Behavioral Health Centers of Excellence (COE): June Office Hours

Focus: EBP Key Roles & EBP Data Reporting Requirements and Use Cases

June 18, 2026

DHCS
CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES

Housekeeping

- Today's Office Hours will be recorded for notetaking purposes and will not be shared publicly.
- The slides will be posted to the Behavioral Health COE Resource Hub following the call.
- Please submit questions in the Q&A function.

DHCS EBP Billing Office Hours Webinar: Wednesday, July 1 from 1 – 2:30 p.m.

- DHCS will be hosting an EBP Billing Office Hours webinar to support counties with implementing the BH-CONNECT EBPs. This session will focus on the policy and methodology for each of the BH-CONNECT monthly rates. DHCS program and fiscal staff will walk through the billing framework and will be available to answer questions.
- This forum is intended to resolve any misunderstandings, provide clarifications, and address county concerns related to the EBP rate structure and implementation.
- Counties and their fiscal staff are encouraged to bring questions to support a productive and informative discussion.

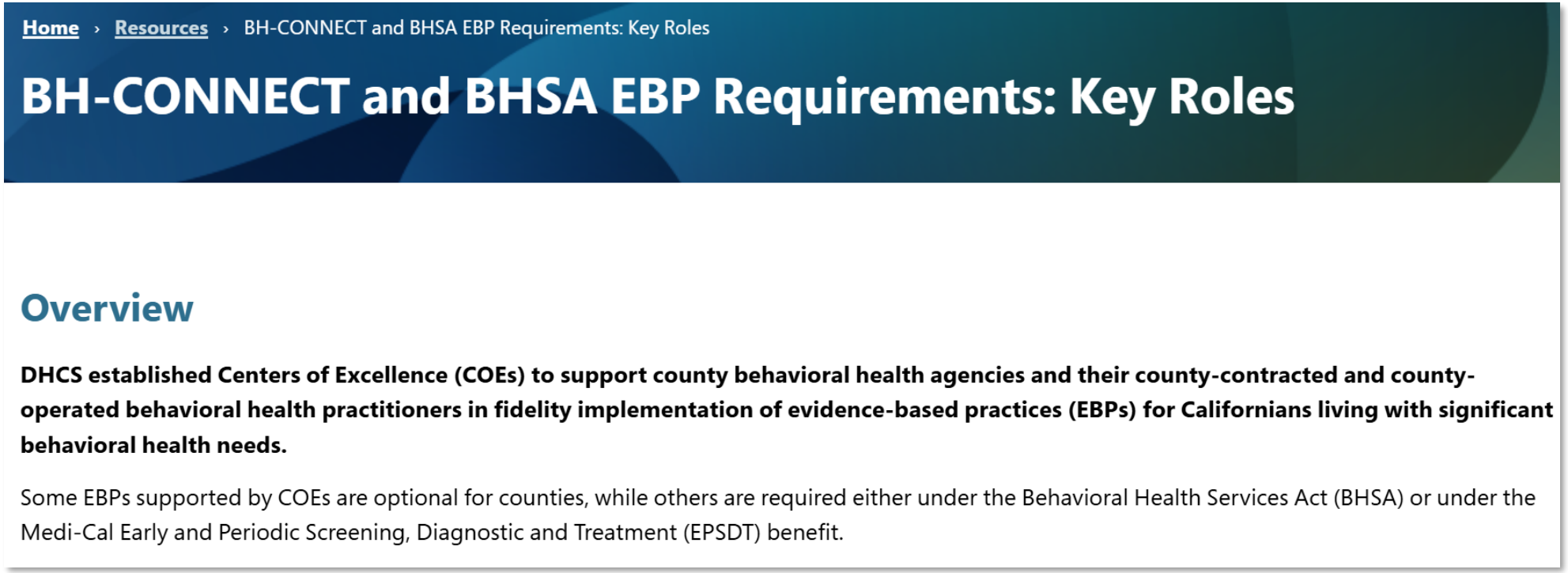
EBP Billing Office Hours Webinar – Registration Link

Agenda

- Key Roles in Evidence-Based Practice (EBP) Implementation
- EBP Reporting Requirements and Use Cases
- How COEs Support Behavioral Health Practitioners in Data Collection and Reporting to Support Training, Technical Assistance, and Achievement of Fidelity Milestones or EBP Certification/Accreditation

Roles and Responsibilities in EBP Implementation

Webpage Walkthrough: EBP Requirements: Key Roles



BH-CONNECT and BHSA EBP Requirements: Key Roles - Behavioral Health COE Resource Hub

Roles in EBP Implementation: Practitioners, Counties, COEs, DHCS

Implementation Planning	Training to deliver EBPs	Service Delivery
Payment	Fidelity Monitoring	**Data Collection**

Data Reporting Requirements and Use Cases

Role and Responsibilities of COEs

» Support county behavioral health plans (BHP) and their provider networks via:

- County consultations to support implementation planning
- Training and technical assistance to practitioners (new and existing)
- Data tools to collect information for:
  - Continuous quality improvement (CQI)
  - Monitoring EBP fidelity and client outcomes
  - Certification or accreditation in the EBP
- Sharing progress in provider network performance with county BHPs and DHCS
- Refer questions regarding EBP policy and payment to DHCS

Behavioral Health Practitioner Data Reporting Requirements

Data Required for COE TTA, Fidelity Monitoring, and/or EBP Certification

Data reported by behavioral health practitioners may serve multiple purposes, including but not limited to:

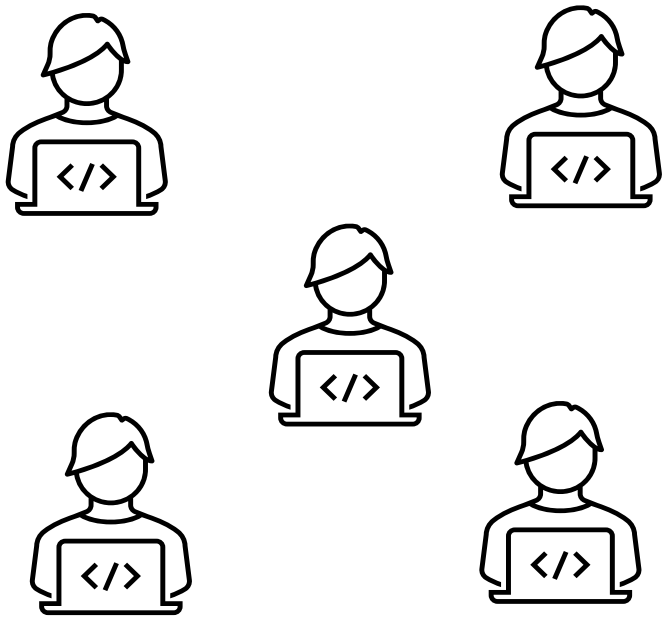
- **Monitoring county participation and engagement** with the COEs, via their county-operated or county-contracted practitioners.
- **Tracking behavioral health practitioners' participation** in training and technical assistance and achievement of fidelity milestones.
  - De-identified aggregated client data may be reported to DHCS to support outcome monitoring.*
  - Under BH-CONNECT Incentive Program, specific EBPs (ACT/FACT, CSC, and IPS) require the collection of outcome data to support incentive program payments.
- For more information on data collection, please see the EBP TTA, Fidelity, and Data Policy Manual.

***Identifiable individual-level client data may be reported to the COE for the sole purpose of supporting consultation to achieve EBP certification or licensing, accreditation, and/or EBP fidelity.**

Behavioral Health Practitioner/COE Data Flow

Behavioral Health Practitioner-COE

County BHP*



Behavioral Health Practitioner Teams

*No county BHP data reporting expected

Practitioners may report individual-level data to COEs

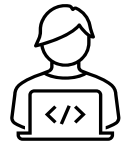
COEs
PMHP at UCLA
EPI-CAL
IPS Employment Center
Clubhouse International
MST Services
FFT LLC
PCIT International
RCFFP

COE-HMA & DHCS

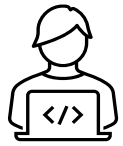
COEs report aggregated data to HMA and DHCS

HMA & DHCS

Viewers



DHCS Internal Reporting



Executive Reporting

Data Informs EBP Fidelity and Accreditation/Certification

EBP	Baseline Assessments	Fidelity Assessments
ACT & FACT[1,2]	Survey of core components of ACT and FACT teams.	ACT: Tool for Measurement of ACT (TMACT) (1) In-person site visit; (2) Staff interviews; (3) Chart review FACT: TMACT + 2 R-FACT items
CSC for FEP[1,2]	Structured interview on core components of CSC model.	First Episode Psychosis Services Fidelity Scale (1) Staff interviews; (2) Health record review
IPS[1,2]	Structured interview with IPS supervisor and agency leader.	IPS Fidelity Tool (1) In-person site visit (2) Written report, meeting, action plan to improve fidelity
HFW[5]	Portal Submission (County BHP/Provider Infrastructure) + Provider Training and Technical Needs Assessment (TTNA)	Document Assessment and Review Tool (DART) • Record review

Accreditation (Clubhouse)[1,3]	License/Certification (MST, FFT and PCIT)[4]
• Accreditation Type (i.e., Initial or Re-review) • Accreditation Status	• License/Certification Type (i.e., Initial or Renewal) • Licensure/Certification Status

References: (1) Introduction to the Adult EBP COE Webinar Slides and Recording; **(2)** EBP Training, Technical Assistance, Fidelity Monitoring and Data Collection Policy Manual; **(3)** The Clubhouse Accreditation Process Overview; **(4)** Introduction to the Children/Youth EBP COEs Webinar Slides and Recording; **(5)** Draft HFW Policy Manual

Common Data Elements Tied to Fidelity Monitoring and Outcomes

Fidelity Monitoring and Process Outcomes Data Points:

Applicable to all COEs

- Up to Date Training
- Number of Individuals Enrolled
- Number of Active Individuals (Intake, 6 Months & Discharge)
- Reason for Discharge
- Average Treatment Length by Reason for Discharge

Outcome-Related Data Points for Incentive Program:

Applicable to ACT & FACT, IPS, CSC

- Work or School Involvement
- Justice System Involvement*
- Homelessness
- Quality of Life

Required to support BH-CONNECT Incentive Program

*IPS is not required to report on justice involvement

Data Assessment Tools Required for Behavioral Health Practitioners

EBP	COE	Data Tools by COE
ACT and FACT	PMHP at UCLA	ACT and FACT Data Tool Link
Clubhouse Services	Clubhouse International	Clubhouse Data Tool Link
CSC for FEP	EPI-CAL*	CSC for FEP Data Tool Link
FFT	FFT LLC	FFT Data Tool Link
HFW	RCFFP	*HFW Data Tool Link Forthcoming*
IPS	The IPS Employment Center at RFMH, Inc.	IPS Supported Employment Data Tool Link
MST	MST Services	MST Data Tool Link
PCIT	PCIT International	PCIT Data Tool Link

*The EPI-CAL team is in the process of reducing the battery of surveys.

See a full list of the data tools on the Data Assessment Tools Required For Behavioral Health Practitioners Page of the Behavioral Health COE Resource Hub.

County BHP View of Provider Network Performance

Q: What would support the needs of county BHPs as oversight entity?

EBP	COE	Mechanism: Data Platform and/or Other Reports
ACT and FACT	PMHP at UCLA	Data platform (*in development*) with role-based access Fidelity and team-level performance shared in online dashboards
Clubhouse Services	Clubhouse International	ClubMiCIL data platform with role-based access Practitioner status reports (*in development)*
CSC for FEP	EPI-CAL	Beehive data platform with role-based access Fidelity reports emailed as completed and staff training completion rates shared from Cornerstone
FFT	FFT LLC	Client Service System (CSS) data platform for behavioral health practitioners Other shared reports (*in development*)
HFW	RCFFP	WrapStat data platform with role-based access Site-level fidelity performance data shared in dashboards and reports (*in development)*
IPS	IPS Employment Center	Custom web app with role-based access for data entry and visualizations County/agency/team-level visualizations and fidelity tool (*in development*)
MST	MST Services	MSTI data platform for behavioral health practitioners and supervisors Bi-annual Program Implementation Review shared
PCIT	PCIT International	Qualtrics access for behavioral health practitioners Quarterly implementation reports shared, including certification status and risks identified

Note: DHCS will provide more details on county's line of sight into their provider network performance.

EBP Data Requirements to Support Fidelity Implementation

COE Data Panelists

Adult COE	Lead Panelist
ACT and FACT COE: PMHP at UCLA	Lisa Davis, Ph.D., LCSW
Clubhouse COE: Clubhouse International	Veronica Cigarroa
CSC COE: EPI-CAL	Tara Niendam, Ph.D.
IPS COE: IPS Employment Center	Ana Florence, Ph.D.
Children & Youth COE	**Lead Panelist**
FFT COE: FFT LLC	Brandy Morin, LPC, CFTP, CATP
HFW COE: RCFFP	Daniel Buchanan, MSW
MST COE: MST Services	Betsy Clipper
PCIT COE: PCIT International	Melanie Nelson, Ph.D.

How Do COEs Support Behavioral Health Practitioners*?

Discussion Prompts:

- How are COEs communicating use cases for required data?
- What option(s) are COEs offering for practitioners to support reporting of data to the COEs?
- What are early lessons and how are COEs adapting to support the varied needs of practitioners and counties?

*Includes county-operated and/or county-contracted practitioners

Open Q&A Session

Reminders

Behavioral Health COE Resource Hub: Data FAQs

- New data-related FAQs coming soon!
  - Data Frequently Asked Questions - Behavioral Health Centers of Excellence (COEs) Resource Hub

New FAQs will be highlighted in the July newsletter!

2026 Monthly Office Hours

July

- Date: Thursday, July 16
- Time: 1 – 2 p.m. PDT
- July 2026 Office Hours Registration Link

August

- Date: Thursday, August 20
- Time: 1 – 2 p.m. PDT
- August 2026 Office Hours Registration Link

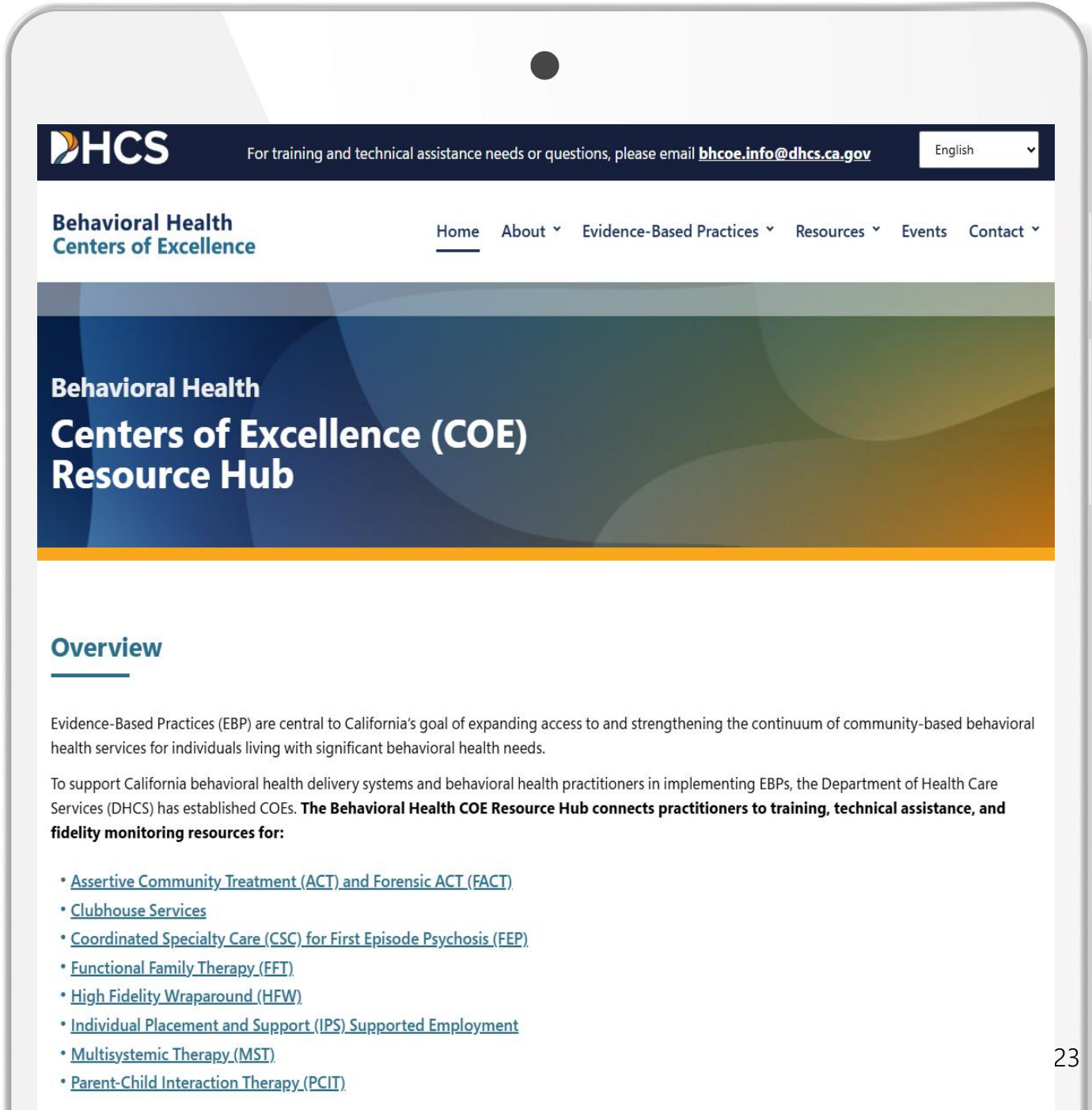
September

- Date: Thursday, September 17
- Time: 1 – 2 p.m. PDT
- September 2026 Office Hours Registration Link

Behavioral Health COE Resource Hub

Get connected to trainings, technical assistance, and fidelity monitoring resources:

- Behavioral Health COE Resource Hub
- Join the newsletter
- BH COE Questions & Feedback Form
- Ask questions: bhcoe.info@dhcs.ca.gov



Thank you for attending!

DHCS

The information included in this presentation may be pre-decisional, draft, and subject to change.

Appendix

(Forthcoming) Resources: Data-Related FAQs

Why are COEs requiring behavioral health practitioners (individuals, teams or sites) they engage with in training and technical assistance and fidelity monitoring to directly submit data to the COEs?

To ensure timely continuous quality improvement (CQI) and monitoring of team performance, county-operated and county-contracted behavioral health practitioners are required to report data directly to each COE. Direct data reporting from behavioral health practitioners to the COEs was intended by DHCS to alleviate data reporting burden on county behavioral health plans (BHP) and reduce delays in COE required data reporting to DHCS. This data is also key to supporting timely CQI and monitoring of team performance as part of COE training and technical assistance supports.

Additionally, the key roles of behavioral health practitioners, counties, COEs, and DHCS in implementing the EBPs are further outlined on the Resource Hub. Please see BH-CONNECT and BHSA EBP Requirements: Key Roles and the EBP Training, Technical Assistance, Fidelity Monitoring and Data Collection Policy Manual for more information.

DHCS is exploring options for county BHPs to have line of sight into behavioral health practitioner reported data submitted to COEs.

(Forthcoming) Resources: Data-Related FAQs

Do all COEs have the same reporting requirements to DHCS?

All COEs are required to report on a common set of aggregate provider-level data elements to DHCS to support tailored training and technical assistance to behavioral health practitioners and support achievement of certification or licensing, accreditation, and/or EBP fidelity. EBP program-specific client-level outcomes are also required to support the BH-CONNECT Incentive Program.

In addition, each EBP requires behavioral health practitioners to report unique data via data tools that reflect each EBP's specific training and technical assistance and fidelity monitoring approach. For further information on each EBP's data tools, please see the Data Assessment Tools Required for Behavioral Health Practitioners and Behavioral Health COE January 2026 Office Hours Slides.

Additional information on data requirements can be found on the BH-CONNECT and BHSA EBP Requirements: Key Roles webpage and EBP Training, Technical Assistance, Fidelity Monitoring and Data Collection Policy Manual.