



Medi-Cal Behavioral Health Recruitment and Retention Program

Grant Guide For Grant Year 2026

If your program requires approval to contract from a coordinating authority, please inform the authority of the terms and conditions contained in the sample grant agreement. Applicants must agree to the terms and conditions before receiving funds. The Department of Health Care Access and Information will not make changes to the terms and conditions specified in the Grant Agreement.

Table of Contents

Section I: Medi-Cal Behavioral Health Recruitment and Retention Program.....	3
Purpose.....	3
Background and Mission	3
Award Funding	3
Eligibility Requirements	4
Eligible Organizational Settings.....	4
Eligible Behavioral Health Professions for Individual MBH-RRP Funds	6
Eligible Funding Categories for Organizational Applicants.....	7
Program Structure: Organizational Grant and the Individual Award Process	10
Organizational MBH-RRP Application Phase.....	10
Individual MBH-RRP Application Phase.....	10
Initiating an Organizational MBH-RRP Application.....	12
Organizational MBH-RRP Review, Evaluation and Scoring	13
Organizational MBH-RRP Award Process	14
Post Award and Payment Provisions	14
Additional MBH Recruitment and Retention Program Terms and Conditions	14
Medi-Cal Behavioral Health Recruitment and Retention Program Resources	14
Key Dates.....	15
HCAI Department Contact.....	16
Section II: Attachments	17
Attachment A: Organizational MBH-RRP Evaluation Criteria.....	17
Attachment B: MBH-RRP Individual Service Obligation Terms.....	19
Attachment C: Sample MBH-RRP Grant Agreement	22

Section I: Medi-Cal Behavioral Health Recruitment and Retention Program

Purpose

This guide explains what the Medi-Cal Behavioral Health Recruitment and Retention Program (MBH-RRP) is and what is necessary to apply. It includes step-by-step instructions for applicants and important rules that grantees must follow. Every organizational applicant must agree to and meet the program's requirements in order to be awarded any funding. The Department of Health Care Access and Information (HCAI) does not allow any changes to the rules listed in this guide.

Background and Mission

The Medi-Cal Behavioral Health Recruitment and Retention Program (MBH-RRP) is a program that enables eligible organizations to expand, sustain, and support their behavioral health workforce. MBH-RRP provides recruitment and retention bonuses, supervision funding, and funding to support essential training for behavioral health employees. The key objectives of the MBH-RRP are to increase the number of behavioral health providers practicing in Medi-Cal safety net settings and to develop the cultural and linguistic competence of these practitioners to reflect and respond to the needs of the Medi-Cal population.

In December 2024, the Centers for Medicare & Medicaid Services (CMS) approved the Department of Health Care Services' (DHCS) Behavioral Health Community-Based Organized Networks of Equitable Care and Treatment (BH-CONNECT) Medicaid Section 1115 demonstration project authorizing up \$1.9 billion in funding across five distinct workforce programs over a five-year period. The MBH-RRP is part of the BH-CONNECT Workforce Initiative, as set forth in section 6.4 of the [BH-CONNECT Standard Terms and Conditions](#). The BH-CONNECT Workforce Initiative allows California to use federal matching funds to support efforts that increase the number of behavioral health professionals helping Medi-Cal members and people without insurance.

Award Funding

This grant year, over \$196 million will be available for the MBH-RRP.

Awarded programs shall use the funding solely for:

1. Recruitment and retention bonuses
2. Recruitment bonuses for students completing their education
3. Licensure/Certification Achievement or Maintenance Payments
4. Supervision support for pre-licensure or pre-certification hours
5. Training support and backfill payments
6. Licensure/ certification related expenses

Eligibility Requirements

Eligible Organizational Settings

A primary organization that manages multiple sites may apply as a single organizational applicant on behalf of multiple sites or may instead choose to have each site submit their own independent application. If both a primary organization and its sites apply, only one may receive an award.

County Behavioral Health Departments are eligible to apply if they function as a direct service provider, with behavioral health staff delivering on-site behavioral health services. County applicants must be a service provider as described above, to be eligible for an MBH-RRP award. A county that operates only as an administrative or governmental body, and that does not deliver behavioral health services directly, is not eligible.

All organizational applicants must meet one of the below definitions of a Medi-Cal safety net setting to be eligible for an MBH-RRP award:

1. Federally Qualified Health Centers (FQHC)
2. Community Mental Health Centers (CMHC) as defined and certified by the [California Department of Public Health](#)
3. Rural Health Clinics (RHC)
4. Settings with the following payer mix:
 - a. Hospitals with 40 percent or higher Medicaid and/or uninsured population
 - b. Rural hospitals with 30 percent or higher Medicaid and/or uninsured population
 - c. Other behavioral health settings with 40 percent or higher Medicaid and/or uninsured population

Hospitals include Acute Psychiatric Hospitals, General Acute Care Hospitals with Psychiatric Units, and Chemical Dependency Recovery Hospitals licensed by the California Department of Public Health.

Other behavioral health settings with 40 percent or higher Medicaid and/or uninsured population include organizations that are enrolled in Medi-Cal and deliver Medi-Cal-covered behavioral health services include:

Medi-Cal Behavioral Health Recruitment and Retention Program - Grant Guide
Grant Year 2026

<ul style="list-style-type: none"> • Community Treatment Facilities – Must be licensed by the California Department of Social Services and hold a DHCS mental health program approval 	<ul style="list-style-type: none"> • Crisis Stabilization Unit (CSU)¹
	<ul style="list-style-type: none"> • Indian Health Care providers²
<ul style="list-style-type: none"> • Mental Health Rehabilitation Center (MHRC) as licensed by DHCS 	<ul style="list-style-type: none"> • Narcotic Treatment Programs (NTP) as licensed by DHCS
<ul style="list-style-type: none"> • Outpatient behavioral health clinics (other than certified outpatient Substance Use Disorder facility)² 	<ul style="list-style-type: none"> • Primary care or other clinic settings with co-located behavioral health services²
<ul style="list-style-type: none"> • Psychiatric Health Facilities (PHF) as licensed by DHCS 	<ul style="list-style-type: none"> • Qualifying provider organizations that deliver primarily field-based or telehealth Medi-Cal behavioral health services (see below for telehealth requirements)²
<ul style="list-style-type: none"> • School-based behavioral health setting² 	<ul style="list-style-type: none"> • Short-Term Residential Therapeutic Programs/Children’s Crisis Residential Programs - Must be licensed by the California Department of Social Services and hold a DHCS mental health program approval
<ul style="list-style-type: none"> • Skilled Nursing Facilities with a Special Treatment Program for mental health – Must be licensed by the California Department of Public Health and hold a DHCS mental health program approval 	<ul style="list-style-type: none"> • Social Rehabilitation Facilities/Programs - Must be licensed by the California Department of Social Services and hold a DHCS mental health program approval
<ul style="list-style-type: none"> • Substance Use Disorder Treatment Facilities (residential; licensed by DHCS) 	<ul style="list-style-type: none"> • Substance Use Disorder Treatment Programs (outpatient; certified by DHCS)
<ul style="list-style-type: none"> • Psychiatric Residential Treatment Facilities (licensed by DHCS) 	

¹ Crisis Stabilization Units provide Medi-Cal Crisis Stabilization services, as defined in [Supplement 3 to Attachment 3.1-A](#) of California’s Medicaid State plan. Medi-Cal Crisis Stabilization services must be delivered at a provider site certified by the State Department of Health Care Services or a county mental health plan.

² Not all Indian health care providers, primary care sites, school-based sites, or outpatient clinics will automatically qualify as behavioral health sites. Additional verification will be required to confirm that the site is actively providing behavioral health services.

Eligible Behavioral Health Professions for Individual MBH-RRP Funds

MBH-RRP funding must be distributed to behavioral health practitioners, as further described here.

Recruitment and Retention bonuses are limited to the behavioral health practitioners listed in the table below.

Recruitment bonuses are limited to students pursuing associate’s degrees, bachelor’s degrees, master’s degrees, or doctorate programs who are completing their required training in advance of their final year of education. Their degrees must lead to the ability to practice as one of the behavioral health professions listed in the table below.

Backfill funds and funds for practitioners achieving or maintaining licensure or certification are limited to the behavioral health practitioners listed in the table below.

Supervision funds must be used to support the supervision hours of pre-licensure or pre-certificate behavioral health practitioners listed in the table below.

• Addiction Medicine Physician	• AOD (Alcohol and Other Drug)/SUD (Substance Abuse Disorder) Counselors ³
• Associate Clinical Social Worker	• Associate Marriage and Family Therapist
• Associate Professional Clinical Counselor	• Certified Peer Support Specialist
• Certified Wellness Coach	• Community Health Worker (Promotores/Representatives)
• Licensed Clinical Psychologist	• Licensed Marriage and Family Therapist
• Licensed Clinical Social Worker	• Licensed Psychiatric Technician
• Licensed Professional Clinical Counselor	• Mental Health Rehabilitation Specialist
• Licensed Vocational Nurse	• Occupational Therapist
• Nurse Practitioner	• Physician Assistant
• Psychology Associate	• Psychiatrists (including Addiction and Child and Adolescent Psychiatrist)
• Registered Nurse	

³ This includes registered and certified counselors

Eligible Funding Categories for Organizational Applicants

As an organizational applicant, you may apply for funding for one or more of six categories:

1. Recruitment and retention bonuses
2. Recruitment bonuses for students completing training
3. Licensure/certification achievement or maintenance payments
4. Supervision support for pre-licensure or pre-certification hours
5. Training support and backfill payments
6. Licensure/certification related expenses

All funding described in Sections A through E below must ultimately be paid to individual behavioral health practitioners. Funds shall not be paid to third party contractors or service providers for any reason.

Below is an overview of each eligible funding category and the requirements associated with them.

Recruitment and Retention Bonuses for Behavioral Health Practitioners

Applicant Medi-Cal safety net organizations may request up to:

1. \$20,000 per practitioner for **recruitment** bonuses
2. \$4,000 per practitioner for **retention** bonuses

These funds must be paid directly to eligible licensed and non-licensed behavioral health practitioners. Organizations may offer additional bonuses to a practitioner once the practitioner has fulfilled their prior service commitment; practitioners must then complete the service commitment(s) for the consecutive bonus(es).

Recruitment Bonus Service Commitments

Practitioners receiving recruitment bonuses must commit to practicing full-time at a Medi-Cal safety net setting, at the funded organization issuing the payment, based on the amount awarded:

1. \$20,000 recruitment bonus: 4-year full-time service commitment
2. Between \$10,000 and \$19,999: 3-year full-time service commitment
3. Less than \$10,000: 2-year full-time service commitment

Retention Bonus Service Commitments

Practitioners receiving retention bonuses must commit to two years of full-time practice at a Medi-Cal safety net setting as described above, at the funded organization issuing the payment.

Recruitment Bonuses for Students Completing Required Training

Provider organizations may receive up to \$50,000 per individual to support recruitment of students who are completing required training in advance of their final year of education.

Eligible students include those pursuing eligible behavioral health-related majors:

1. Associate's degrees
2. Bachelor's degrees
3. Master's degrees
4. Doctoral degrees

Recipients must commit to practicing full-time at a Medi-Cal safety net setting upon graduation and certification/licensure, at the funded organization issuing the payment, beginning immediately after licensure or certification is obtained.

Student Recruitment Bonus Service Commitments

1. Between \$20,000 and \$50,000: 4-year full-time service commitment
2. Between \$10,000 and \$19,999: 3-year full-time service commitment
3. Less than \$10,000: 2-year full-time service commitment

Licensure/Certification Achievement or Maintenance Payments

Organizations may receive up to \$1,500 per practitioner to support costs related to achieving or maintaining behavioral health licensure or certification. Allowable expenses include:

1. Study materials
2. Examination costs
3. Licensing/certification fees

Licensure/Certification Related Service Commitments

Recipients must commit to two years of full-time practice at a Medi-Cal safety net setting at the funded organization issuing the payment, beginning after licensure or certification is obtained.

Supervision Support for Pre-Licensure or Pre-Certification Hours

Organizational applicants may receive up to \$35,000 per awarded calendar year to support supervision hours for pre-licensure and pre-certification behavioral health practitioners. Supervision funds must be used to hire, reassign, or expand supervision for eligible practitioners completing required supervised hours at the funded organization.

Training Support and Backfill Funding for Evidence-Based Practices

Funding is available for licensed or certified practitioners to attend training to provide eligible evidence-based practices (EBPs), in the form of backfill expenses to cover paid time off, overtime, and/or the payment or hiring of back-up staff. This funding is intended to prevent reductions in access to care during training.

Eligible EBPs

1. Assertive Community Treatment (ACT)
2. Forensic ACT
3. Coordinated Specialty Care for First Episode Psychosis
4. Individual Placement and Support (Supported Employment)
5. Clubhouse Services
6. Multisystemic Therapy
7. Functional Family Therapy
8. Parent-Child Interaction Therapy
9. High Fidelity Wraparound
10. Community Health Worker Services
11. Peer Support Services

Backfill funds cannot be used to cover direct costs for certification training, nor backfill while a previously uncertified practitioner pursues a new certification as a Peer or CHW. Backfill costs may be used to support continuing education for Peers/CHWs, including the time for a Peer/CHW to train to deliver one of the specific EBPs listed above.

Backfill Rates

To avoid reduced access to care when a practitioner is in training for these eligible EBPs during practitioner working hours and recognizing the absence may require a temporary or covering worker to perform duties, the organization may use funds to backfill the practitioner by paying other qualified practitioners. Alternatively, these funds may be used to pay the worker overtime or provide paid time off for training. Backfill costs must not exceed the following rates and for no more than five days per week for participants in the following programs:

1. \$750 per day for licensed behavioral health practitioners with prescribing privileges
2. \$500 per day for non-prescribing licensed behavioral health practitioners
3. \$250 per day for all other non-prescribing behavioral health practitioners

Restriction on Practitioners Receiving Both Recruitment and Retention Bonuses

A practitioner who receives a recruitment bonus is not eligible for a retention bonus until the full recruitment bonus service commitment has been completed.

Program Structure: Organizational Grant and the Individual Award Process

The Medi-Cal Behavioral Health Recruitment and Retention Program (MBH-RRP) is structured as an organizational grant program with a required individual application and award component to be administered by organizational grantees. Organizations will apply for an organizational award first, through the MBH-RRP Organizational Application. These grantees will then be responsible for managing the individual award selection, distribution, monitoring and reporting via the HCAI provided portal.

Organizational MBH-RRP Application Phase

Organizational MBH-RRP Application Timeline

The Organizational MBH-RRP Application will be open from **June 1, 2026, until July 15, 2026, as specified in this grant guide**. Provider organizations that meet eligibility criteria may apply for MBH-RRP funding to support recruitment, retention, supervision, training, and licensure/certification costs for behavioral health practitioners.

Organizational MBH-RRP Grant Agreements with HCAI

HCAI will enter into grant agreements directly with awarded organizations.

Once a grant agreement is executed, the organization assumes responsibility for:

1. Undertaking all necessary recruitment actions and managing outreach and communication with prospective individual applicants.
2. Directing individual applicants to the HCAI provided Individual MBH-RRP Application (see additional information below).
3. Verifying individual eligibility and selecting individuals for specific funding categories.
4. Entering into award agreements with individuals (HCAI will not enter into grant agreements with individual participants).
5. Distributing funding to awarded individuals.
6. Monitoring and reporting upon completion of all required individual service obligations.
7. Implementing and enforcing the HCAI provided individual service obligation terms in Attachment B: MBH-RRP Individual Service Obligation Terms.
8. Recouping funds from individuals in cases of service obligation breach.

Organizations, not HCAI, are responsible for all individual award components.

Individual MBH-RRP Application Phase

Individual MBH-RRP Application and Award Timeline

After organizational grant agreements are executed, HCAI will release the Individual MBH-RRP Application. This application must be completed by all individuals who are

being considered by the organization for any MBH-RRP-supported award. The Individual Application will open **December 2026** and will remain open through **December 2029**.

Organizations must ensure that individual awardees begin their service obligation within 6 months of individuals receiving award funds or by the Start Date listed in the table below, whichever is earlier.

In the case of student recruitment bonuses, individuals must begin their service within six months of graduating or by the Start Date listed in the table below, whichever is earlier.

Due to program timeline requirements, some award categories will close prior to December 31, 2029, as listed in the table below.

Funding Category	Service Obligation Length	Last Award Date	Last Start Date for Service Obligation
Recruitment Bonuses of \$20,000	4 years	Jun 30, 2029	Jul 1, 2029
Recruitment Bonuses of \$10,000 to \$19,999	3 years	Dec 31, 2029	Jul 1, 2030
Recruitment Bonuses of less than \$10,000	2 years	Dec 31, 2029	Jul 1, 2031
Retention Bonuses	2 years	Dec 31, 2029	Jul 1, 2031
Student Recruitment Bonuses of \$20,000 to \$50,000	4 years	Aug 31, 2028	Jul 1, 2029
Student Recruitment Bonuses of \$10,000 to \$19,999	3 years	Aug 31, 2029	Jul 1, 2030
Student Recruitment Bonuses of less than \$10,000	2 years	Dec 31, 2029	Jul 1, 2031
Licensing/Certification	2 years	Dec 31, 2029	Jul 1, 2031

Individual MBH-RRP Application Access

HCAI will provide organizational grantees with a link to the Individual MBH-RRP Application. Organizational grantees will distribute this link to prospective participants. The Individual MBH-RRP Application will gather necessary information needed to determine individual eligibility. The candidates will complete and submit the application electronically. Organizational grantees will be provided with access to review and select eligible applicants within the HCAI platform.

Purpose of the Individual MBH-RRP Application

The Individual MBH-RRP Application is used to:

1. Confirm practitioner eligibility
2. Validate the appropriate funding category
3. Document individuals' acceptance of required service commitments
4. Ensure compliance with program requirements outlined in the organization's grant agreement

Initiating an Organizational MBH-RRP Application

1. Organizational applicants must submit their applications by July 15, 2026, through the web-based MBH-RRP Application located at <https://fundingportal.hcai.ca.gov/>.
2. Organizational applicants with application questions or technical difficulties should contact HCAI staff at MBHRRP@HCAI.ca.gov.
3. Organizational applicants must submit applications that are complete and accurate. HCAI may reject an application that is incomplete, inaccurate, or conditional.
4. An individual authorized to represent the organizational applicant shall complete the Organizational MBH-RRP Application.
5. HCAI may modify this grant guide prior to the final application submission deadline by issuing an addendum at [Medi-Cal Behavioral Health Recruitment and Retention Program - HCAI](#).
6. Organizational applicants are entirely responsible for costs incurred in developing applications in anticipation of an award. The State of California shall not be responsible for these costs.
7. HCAI considers the submission of an application as acceptance of all terms therein and all terms contained in this grant guide. All organizational applicants must agree to the terms and conditions outlined in Attachment D: Sample Medi-Cal Behavioral Health Recruitment and Retention Program Grant Agreement before receiving funds.
8. HCAI will not accept alternate grant agreement language from a prospective grantee. HCAI will consider an application with such language to be a counteroffer and will reject it. HCAI will not negotiate the terms and conditions outlined in Attachment D: Sample Medi-Cal Behavioral Health Recruitment and Retention Program Grant Agreement.
9. If your program requires approval from a coordinating authority to enter into a grant agreement with HCAI, please inform the authority of the terms and conditions contained in the Sample Medi-Cal Behavioral Health Recruitment and Retention Program Grant Agreement located in Attachment D before submitting an application.
10. Prospective grantees must sign and submit grant agreements by the HCAI due date. Failure to sign and return the grant agreement by the due date may result in denial of

an award.

11. When the prospective grantee is a county or other local public body, the prospective grantee must include a copy of the resolution, order, motion, ordinance, or other similar document from the local governing body authorizing execution of the grant agreement with the signed grant agreement.
12. If, upon reviewing all application deliverables, HCAI finds that the prospective grantee has not met all requirements and/or expended all funds, HCAI will withhold payment(s) and/or request the remittance of funds from the prospective grantee.
13. HCAI may waive an immaterial deviation in an application. HCAI's waiver of an immaterial deviation shall in no way modify the grant guide or excuse the applicant from full compliance with all requirements, if awarded.
14. The California Public Records Act applies to all grant materials and deliverables, including applications, reports, and supporting documentation.
15. HCAI will not consider any oral understanding or agreement to be binding on either party.
16. If, in the judgment of HCAI, an application contains false or misleading information, or if provided documentation does not support an attribute or condition claimed, HCAI shall reject the application.
17. HCAI reserves the right to reject any or all applications, or to reduce the amount of funding awarded to an applicant.

Organizational MBH-RRP Review, Evaluation and Scoring

HCAI will make final selections using the Evaluation and Scoring Criteria described in Attachment A: Organizational MBH-RRP Evaluation Criteria.

HCAI also intends for the MBH-RRP to support geographic distribution of behavioral health professionals in California. Applicants seeking to support geographic regions not addressed by other scored applications may receive preference. Preference may also be given to applicants located in or serving rural counties.

HCAI reserves the right to determine the number of grant agreement(s) awarded and to modify the amount awarded to each grantee. Competitive proposals will meet the MBH-RRP evaluation criteria and demonstrate commitment to fulfill the conditions of the grant.

During the review process, HCAI staff will verify the presence or absence of required information as specified in this grant guide and score applications using only the evaluation criteria described in Attachment A: MBH-RRP Evaluation Criteria. The most competitive applicants will be those most consistent with the criteria and purpose of this grant opportunity.

HCAI will also review the annual award amounts requested by grantees and may make adjustments. Example of reasons for adjustments include but are not limited to:

1. The organization's size, as reflected by the number of behavioral health providers across all sites listed in the application.
2. The total amount of funding available.

Organizational MBH-RRP Award Process

After full review, HCAI will issue tentative organizational awards. Prior to signing a grant agreement, organizations selected for tentative awards will be required to submit a detailed budget, including annual allocations by site and by funding category. This budget must not exceed the award amount offered by HCAI.

Once the detailed budget has been approved, and grant agreement is issued, the awardee will have seven business days to electronically sign and accept or decline the grant agreement. If the grant agreement is not signed within this period, HCAI may consider the agreement declined.

Post Award and Payment Provisions

Grantees will enter into agreements expiring on Dec 31, 2033, or earlier. Under no circumstances shall payments to the grantee be made after October 31, 2029.

Grantees must submit annual reports, along with supporting materials, to HCAI and/or its designee in accordance with the schedule provided in the grant agreement. The financial reports and activity reports are deliverables made available through HCAI's web-based Funding Portal via <https://fundingportal.hcai.ca.gov/>.

HCAI and/or its designee will make annual prospective payments in the years of 2027 through 2029 once the specified Financial and Activity Reports have been reviewed and approved by HCAI and/or its designee for quality and accuracy.

Additional MBH Recruitment and Retention Program Terms and Conditions

The grantee shall submit in writing any requests to change or extend the grant period, or to change the budget, at least ninety (90) days before the grant end date, providing that the grant period does not extend beyond December 31, 2033.

Medi-Cal Behavioral Health Recruitment and Retention Program Resources

For more information about the resources available regarding the application process, visit [Medi-Cal Behavioral Health Recruitment and Retention Program - HCAI](#), where you can find:

1. Grant Guide: Outlines the requirements, rules, and timeframes between HCAI and its Grantees.
2. Technical Assistance Guide: Assists applicants and grantees with navigating the HCAI web-based Funding Portal and submitting required deliverables at <https://fundingportal.hcai.ca.gov/>.
3. Webinar: A formal presentation provided by HCAI staff to provide information to prospective applicants.

Key Dates

The key dates for the program year are:

Key Event	Dates and Times
Application Launch	June 1, 2026, at 3:00 p.m.
Technical Assistance Webinar	June 9, 2026
Application Period Ends	July 15, 2026, at 3:00 p.m.
Notify Grantees	October 2026
Grant Agreement Execution	November 2026

Medi-Cal Behavioral Health Recruitment and Retention Program and the Media

HCAI coordinates timing for all HCAI news and press engagements in conjunction with other news coming out from the California Health and Human Services Agency (CalHHS) and the Governor’s Office. Grantee organizations must take this into consideration when preparing media statements or press releases about its programs. If an entity is engaging with the media to promote its grant award and/or program activities, there are important steps to follow:

1. All grantee organizations are required to submit press releases for review by HCAI for review and approval a minimum of two weeks in advance of the intended publication date.
2. Grantee organizations understand that portions, or the entirety, of its press release may be used by HCAI, CalHHS, or the Governor’s office, and may be changed without notice to the Grantee.
3. If HCAI, CalHHS, or the Governor’s Office issues a press release or statement about an award the grantee received, but does not use the awarded organization’s press announcement, the grantee may issue its release after HCAI, CalHHS, or the Governor’s Office issues a statement. The draft release must still be reviewed by HCAI before release.
4. For some grants or programs, a pre-approved press release template may be developed in a tool kit for the program, which may reduce the review/approval time by HCAI. (This does not apply to all grants; please contact your program officer for this information at MBHRRP@HCAI.ca.gov.)

5. Any discussion regarding media engagements or press releases should only be directed to and approved by HCAI staff.
6. Grantee organizations should stay in close contact with grant managers and provide any detailed plans related to news media engagement.

Prospective applicants may submit questions to MBHRRP@HCAI.ca.gov at any time during the application cycle.

HCAI Department Contact

For questions related to the MBH RRP application, please email HCAI staff at MBHRRP@HCAI.ca.gov.

Thank you!

We thank you for your interest in applying for the MBH Recruitment and Retention Program.

Section II: Attachments

Attachment A: Organizational MBH-RRP Evaluation Criteria

EVALUATION AND SCORING CRITERIA		
Core Categories	Guideline	Max Points Possible
County/County-Contracted Organizations	<p>What type of organization are you?</p> <ol style="list-style-type: none"> 1. County Operated Medi-Cal Specialty Behavioral Health Setting offering Specialty Mental Health, Drug Med-Cal, or Drug Medi-Cal Organized Delivery System services (55 points) 2. Organization contracted with a County to deliver Specialty Mental Health, Drug Med-Cal, or Drug Medi-Cal Organized Delivery System services (55 points) 3. Other type of organization (0 points) 	55
Languages Spoken	<p>Enter the total number of your current employees and graduate interns, at the sites listed in this application, who provide direct services in any of the listed languages fluently without additional translation services.</p> <ul style="list-style-type: none"> • Arabic • Armenian • Cambodian • Chinese • Farsi • Hindi • Hmong • Japanese • Korean • Laotian • Mien • Punjabi • Russian • Spanish • Tagalog • Thai • Ukrainian • Vietnamese • Any Indigenous/Tribal Language • Any Form of Sign Communication 	15

Medi-Cal Behavioral Health Recruitment and Retention Program - Grant Guide
Grant Year 2026

	<ol style="list-style-type: none"> 1. 5 points for each listed state-level Medi-Cal threshold language according to the Department of Health Care Services' list(s). 2. 5 points for each Indigenous and/or Tribal language and/or Sign language (up to 10 points). 3. 0 points: Does not speak any of the listed languages. <p>Total combined points cannot exceed 15.</p>	
Rural Areas (Sites)	<p>Your program/proposed program has 60% or more of its site(s)/facility(ies) in a rural area.</p> <ol style="list-style-type: none"> 1. 15 points: 60% or more of applicant's <i>program/proposed program site(s)/facility(ies) is/are</i> in a rural area. 2. 0 points: 60% or more of applicant's <i>program/ proposed program site(s)/facility(ies) is/are</i> not in a rural area. 	15
Composite Shortage Area at the County Level <i>*Geocoded and calculated in the back end</i>	<p>Are 60% or more of your sites located in a shortage area?</p> <ol style="list-style-type: none"> 1. Yes 2. No <p>If yes, move to the question below. If no, 0 points.</p>	
Composite Shortage Area at the County Level <i>*Geocoded and calculated in the back end</i>	<p>Are 60% or more of your site(s) located in an HCAI-identified shortage area?</p> <ol style="list-style-type: none"> 1. 8 points: Severe Shortage (-50% or more) 2. 6 points: High Shortage (-35% to -49.99%) 3. 4 points: Medium Shortage (-20% to -34.99%) 4. 2 points: Low Shortage (-5% to -19.99%) 5. 0 points: No Shortage or Surplus (-4.99% or less) <p>Each site is scored using the criteria above and then HCAI will calculate the mean: Total site points / number of eligible sites (capped at 8 points max)</p>	8
Total Points Possible		93

Attachment B: MBH-RRP Individual Service Obligation Terms

Full-time Service Obligation Requirement

Individual awardees must provide full-time services while delivering direct client care. In accordance with section 6.1 of the [BH-CONNECT Special Terms and Conditions](#), individual awardees are not permitted to work less than full-time during the fulfillment of their service obligation.

For purposes of the service obligation, the following definitions are used:

1. Full-Time Service: Defined as a minimum of 32 hours per week providing direct client care at an approved practice site or 30 hours per week providing direct client care at an approved practice site that is in a school setting.
2. Direct Client Care: Defined as face-to-face care, telehealth-based care, and first-line supervision. This includes behavioral health services such as prevention, early intervention, assessment, treatment, counseling, procedures, patient self-care, patient education, and documentation relating to encounters with patients being treated with, or suspected of needing, behavioral health services.
3. First-line Supervision: Defined as providing direct supervision over staff providing direct client care.

Individual awardees may have up to four weeks a year away from their MBH-RRP approved practice site for vacation, holidays, continuing professional education, illness, or any other reason as approved by their site. This provision shall not apply to school vacations during which the individual awardee is practicing at an approved practice site that is in a school setting.

Should the individual awardee take more than four weeks a year as stated above and the organizational grantee agrees to this, the individual awardee must agree to extend their service obligation. The grantee's service obligation will be extended for each day of absence over the allowed four weeks per year. No service obligation may be extended beyond December 31, 2033, and the grantee's service obligation must be completed by December 31, 2033.

Provisions for Suspension, Waiver, Cancellation or Voluntary Termination of Service

An individual awardee may seek a waiver of their service obligation on the basis of an extraordinary circumstance. All requests for a waiver must be documented by organizational grantees. HCAI may request applicable documentation and may deny a waiver decision if documentation is not provided.

The following extraordinary circumstances may result in the waiver of a service obligation:

1. Disability or Serious Illness- An individual awardee experiences a documented long-term medical condition or disability that renders them unable to fulfill their service obligation.
2. Death of individual awardee- In the event of an individual awardee death, all service obligations are considered null and void.
3. Military Deployment or Activation- An individual awardee is called to active duty in the United States Armed Forces, including activation if the individual awardee is a reservist or the drafting of the individual awardee into active service, and the length of time in the armed services renders them unable to fulfill their service obligation. This does not include circumstances where the individual awardee voluntarily enlists into the armed forces.
4. Loss of Immigration or Legal Residency Status- An individual awardee loses lawful immigration or legal residency status thereby preventing the individual awardee from legally working in the state.

Individual awardees may request that the fulfillment of their service obligation be suspended. All requests for a suspension must be documented by organizational grantees. HCAI may request applicable documentation for review and may deny a suspension decision if documentation is not provided.

The following circumstances may result in the suspension of a service obligation:

1. Natural Disaster, Act of God, or Declared Emergency- A major natural disaster, catastrophic event, or declared local, state, or federal emergency significantly disrupts the individual awardee's ability to fulfill their obligation.
2. Institution or Site Closure or Program Disruption- The assigned service site, educational institution, or program closes or becomes non-operational, and an alternative placement is not immediately available.
3. Temporary Disability- The individual awardee experiences a disability that is temporary in nature and temporarily precludes them from fulfilling their service obligation.
4. Military Deployment or Activation- The individual awardee is called to active duty in the United States Armed Forces, including activation if the individual awardee is a reservist or the drafting of the individual awardee into active service, and the length of time in the armed services renders them temporarily unable to fulfill their service obligation. This does not include circumstances where the grantee voluntarily enlists into the armed forces.

Individual awardees who are granted a suspension will be given six months to become reemployed in an eligible setting. The organizational grantee may extend the suspension period on a case-by-case basis. Notwithstanding any provision in this Agreement, the Service Obligation must be completed on or before December 31, 2033, or the individual awardee may be held in breach.

If the individual awardee plans to be away from his/her approved practice site(s) for paternity/maternity/adoption leave, the individual awardee is required to inform the

organizational grantee at least 60 calendar days before taking the leave. HCAI allows individual awardees to be away from their approved practice site(s) within the timeframes established by either the Family Medical Leave Act (up to 12 weeks), or other federal and state law; however, the individual awardee must adhere to the leave policies of his/her approved practice site.

Breach and Payment Recoupment

Individual awardees who do not complete service obligations, within the above terms, will be required to return the full amount of their award to the organizational grantee so that the organizational grantee can return the funds to HCAI within eight months of the date of breach. If an organization grantee is unable to recoup the complete funds from the individual, the organization will be responsible to repay any and all missing funds to HCAI within eight months of the date of breach.

Attachment C: Sample MBH-RRP Grant Agreement

**GRANT AGREEMENT BETWEEN THE
DEPARTMENT OF HEALTH CARE ACCESS AND INFORMATION
AND
[GRANTEE NAME], [PROGRAM NAME]
GRANT AGREEMENT NUMBER [GRANT AGREEMENT NUMBER]**

THIS GRANT AGREEMENT (“Agreement”) is entered into on [Agreement Start Date] (“Effective Date”) by and between the State of California, Department of Health Care Access and Information (hereinafter “HCAI”) and [Grantee Name], [Program Name] [Specialty] (collectively the “Grantee”).

WHEREAS, state and federal funds are available under the Behavioral Health Community-Based Organized Networks of Equitable Care and Treatment (BH-CONNECT) 1115 Medicaid waiver to increase the educational capacity to train fellows in child and adolescent psychiatry, addiction psychiatry, and/or addiction medicine.

WHEREAS, the purpose of BH-CONNECT is to provide services to persons with or at high risk for significant behavioral health conditions, inclusive of mental health conditions and substance use disorders, in Medi-Cal safety net settings.

WHEREAS, HCAI supports health care accessibility through the promotion of a culturally and linguistically competent workforce while providing analysis of California's healthcare infrastructure and coordinating healthcare workforce issues.

WHEREAS, HCAI supports engaging in activities that promote the employment of consumers with behavioral health disorders and family members of consumers of behavioral health disorders.

WHEREAS, recruiting and retaining the behavioral health workforce to serve individuals in the Medi-Cal safety net setting is a priority strategy.

WHEREAS, the Grantee applied to participate in the Medi-Cal Behavioral Health Recruitment and Retention Program, by submitting an application in accordance with the Medi-Cal Behavioral Health Recruitment and Retention Program (MBH-RRP) Grant Guide for Grant Year 2026.

WHEREAS, the Grantee was selected by HCAI to receive Grant Funds through procedures duly adopted by HCAI for the purpose of administering such grants.

NOW THEREFORE, HCAI and the Grantee, for the consideration and under the conditions hereinafter set forth, agree as follows:

A. Definitions:

1. “Application” means the grant application submitted by an organization applying for the MBH-RRP Program.

2. "Deputy Director" means the Deputy Director of Health Workforce Development of HCAI.
 3. "Director" means the Director of HCAI or his/her designee.
 4. "Grant Agreement/Grant Number" means Grant Number **[Grant Agreement Number]** awarded to Grantee.
 5. "Grantee" means the fiscally responsible entity in charge of administering the Grant Funds and includes the Program identified on the Application.
 6. "Grant Funds" means the money provided by HCAI for the Project, as defined.
 7. "Grant Guide" means the instructions provided to applicants for application for this grant, which is hereby made a part of this Grant Agreement by reference thereto.
 8. "Other Sources of Funds" means all cash, donations, or in-kind contributions that are required or used to complete the Project beyond the Grant Funds provided by this Grant Agreement.
 9. "Program" means the Medi-Cal Behavioral Health Recruitment and Retention Program.
 10. "Program Director" means the Director of Grantee's Medi-Cal Behavioral Health Recruitment and Retention Program for which Grant Funds are being awarded.
 11. "Project" means the activity described in the Application and Agreement to be accomplished with the Grant Funds.
 12. "Service Obligation" means the activities and terms described in Section D of this Grant Agreement.
 13. "State" means the State of California and includes all its Departments, Agencies, Committees and Commissions.
 14. "Supplantation" refers to the act of replacing or taking the place of funds from federal, state, local, and private resources.
- B. Term of the Agreement: This Agreement shall take effect on **[Agreement Start Date]** and shall terminate on **[Agreement End Date]**.
- C. Scope of Work:
1. Grantee agrees to the following Scope of Work as set forth herein within the Agreement. In the event of a conflict between the provisions of this section and

the Grantee's Application, the provisions of this Scope of Work Section shall prevail.

2. Grantee shall perform some or all of the following as appropriate:
 - a. Make recruitment and retention bonuses to individuals working in Medi-Cal safety net settings
 - b. Make recruitment bonuses for students completing their education, to work in Medi-Cal safety net settings
 - c. Make licensure/ certification achievement or maintenance payments to individuals working in Medi-Cal safety net settings
 - d. Supervision support for pre-licensure or pre-certification hours to individuals working in Medi-Cal safety net settings
 - e. Training support and backfill payments to individuals working in Medi-Cal safety net settings
 - f. Licensure/ certification related expenses to individuals working in Medi-Cal safety net settings
3. Grantee shall:
 - a. Submit annual reports within 30 days of the end of each report year using the online forms that HCAI provides, located at <https://fundingportal.hcai.ca.gov/>.
 - b. Ensure individual fund recipients fulfill Service Obligations in compliance with requirements set forth by HCAI in Section D of the Grant Agreement.
 - c. Not conduct lobbying activities as part of this Agreement or use Grant Funds for lobbying activities.
 - d. Not use Grant Funds under this Agreement for any purpose other than the Project, including but not limited to for capital construction and/or remodeling, indirect expenses, galas, alcohol, or any other purpose not permissible when making an agreement with the State of California.
 - e. Credit HCAI in all publications resulting from this Agreement.
 - f. Notify HCAI of any press releases and allow HCAI advance notice to review press releases, in accordance with Section J. Media and Press Engagements.

Medi-Cal Behavioral Health Recruitment and Retention Program - Grant Guide
Grant Year 2026

- g. Provide HCAI with Financial Reports and Activities Reports on an annual basis, as specified in the MBH-RRP annual report instructions.
- h. Notify HCAI in writing 90 days in advance of any changes in the Grantee's annual budget.

4. Annual Financial Report Schedule by Calendar Year (CY):

Report	Reporting Period	Report Due Date
<u>Financial Report 1</u>	<u>January 1, 2027 – December 31, 2027</u> (Prospective Budget for CY 2027)	<u>January 31, 2027</u>
<u>Financial Report 2</u>	<u>January 1, 2027– December 31, 2028</u> (Expense Report for CY 2027 Prospective Budget for CY 2028)	<u>January 31, 2028</u>
<u>Financial Report 3</u>	<u>January 1, 2028 – December 31, 2030</u> (Expense Report for CY 2028 Prospective Budget for CY 2029)	<u>January 31, 2029</u>
<u>Financial Report 4</u>	<u>January 1, 2029 – December 31, 2029</u> (Expense Report for CY 2029	<u>January 31, 2030</u>

5. Annual Activities Report Schedule:

Report	Reporting Period	Report Due Date
<u>Activities Report 1</u>	<u>January 1, 2027 – December 31, 2027</u>	<u>January 31, 2028</u>
<u>Activities Report 2</u>	<u>January 1, 2028 – December 31, 2028</u>	<u>January 31, 2029</u>
<u>Activities Report 3</u>	<u>January 1, 2029 – December 31, 2029</u>	<u>January 31, 2030</u>
<u>Activities Report 4</u>	<u>January 1, 2030 – December 31, 2030</u>	<u>January 31, 2031</u>
<u>Activities Report 5</u>	<u>January 1, 2031 – December 31, 2031</u>	<u>January 31, 2032</u>
<u>Activities Report 6</u>	<u>January 1, 2032 – December 31, 2032</u>	<u>January 31, 2033</u>

6. All requests for amending the term of this agreement shall comply with the amendment requirements stated in Section J of this Agreement.
7. All funds are intended to be distributed to individuals by Grantee for the purposes of recruitment and retention bonuses, student recruitment bonuses, supervision support for pre-licensure and pre-certification practitioners, and certification/ licensure and training supports.
8. Grantee agrees to award funds only to those individuals who have completed an Individual MBH-RRP Application and have been verified as eligible, and subsequently selected by Grantee, through the Individual MBH-RRP Application process.
9. HCAI will make an award based on the expectation that the Grantee will carry out the award of funds on an annual basis for recruitment and retention bonuses, student recruitment bonuses, supervision support for pre-licensure and pre-certification practitioners, and certification/ licensure and training supports.

10. Should the Grantee fail to fill the agreed upon recruitment and retention bonuses, student recruitment bonuses, supervision support for pre-licensure and pre-certification practitioners, and certification/ licensure and training supports, HCAI reserves the right to reduce the amount awarded.
11. Funds shall only be used for Medi-Cal safety net settings as listed in Grantee's application, or those approved in writing by HCAI.
12. Funds shall not be used to supplant existing federal, state, local, or private funds.
13. Funds shall not be paid to third party contractors or service providers for any reason. Funding is not available for grantee administrative expenses.
14. Program funds shall only be used for the six categories of direct grant expenditures described in the grant guide.
15. Grantee shall not use program funds for administrative expenses.
16. HCAI will not make the first payment to Grantee until HCAI has approved the prospective budget and associated documentation that is consistent with Section C above.
17. HCAI will be the primary contact for any requests regarding agreement extensions, amendments, or breaches.

D. MBH-RRP Individual Service Obligation Terms

1. Recruitment Bonus Service Obligations

Individuals receiving recruitment bonuses must commit to practicing full-time at a Medi-Cal safety net setting at the funded organization issuing the payment, based on the amount awarded:

- a. \$20,000 recruitment bonus: Four-year full-time service obligation.
- b. Between \$10,000 and \$19,999: Three-year full-time service obligation.
- c. Less than \$10,000: Two-year full-time service obligation.

2. Retention Bonus Service Obligations

Practitioners receiving retention bonuses must commit to a two-year service obligation at a Medi-Cal safety net setting at the funded organization issuing the payment.

3. Student Recruitment Bonus Service Obligations

Medi-Cal Behavioral Health Recruitment and Retention Program - Grant Guide
Grant Year 2026

Individuals receiving student recruitment bonuses must commit to practicing full-time at a Medi-Cal safety net setting at the funded organization issuing the payment, based on the amount awarded:

- a. \$20,000 recruitment bonus: Four-year full-time service obligation.
 - b. Between \$10,000 and \$19,999: Three-year full-time service obligation.
 - c. Less than \$10,000: Two-year full-time service obligation.
4. Licensure/Certification Achievement or Maintenance Payments: Practitioners receiving licensure/certification payments must commit to a two-year service obligation at a Medi-Cal safety net setting at the funded organization issuing the payment.
 5. Organizations must ensure that individual awardees begin their service obligation within 6 months of individuals receiving award funds or by the Start Date listed in the table below, whichever is earlier.

In the case of student recruitment bonuses, individuals must begin their service within six months of graduating or by the Start Date listed in the table below, whichever is earlier.

Due to program timeline requirements, some award categories will close prior to December 31, 2029, as listed in the table below.

Funding Category	Service Obligation Length	Last Award Date	Last Start Date for Service Obligation
Recruitment Bonuses of \$20,000	4 years	Jun 30, 2029	Jul 1, 2029
Recruitment Bonuses of \$10,000 to \$19,999	3 years	Dec 31, 2029	Jul 1, 2030
Recruitment Bonuses of less than \$10,000	2 years	Dec 31, 2029	Jul 1, 2031
Retention Bonuses	2 years	Dec 31, 2029	Jul 1, 2031
Student Recruitment Bonuses of \$20,000 to \$50,000	4 years	Aug 31, 2028	Jul 1, 2029
Student Recruitment Bonuses of \$10,000 to \$19,999	3 years	Aug 31, 2029	Jul 1, 2030
Student Recruitment Bonuses of less than \$10,000	2 years	Dec 31, 2029	Jul 1, 2031
Licensing/Certification	2 years	Dec 31, 2029	Jul 1, 2031

6. Full-time Service Obligation Requirement

Individual awardees must provide full-time services while delivering direct client care. In accordance with section 6.1 of the [BH-CONNECT Special Terms and Conditions](#), individual awardees are not permitted to work less than full-time during the fulfillment of their service obligation.

For purposes of the service obligation, the following definitions are used:

- a. **Full-Time Service:** Defined as a minimum of 32 hours per week providing direct client care at an approved practice site or 30 hours per week providing direct client care at an approved practice site that is in a school setting.
- b. **Direct Client Care:** Defined as face-to-face care, telehealth-based care, and first-line supervision. This includes behavioral health services such as prevention, early intervention, assessment, treatment, counseling, procedures, patient self-care, patient education, and documentation relating to encounters with patients being treated with, or suspected of needing, behavioral health services.
- c. **First-line Supervision:** Defined as providing direct supervision over staff providing direct client care.

Individual awardees may have up to four weeks a year away from their MBH-RRP approved practice site for vacation, holidays, continuing professional education, illness, or any other reason as approved by their site. This provision shall not apply to school vacations during which the individual awardee is practicing at an approved practice site that is in a school setting.

Should the individual awardee take more than four weeks a year as stated above and the organizational grantee agrees to this, the individual awardee must extend their service obligation. The grantee's service obligation will be extended for each day of absence over the allowed four weeks per year. No service obligation may be extended beyond December 31, 2033, and the grantee's service obligation must be completed by December 31, 2033.

7. Provisions for Suspension, Waiver, Cancellation or Voluntary Termination of Service

An individual awardee may seek a waiver of their service obligation on the basis of an extraordinary circumstance. All requests for a waiver must be documented by organizational grantees. HCAI may request applicable documentation and may deny a waiver decision if documentation is not provided.

The following extraordinary circumstances may result in the waiver of a service obligation:

- a. **Disability or Serious Illness:** An individual awardee experiences a documented long-term medical condition or disability that renders them unable to fulfill their service obligation.
- b. **Death of individual awardee:** In the event of an individual awardee death, all service obligations are considered null and void.
- c. **Military Deployment or Activation-** An individual awardee is called to active duty in the United States Armed Forces, including activation if the individual awardee is a reservist or the drafting of the individual awardee into active service, and the length of time in the armed services renders them unable to fulfill their service obligation. This does not include circumstances where the individual awardee voluntarily enlists into the armed forces.
- d. **Loss of Immigration or Legal Residency Status-** An individual awardee loses lawful immigration or legal residency status thereby preventing the individual awardee from legally working in the state.

Individual awardees may request that the fulfillment of their service obligation be suspended. All requests for a suspension must be documented by organizational grantees. HCAI may request applicable documentation for review and may deny a suspension decision if documentation is not provided.

The following circumstances may result in the suspension of a service obligation:

8. **Natural Disaster, Act of God, or Declared Emergency:** A major natural disaster, catastrophic event, or declared local, state, or federal emergency significantly disrupts the individual awardee's ability to fulfill their obligation.
9. **Institution or Site Closure or Program Disruption:** The assigned service site, educational institution, or program closes or becomes non-operational, and an alternative placement is not immediately available.
10. **Temporary Disability:** The individual awardee experiences a disability that is temporary in nature and temporarily precludes them from fulfilling their service obligation.
11. **Military Deployment or Activation:** The individual awardee is called to active duty in the United States Armed Forces, including activation if the individual awardee is a reservist or the drafting of the individual awardee into active service, and the length of time in the armed services renders them temporarily unable to fulfill their service obligation. This does not include circumstances where the grantee

voluntarily enlists into the armed forces.

Individual awardees who are granted a suspension will be given six months to become reemployed in an eligible setting. The organizational grantee may extend the suspension period on a case-by-case basis. Notwithstanding any provision in this Agreement, the Service Obligation must be completed on or before December 31, 2033, or the individual awardee may be held in breach.

If the individual awardee plans to be away from his/her approved practice site(s) for paternity/maternity/adoption leave, the individual awardee is required to inform the organizational grantee at least 60 calendar days before taking the leave. HCAI allows individual awardees to be away from their approved practice site(s) within the timeframes established by either the Family Medical Leave Act (up to 12 weeks), or other federal and state law; however, the individual awardee must adhere to the leave policies of his/her approved practice site.

E. Reports and Deliverables:

1. Grantee shall submit all the deliverables for Grant Number [**Grant Agreement Number**] no later than the due dates stated above in Section C. Scope of Work. Grantee will submit deliverables, including annual MBH-RRP financial reports and activities reports, using HCAI's web-based Funding Portal.

F. Invoicing:

1. For services satisfactorily rendered in accordance with the Scope of Work, and upon receipt and approval of each annual report as specified in subsection (3) hereunder, HCAI agrees to compensate Grantee in accordance with the rates specified herein.
2. HCAI will release the annual prospective payments upon receipt and review of annual Financial Reports 1-3.
3. There will be no payment associated with Annual Report 4.
4. Annual reports shall include the Agreement Number and shall be submitted electronically. HCAI or its designee will make payments to the Grantee under this Agreement after all required reports are submitted and approved by HCAI or its designee. Additional information may be requested by HCAI or its designee during the term of the Grant Agreement. HCAI or its designee will notify the Grantee of approval in writing.

G. Budget Detail and Payment Provisions:

1. HCAI and/or its designee will make annual prospective payments to Grantee in the years of 2027 through 2029, once the specified Financial and Activity Reports

have been reviewed and approved by HCAI and/or its designee for quality and accuracy.

2. Under no circumstances shall HCAI make payments after October 31, 2029.

H. Recoupment Provisions

1. HCAI shall recoup any funds used by the Grantee for purposes outside the Scope of Work detailed in Section C of this agreement.
2. Grantee shall return to HCAI any unspent funds issued to the Grantee. Unspent funds must be returned to HCAI within two months following the end of the calendar budget year for which funds were provided.

I. Breach Provisions

1. Grantee shall return to HCAI any funds paid to individuals who fail to fulfill required service obligations detailed in Section D of this agreement. Grantees shall require individuals to return the full amount of their award to the Grantee so that the Grantee can return these funds to HCAI within eight months of the date of breach. If an organization grantee is unable to recoup partial or complete funds from the individual, the organization will be responsible to repay any and all funds to HCAI within eight months of the date of breach.
2. HCAI may request supplemental reports and monitor expenditures throughout the grant year to verify whether any funds must be recouped by HCAI or HCAI's designee.
3. Any funds HCAI is entitled to recoup under this Section I must be repaid by the Grantee within eight months of breach notification.

J. Accounting Records and Audits: Grantee shall comply with the following reporting requirements:

1. Accounting: Accounting for Grant Funds will be in accordance with the Grantee's accounting practices based on generally accepted accounting principles consistently applied regardless of the source of funds. Supporting records must be in sufficient detail to show the exact amount and nature of expenditures.

Organizations may elect to commingle Grant Funds received pursuant to the Agreement with any other income available for operation of the Program provided that the institution maintains such written fiscal control and accounting procedures as are necessary to assure proper disbursement of, and accounting for, such commingled funds, including provisions for:

- a. The accurate and timely separate identification of funds received.
 - b. The separate identification of expenditures that cannot be paid with Grant Funds.
2. An adequate record of proceeds from the sale of any equipment purchased by funds.
3. Expenditure Reporting: Reports on Program expenditures under the Agreement must be submitted as requested by HCAI for purposes of program administration, evaluation, or review.
4. Records Retention and Audit:
- a. The Grantee shall permit the HCAI Director, or the California State Auditor, or the State Controller, or their authorized representatives, access to records maintained on source of income and expenditures of its fellowship program for the purpose of audit and examination.
 - b. The Grantee shall maintain books, records, documents, and other evidence pertaining to the costs and expenses of this grant (hereinafter collectively called the "records") to the extent and in such detail as will properly reflect all net costs, direct and indirect, of labor, materials, equipment, supplies and services, and other costs and expenses of whatever nature for which reimbursement is claimed under the provisions of this Agreement.
 - c. The Grantee agrees to make available at the office of the Grantee at all reasonable times during the period set forth in subparagraph (d) below any of the records for inspection, audit or reproduction by an authorized representative of the State.
 - d. The Grantee shall preserve and make available its records (a) for a period of three (3) years from the date of final payment under this Agreement, and (b) for such longer period, if any, as is required by applicable statute, by any other clause of this Agreement, or by subparagraph (i) or (ii) below:
 - i. If this Agreement is completely or partially terminated, the records relating to the work terminated shall be preserved and made available for a period of three (3) years from the date of any resulting final settlement.
 - ii. Records which relate to (1) litigation of the settlement of claims arising out of the performance of this Agreement, or (2) costs and expenses of this Agreement as to which exception has been taken by the State or any of its duly authorized representatives, shall be retained by the

Grantee until disposition of such appeals, litigation, claims, or exceptions.

K. Budget Contingency Clause:

1. It is mutually agreed that if the Budget Act of the current year and/or any subsequent years covered under this Agreement does not appropriate sufficient funds for the program, this Agreement shall be of no further force and effect. In this event, the HCAI shall have no liability to pay any funds whatsoever to Grantee or to furnish any other considerations under this Agreement and Grantee shall not be obligated to perform any provisions of this Agreement.
2. If funding for any fiscal year is reduced or deleted by the Budget Act for purposes of this grant program, the HCAI shall have the option to either cancel this Agreement with no liability occurring to the HCAI or offer an agreement amendment to Grantee to reflect the reduced amount.

L. Budget Adjustments:

1. Budget adjustments consist of a change within the approved budget that does not amend the total amount of this Agreement or any other terms of the Agreement.
2. All requests for budget adjustments shall be submitted in writing for HCAI approval and shall include an explanation for the reallocation of funds by the Grantee. An accounting of how the funds were expended will also be submitted with the last annual report.

M. Media and Press Engagements:

1. Media Engagement: Before undertaking or responding to any media inquiries or initiating any press engagement regarding this Grant Agreement or the subject matter herein, Grantee shall contact the HCAI Program Officer to request HCAI's written approval.
2. Requirement to Wait for HCAI/California Department of Health and Human Services (CalHHS)/Governor's Office Announcement: Grantees who plan to issue their own press release, shall contact the HCAI Program Officer to request HCAI's written approval. If HCAI, CalHHS, or the Governor's Office plans to issue an official announcement regarding the award, the Grantee may only issue its own press release after that official announcement is published—and only after receiving HCAI's review and approval.
3. HCAI Approval Required Before Publication: All press releases drafted by the awardee organization related to this Agreement or the subject matter herein must be submitted to the assigned HCAI program officer at least two weeks prior to the

intended publication date. Release of any materials is prohibited until HCAI has completed its review and granted approval.

4. Use of Awardee Materials by State Entities: Awardee organizations acknowledge that portions or the entirety of their submitted press release may be used, modified, or incorporated by HCAI, CalHHS, or the Governor's Office without prior notice.

N. Executive Order N-6-22-Russia Sanctions:

On March 4, 2022, Governor Gavin Newsom issued Executive Order N-6-22 (the EO) regarding Economic Sanctions against Russia and Russian entities and individuals. "Economic Sanctions" refers to sanctions imposed by the U.S. government in response to Russia's actions in Ukraine, as well as any sanctions imposed under state law. The EO directs state agencies to terminate contracts with, and to refrain from entering any new contracts with, individuals or entities that are determined to be a target of Economic Sanctions. Accordingly, should the State determine Contractor is a target of Economic Sanctions or is conducting prohibited transactions with sanctioned individuals or entities, that shall be grounds for termination of this agreement. The State shall provide Contractor advance written notice of such termination, allowing Contractor at least 30 calendar days to provide a written response. Termination shall be at the sole discretion of the State.

O. General Terms and Conditions:

1. Timeliness: Time is of the essence in this Agreement. Grantee will submit the required deliverables as specified and adhere to the deadlines as specified in this Agreement. Anticipating potential overlaps, conflicts, and scheduling issues, to adhere to the terms of the Agreement, is the sole responsibility of the Grantee.
2. Final Agreement: This Agreement, along with the Grantee's Application, exhibits, and forms constitutes the entire and final agreement between the parties and supersedes any and all prior oral or written agreements or discussions.
3. Ownership and Public Records Act: All reports and the supporting documentation and data collected during the funding period which are embodied in those reports, shall become the property of the State and subject to the California Public Records Act (Gov. Code § 7920.000 et seq.).
4. Audits: The Grantee agrees that HCAI, the Department of General Services, the State Auditor, or their designated representative shall have the right to review and to copy any records and supporting documentation pertaining to the performance of this Agreement. Grantee agrees to maintain such records for possible audit for a minimum of three (3) years after final payment, unless a longer period of records retention is stipulated by the State. Grantee agrees to allow the auditor(s) access to such records during normal business hours and to allow interviews of

any employees who might reasonably have information related to such records. Further, the Grantee agrees to include a similar right of the State to audit records and interview staff in any subcontract related to performance of this Agreement. (Gov. Code §8546.7, Pub. Contract Code §10115 et seq., Cal. Code Regs. Tit. 2, Section 1896).

5. Site Visits: The Grantee agrees to allow HCAI to schedule a site visit during the term of the grant agreement to meet program faculty and conduct trainee interviews. The purpose is to evaluate the training and training site to ensure alignment with HCAI's objectives.
6. Independence from the State: Grantee and the agents and employees of Grantee, in the performance of this Agreement, shall act in an independent capacity and not as officers or employees or agents of the State.
7. Non-Discrimination Clause: (See Cal. Code Regs., Title 2, § 11105):
During the performance of this Agreement, Grantee and its subcontractors shall not deny the Agreement's benefits to any person on the basis of race, religious creed, color, national origin, ancestry, physical disability, mental disability, medical condition, genetic information, marital status, sex, gender, gender identity, gender expression, age, sexual orientation, or military and veteran status, nor shall they discriminate unlawfully against any employee or applicant for employment because of race, religious creed, color, national origin, ancestry, physical disability, mental disability, reproductive health decision making, medical condition, genetic information, marital status, sex, gender, gender identity, gender expression, age, sexual orientation, or military and veteran status. Grantee shall ensure that the evaluation and treatment of employees and applicants for employment are free of such discrimination.
8. Grantee and its subcontractors shall comply with the provisions of the Fair Employment and Housing Act (Gov. Code § 12900 et seq.), the regulations promulgated thereunder (Cal. Code Regs., tit. 2, § 11000 et seq.), the provisions of Article 9.5, Chapter 1, Part 1, Division 3, Title 2 of the Government Code (Gov. Code §§ 11135-11139.8), and any regulations or standards adopted by HCAI to implement such article.
9. Grantee shall permit access by representatives of the Civil Rights Department and HCAI upon reasonable notice at any time during the normal business hours, but in no case less than 24 hours' notice, to such of its books, records, accounts, and all other sources of information and its facilities as said Department or HCAI shall require to ascertain compliance with this clause.
10. Grantee and its subcontractors shall give written notice of their obligations under this clause to labor organizations with which they have a collective bargaining or other agreement.

11. Grantee shall include the nondiscrimination and compliance provisions of this clause in all subcontracts to perform work under this Agreement.
12. Independence from the State: Grantee, in the performance of this Agreement, shall act in an independent capacity and not as officers or employees or agents of the State.
13. Waiver: The waiver by HCAI of a breach of any provision of this Agreement by the Grantee will not operate or be construed as a waiver of any other breach. HCAI expressly reserves the right to disqualify Grantee from any future grant awards for failure to comply with the terms of this Agreement.
14. Approval: This Agreement is of no force or effect until signed by both parties. Grantee may not commence performance until such approval has been obtained.
15. Amendment: No amendment or variation of the terms of this Agreement shall be valid unless made in writing, signed by the parties, and approved as required. No oral understanding or agreement not incorporated in the Agreement is binding on any of the parties.
16. Assignment: This Agreement is not assignable by the Grantee, either in whole or in part, without the consent of the State in the form of a formal written amendment.
17. Indemnification: Grantee agrees to indemnify, defend, and hold harmless the State, its officers, agents and employees (i) from any and all claims and losses accruing or resulting to any and all Grantee's, subcontractors, suppliers, laborers, and any other person, firm, or corporation furnishing or supplying work services, materials, or supplies resulting from the Grantee's performance of this Agreement, and (ii) from any and all claims and losses accruing or resulting to any person, firm, or corporation who may be injured or damaged by the Grantee in the performance of this Agreement.
18. Disputes: Grantee shall continue with the responsibilities under this Agreement during any dispute. Any dispute arising under this Agreement, shall be resolved as follows:
19. The Grantee will discuss the problem informally with the Program Manager. If unresolved, the problem shall be presented, in writing, to the Deputy Director stating the issues in dispute, the basis for the Grantee's position, and the remedy sought. Grantee shall include copies of any documentary evidence and describe any other evidence that supports its position with its submission to the Deputy Director.

20. Within ten (10) working days after receipt of the written grievance from the Grantee, the Deputy Director or their designee shall make a determination and shall respond in writing to the Grantee indicating the decision and reasons for it.
21. Within ten (10) working days of receipt of the Deputy Director's decision, the Grantee may appeal the decision of the Deputy Director by submitting a written appeal to the Chief Deputy Director stating why the Grantee does not agree with the Deputy Director's decision.
22. Within ten (10) working days after receipt of appeal, the Chief Deputy Director or their designee shall respond in writing to the Grantee with their decision. The Chief Deputy Director's decision will be final.
23. Termination for Cause: HCAI may terminate this Agreement and be relieved of any payments should the Grantee fail to perform the requirements of this Agreement at the time and in the manner herein provided. Grantee shall return any Agreement Funds that were previously provided to Grantee for use within 60 days of termination.
If all Grant Funds have not been expended upon completion of the Agreement term, HCAI will request the remittance of all unexpended funds. If HCAI determines that improper payments have been made to Grantee, HCAI will request disgorgement of all disallowed costs. Grantee may dispute disallowed costs in accordance with Section J, Paragraph 12. Grantee will submit a check or warrant for the amount due within 60 days of the Grantee's receipt of HCAI's disgorgement request or 30 days from the Grantee's receipt of HCAI's last Dispute decision. If Grantee fails to remit payment, HCAI may withhold the amount due from any future grant payments.
24. Grantee's Subcontractors: Nothing contained in this Agreement shall create any contractual relationship between the State and the Grantee or any subcontractors, and no subcontract shall relieve the Grantee of its responsibilities and obligations hereunder. The Grantee agrees to be as fully responsible to the State for any and all acts and omissions of its subcontractors and of persons either directly or indirectly employed by the Grantee. The Grantee's obligation to pay its subcontractors is an independent obligation from the State's obligation to disburse funds to the Grantee. As a result, the State shall have no obligation to pay or to enforce the payment of any money to any subcontractor.
25. Governing Law: This Agreement is governed by and shall be interpreted in accordance with the laws of the State of California.
26. Survival: The right of HCAI to recoup Grant Funds provided to Grantee under this Agreement shall survive termination of this Agreement.
27. Use of Funds: These funds shall not be used to supplant existing federal, state, local, or private funds to support this program.

28. Unenforceable Provision: In the event that any provision of this Agreement is unenforceable or held to be unenforceable, then the parties agree that all other provisions of this Agreement have force and effect and shall not be affected thereby.

29. Incorporation by Reference: The Medi-Cal Behavioral Health Recruitment and Retention Program Grant Guide for Grant Year 2026 (Grant Guide) is incorporated by reference into this Agreement. In the event of conflict between any term and condition contained within the four corners of this agreement and any term and condition of the Grant Guide, the language in this Agreement shall prevail.

P. Project Representatives:

The representatives of HCAI and the contact information for each party during the term of this Agreement are listed below. Direct all inquiries to:

State Agency: Department of Health Care Access and Information	Grantee: [Organization Name]
Section/Unit: Health Workforce Development/ MBH-RRP	Program Name: [Training Program Name]
Name: [Enter Program Officer Name]	Program Director Name:
Address: 2020 West El Camino Avenue, Suite 1222 Sacramento, CA 95833	Address:
Phone: [Enter Program Officer Phone Number]	Phone:
Email: MBHRRP@HCAI.ca.gov	Email:

Medi-Cal Behavioral Health Recruitment and Retention Program - Grant Guide
Grant Year 2026

Direct all grant inquiries to:

State Agency: Department of Health Care Access and Information	Grantee: [Organization Name]
Section/Unit: Health Workforce Development/ MBH-RRP	Program Name: [Training Program Name]
Name: [Enter Program Officer Name]	Name of Representative:
Address: 2020 West El Camino Avenue, Suite 1222 Sacramento, CA 95833	Address:
Phone: [Enter Program Officer Phone Number]	Phone:
Email: MBHRRP@HCAI.ca.gov	Email:

IN WITNESS WHEREOF, the parties here to have executed this Agreement.

DEPARTMENT OF HEALTH CARE
ACCESS AND INFORMATION

GRANTEE

Signature:

Signature:

Name:

Name:

Title:

Title:

Date:

Date:
