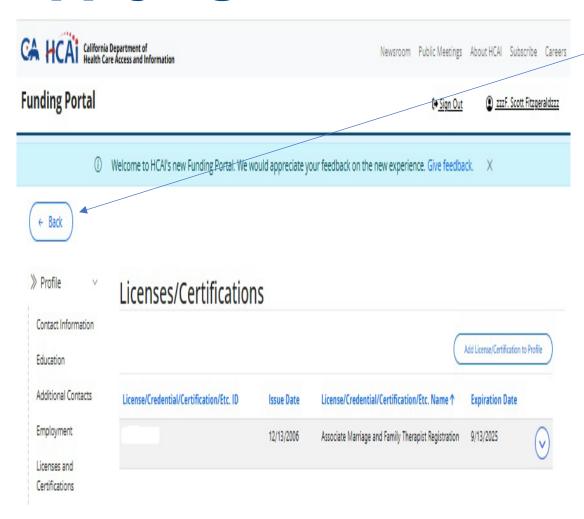
Provide your license or certificate number most appropriate for this program.

Please upload the copy of the license or certificate, in case HCAI is unable to verify the number you provided in the prior question.

Please click "Submit".



Applying – Part 1



When you have completed all the sections of your profile, you may begin your application. To navigate to the start of the application from here, please click "**Back**".



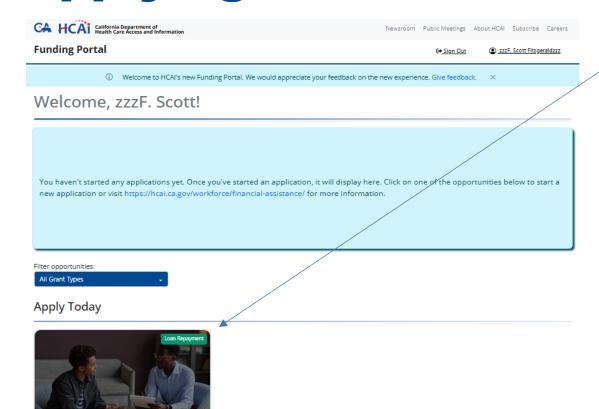
Applying – Part 2

Medi-Cal Behavioral Health Student Loan Repayment Program (MBH-SLRP)

To provide loan repayment grants to providers working with

Medi-Cal and uninsured patients.

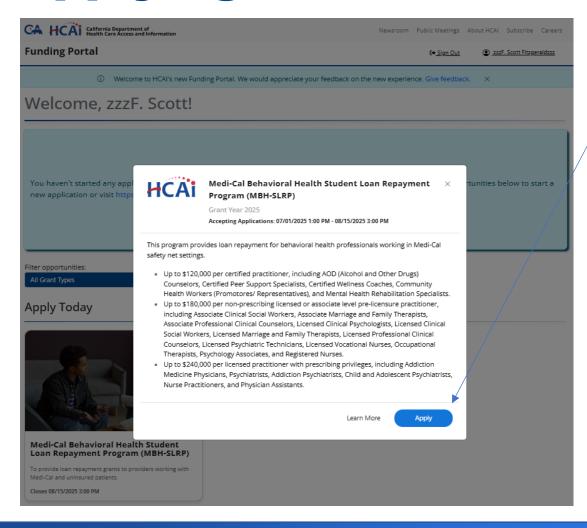
Closes 08/15/2025 3:00 PM



You may begin your application by clicking on the Medi-Cal Behavioral Health Student Loan Repayment Program (MBH-SLRP) icon.



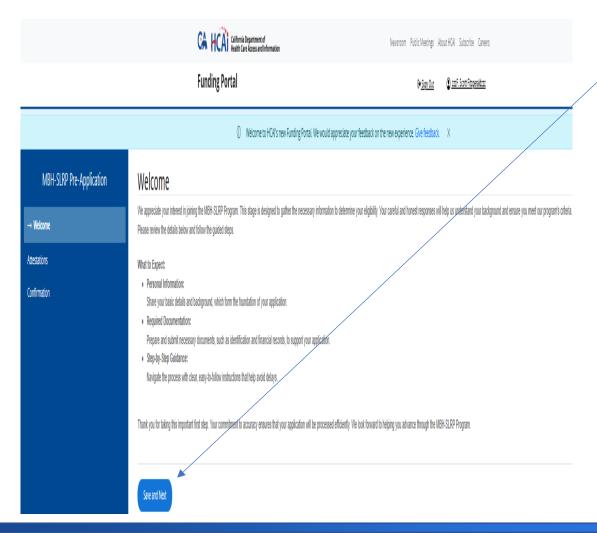
Applying – Part 3



After clicking on the Medi-Cal Behavioral Health Student Loan Repayment Program (MBH-SLRP) application popup, please read the information regarding eligible professions and award amounts and click "**Apply**" to start the application process.



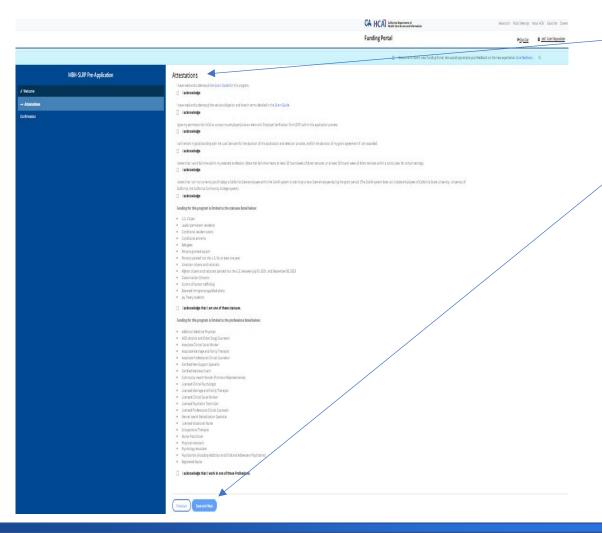
MBH-SLRP Welcome Page



This page outlines what to expect in the application process. Please click "Save and Next" once you have read and are ready to proceed.



MBH-SLRP Attestations Page

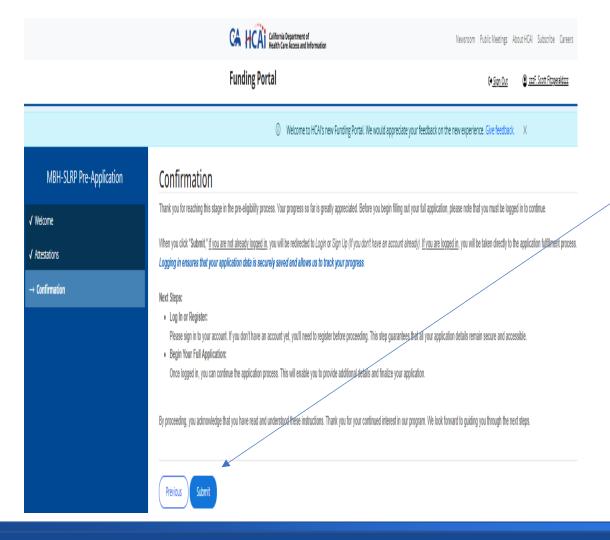


This is the attestations page. Please read all the options carefully. Checking all the boxes is necessary to move forward with your application.

Please click "**Save and Next**" after you have checked all the acknowledgements.



MBH-SLRP Confirmation Page



This is a final confirmation to ensure that you are logged in and have a profile set-up.

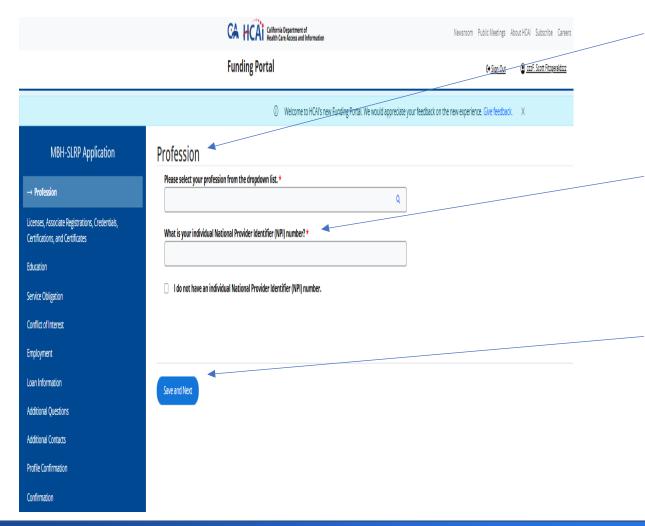
Please click "Submit" once you are ready to proceed.



Starting the MBH-SLRP Application



MBH-SLRP Profession Page



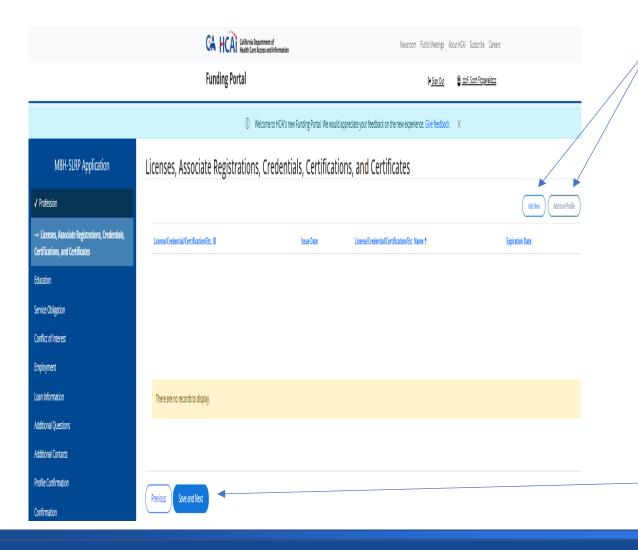
Profession: Select a profession from the dropdown list.

National Provider Identifier (NPI): If you have an NPI, please provide it, or click the "I do not have an individual National Provider Identifier (NPI) number".

Please click "Save and Next" when complete.



MBH-SLRP Licenses and Certifications



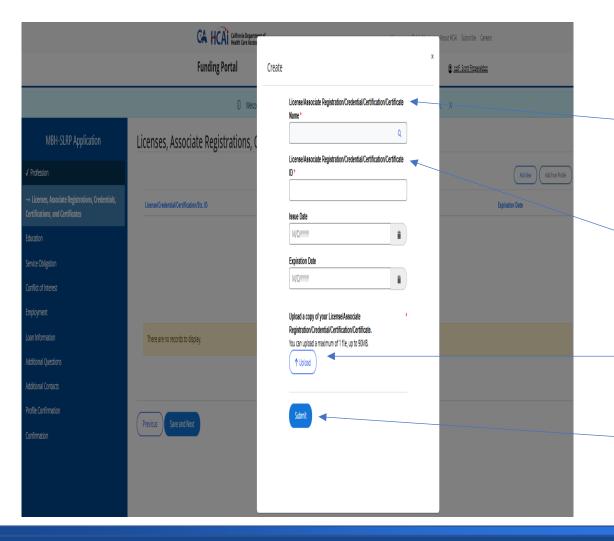
Here you are presented with two options. If you already provided your license or certification in the profile page, you could save time by importing that information. To do so click "Add from Profile". If you did not add this information to your profile, click "Add New" and a pop-up will appear.

See pop-up example on next slide.

Please click "Save and Next" when complete.



MBH-SLRP Licenses and Certifications (Continued)



If you selected "**Add New**" from the Licenses and certifications page, it would have resulted in a pop-up that looks like this.

License/Associate

Registration/Credential/Certification/Certificate: HCAI provides a dropdown list of professions for you to choose from. Choose the one that best fits this program's requirements.

License/Associate

Registration/Credential/Certification/Certificate ID:

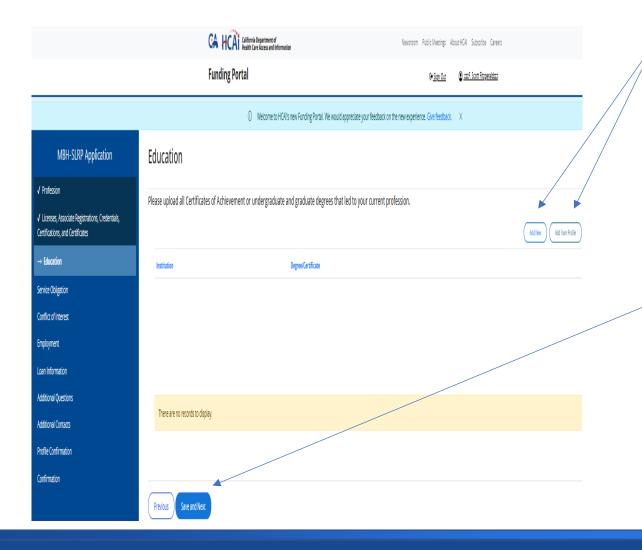
Provide your license or certificate number most appropriate for this program.

Please upload the copy of the license or certificate, in case HCAI is unable to verify the number you provided in the prior question.

Please click "Submit".



MBH-SLRP Education

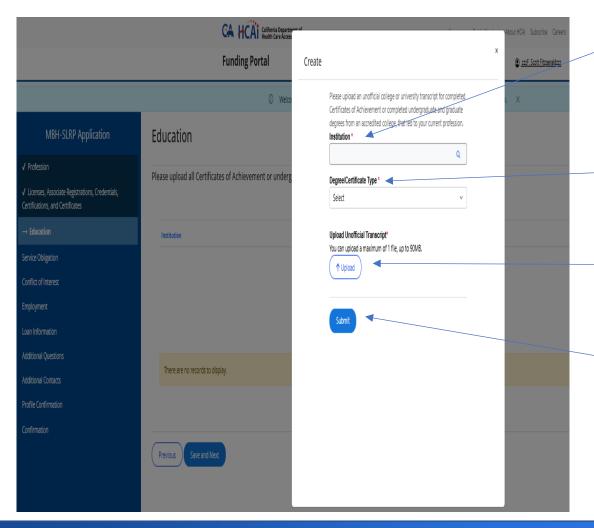


Here you are presented with two options. If you already provided your education information in the profile page, you could save time by importing that information. To do so click, "Add from profile". If you did not add this information in your profile, click "Add New" and a pop-up will appear.

See pop-up example on next slide.



MBH-SLRP – Education (Continued)



Institution: The search feature provides a list of schools to choose from. There are hundreds of schools on this list. Note: If you do not see your school on the drop-down list, please select "**Other**" and type in the name of your school.

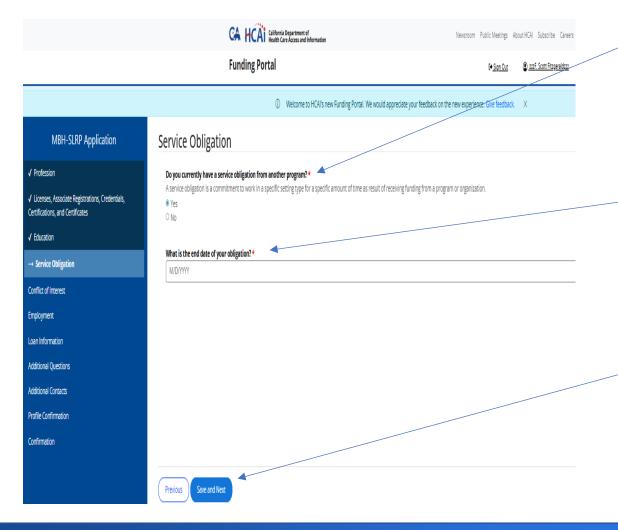
Degree/Certificate Type: Associate, Bachelor's, Certificate of Achievement, JD, Master's, MD, PhD/PsyD

Upload Unofficial Transcript: A copy of your unofficial transcript is required.

Please click "Submit".



MBH-SLRP Service Obligation



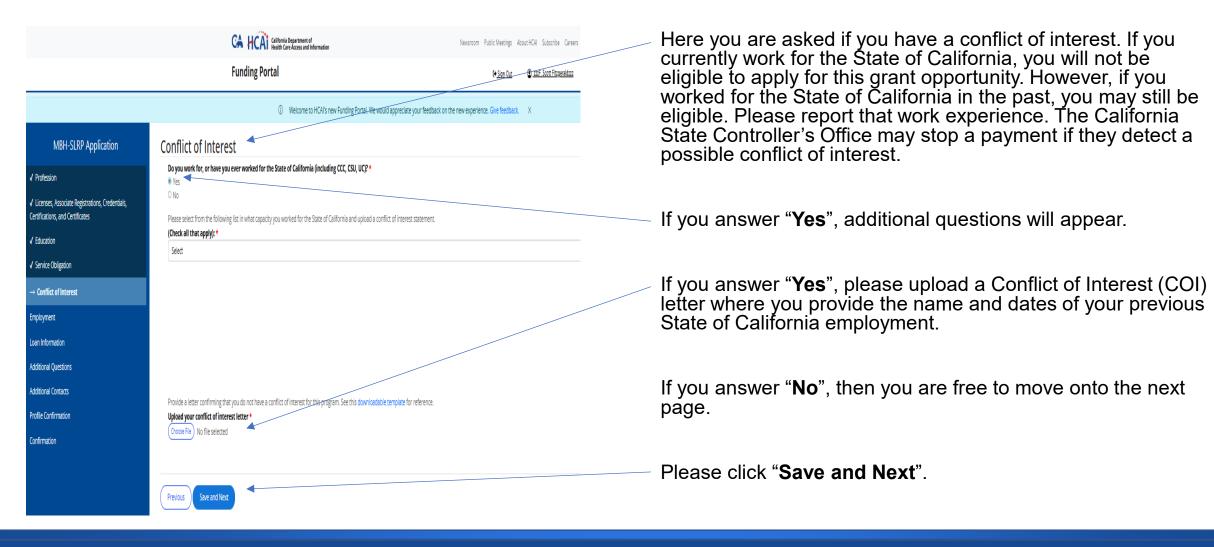
Do you have a service obligation from another program? In other words, did you receive a monetary award from HCAI, or another organization, with the condition that you must work during the proposed grant term for this application?

If you answer "Yes", additional questions will appear.

If you answer "**No**", then you are free to move onto the next page.

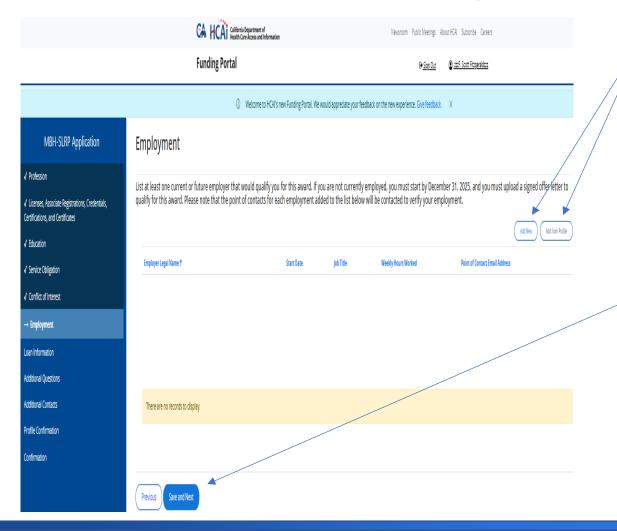


MBH-SLRP Conflict of Interest





MBH-SLRP Employment

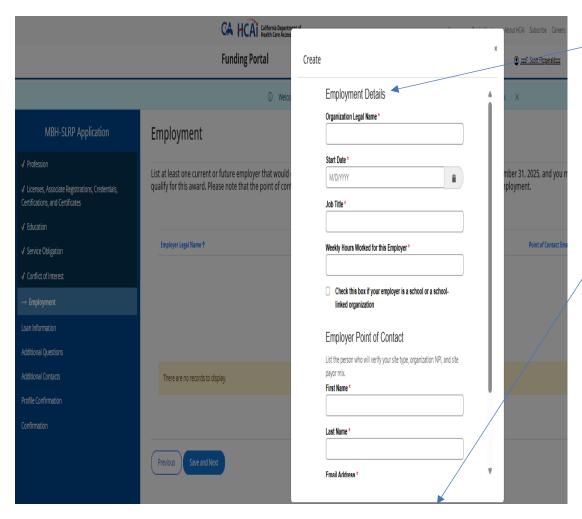


Here you are presented with two options. If you already provided your employment information in the profile page, you could save time by importing that information. To do so click "Add from Profile". If you did not add this information in your profile, click "Add New" and a pop-up will appear.

See pop-up example on next slide.



MBH-SLRP – Employment (Continued)



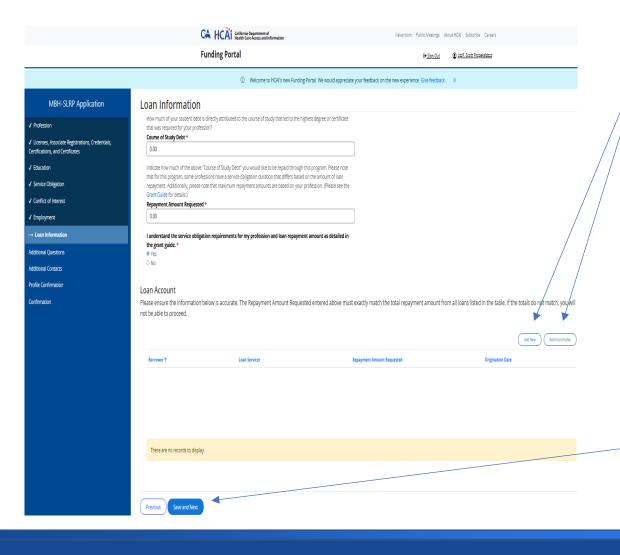
The purpose of this page is to collect your current employment information which should be an eligible profession with the grant opportunity that you are applying for.

When you have added your employment information (which will include a contact person who will need to verify your employment information), please click "**Submit**".

IMPORTANT: If you finish and submit this application, the person you put in this part will be contacted via email. Contacting your employer is a required step in the grant process.



MBH-SLRP Loan Information

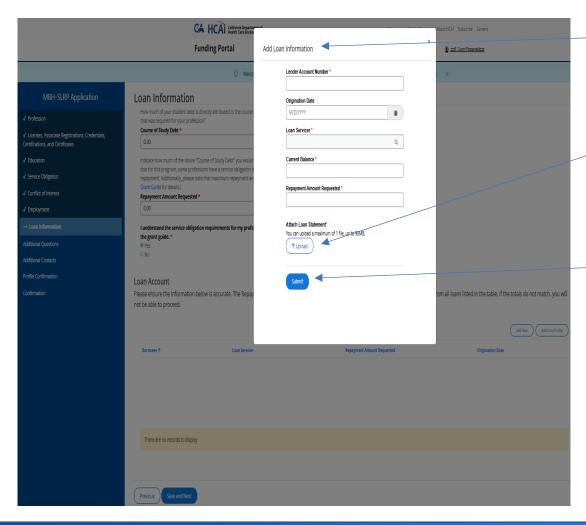


Here you are presented with two options. If you already provided your Loan information in the profile page, you could save time by importing that information. To do so click "Add from Profile". If you did not add this information in your profile prior to this point, click "Add New" and a pop-up will appear.

See pop-up example on next slide.



MBH-SLRP – Loan Information (Continued)



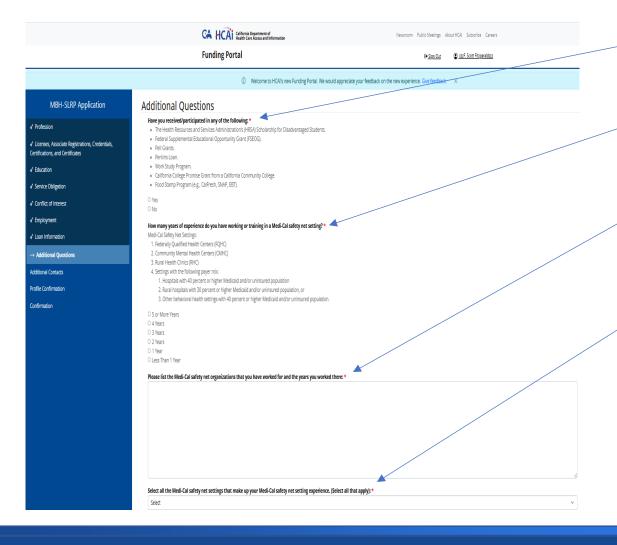
The purpose of this page is to collect your current loan servicer information and debt amount.

You will also need to upload a recent loan statement to help HCAI communicate with the loan servicer. HCAI is requesting the loan servicer statement to be dated within the last 60 days.

Please click "Submit".



MBH-SLRP – Additional Questions



Have you received/participated in any of the following?

How many years of experience do you have working or training in a Medi-Cal safety net setting?

Please list the Medi-Cal safety net organizations that you have worked for and the years you worked there.

Select all the Medi-Cal safety net settings that make up your Medi-Cal safety net setting experience. (Select all that apply

Please scroll further down the page.



MBH-SLRP – Additional Questions (continued)

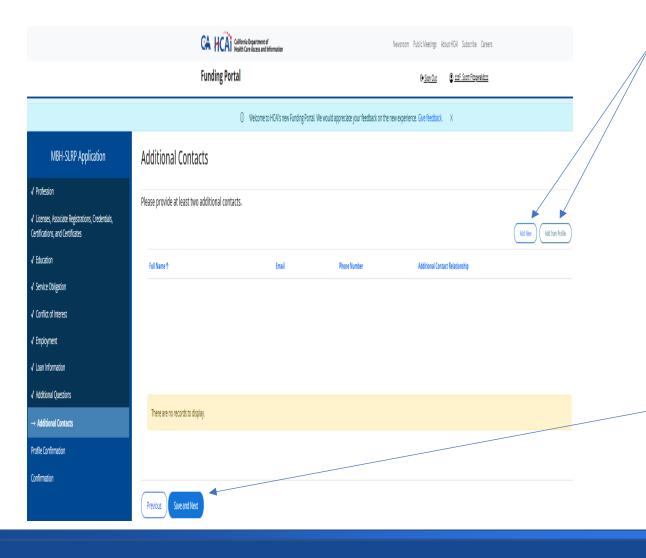
Are you providing services at an organization that delivers Medi-Cal specialty behavioral health services (i.e., Specialty Mental Health, Drug Medi-Cal, or Drug Medi-Cal Organized Delivery System services)? May include both country-operated sites, and community-based sites that are contracted with a county behavioral health agency, ** O Yes O No Do you speak any of the listed languages fluently/well enough to be able to provide direct care services to clients without additional translation services? Check all that apply.		
☐ Any Indigenous and/or Tribal languages	□ Any Sign Languages	
□ Arabic	□ Armenian	
□ Cambodian	□ Chinese	
_ Farsi		
□ Hmong	□ Japanese	
□ Korean	Lactian	
□ Mien	□ Punjabi	
Russian	□ Spanish	
□ Tagalog	□ Thai	
Ukrainian	□ Vietnamese	
Previous Save and Next		

Are you providing services at an organization that delivers Medi-Cal specialty behavioral health services (i.e., Specialty Mental Health, Drug Medi-Cal, or Drug Medi-Cal Organized Delivery System services)? May include both county-operated sites, and community-based sites that are contracted with a county behavioral health agency; may also include individual practitioners contracted with a county behavioral health agency.

Do you speak any of the listed languages fluently/well enough to be able to provide direct care services to clients without additional translation services? Check all that apply.



MBH-SLRP Additional Contacts

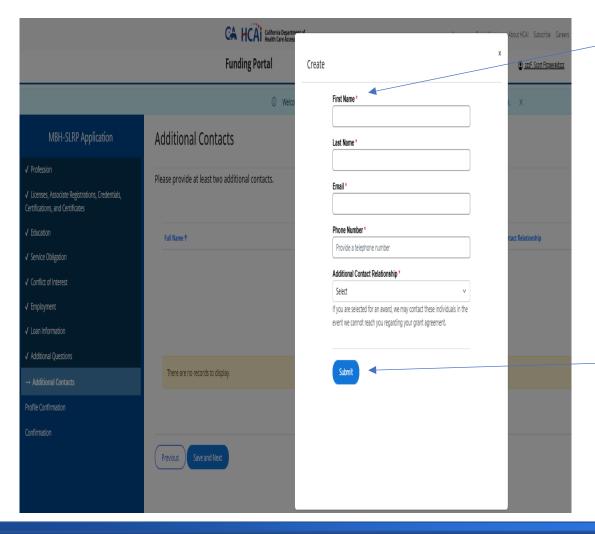


Here you are presented with two options. If you already provided your additional contact information in the profile page, you could save time by importing that information. To do so click "Add from profile". If you did not add this information in your profile, click "Add New" and a pop-up will appear.

See pop-up example on next slide.



MBH-SLRP Additional Contacts (Continued)

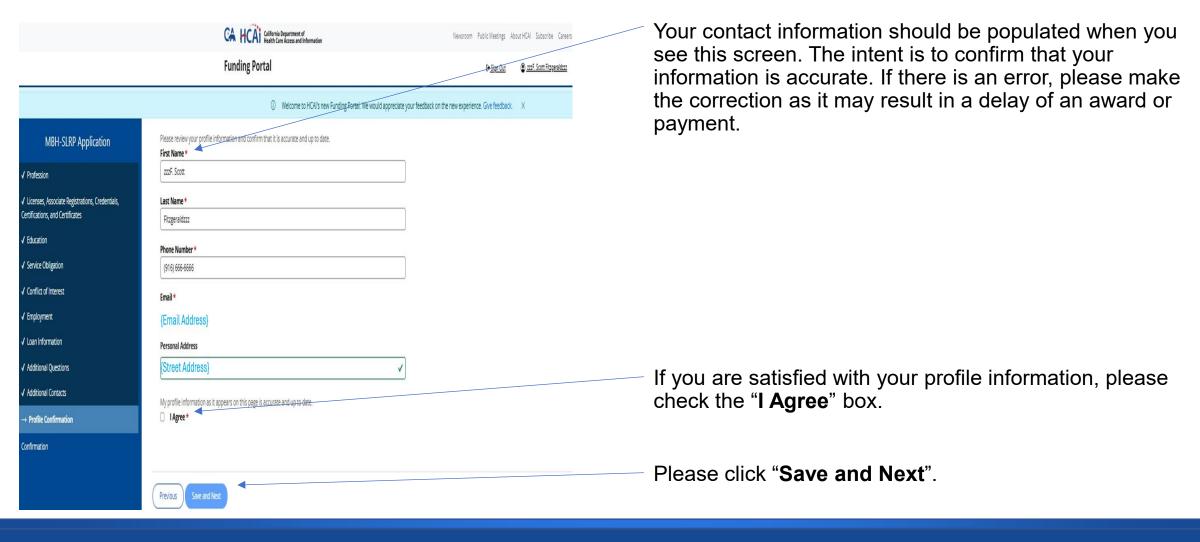


The purpose of this page is to collect **two** additional people to contact in case HCAI cannot reach you. You must add **two** people as additional contacts for the MBH-SLRP Program.

Please click "Submit".

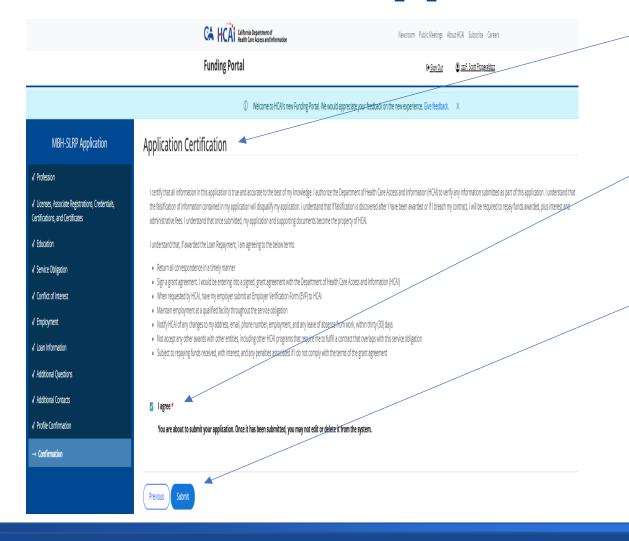


MBH-SLRP – Profile Confirmation





MBH-SLRP – Application Certification



This is the final page of the MBH-SLRP application. Please read all the information.

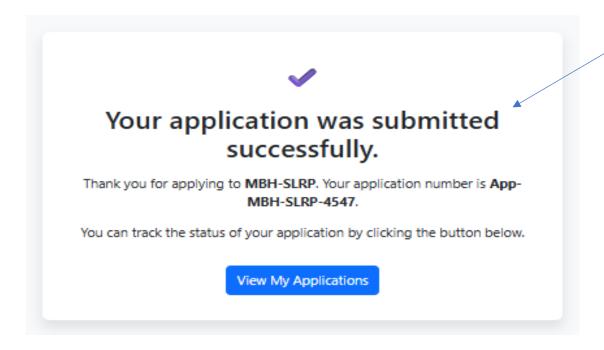
If you are satisfied with your profile information, please check the "I agree" box.

Please click "Submit" when complete.

IMPORTANT: This will be your last chance to make an edit to your application. Once you click "Submit" you will no longer be able to make changes to your application.



MBH-SLRP – Submission Successful



This is the final message you will see after you have successfully submitted your application.

Thank you for applying.



Questions?

MBHSLRP@HCAI.ca.gov

