**FAQ: CTC-RI IBH Learning Collaborative with a focus on NCQA Behavioral Health Distinction in Primary Care and Virtual IBH “Call for Applications”**

*This document was created based on questions asked at the information session held via zoom on 1/15/21 at 8am. The information session was open to any practice that wished to join.*

*Please reach out to* *ssummers@ctc-ri.org* *with further questions.*

**Prerequisites/Eligibility**

**What are the basic prerequisites for this opportunity?**

Practices applying for this opportunity must be PCMH certified and already have an integrated behavioral health clinician in place.

**Can practices that are already participating in another CTC initiative apply?**

Yes, practices can already be involved in another CTC initiative (i.e. Moms PRN or the Chronic Conditions Telehealth Learning Collaborative). However, practices should internally assess whether they have the capacity to be involved in more than one CTC initiative.

**Application process**

**If practice organizations wish to apply for multiple practice sites, can they? How should they apply?**

Yes, practices can apply for multiple sites. For a multi-site practice, the application package would consist of the following:

1. One application form that covers all sites, with additional site information provided when prompted OR a separate application for each site if desired
2. One System of Care support letter that covers all sites, with all sites listed
3. Multiple practice letters of commitment—one for each site
4. Multiple pre-assessments—one for each site

**Can a multi-site practice apply as a whole?**

Yes, if a practice organization would like to apply as a whole and work on one project across multiple sites, they are welcome to do so. Please be aware that in this case, the practice would only be eligible to receive one incentive payment.

**Roles**

**Who should fill the role of the provider champion and the practice lead?**

For this initiative, practices can choose either a BH or a medical provider as the provider champion. In either case, practices should anticipate significant involvement for the BH provider as well as some involvement for the medical provider.

When choosing the practice lead for the project, practices should consider a staff member with the capacity and ability to integrate the project into practice workflow. Staff who are already familiar with the NCQA application process may be a particularly good fit.

**How involved will the nurse care manager and IT support be in the process?**

Involvement of the nurse care manager and IT staff will depend on what goals the practice chooses to focus on in the PDSA. While practices should plan to have the NCM and IT staff involved to some extent, they will be included on an as-needed basis. For instance, a practice that already has much of their telehealth technology and infrastructure in place may not need as much IT support.

**What if the BH staff member is split between multiple sites?**

If the practice applies for multiple sites, the BH clinician would be expected to participate in the process at each site they are a part of, including practice facilitation meetings, the PDSA process, and completion of pre- and post-assessments.

**Deliverables**

**What are the project deliverables and expectations?**

Practices taking part in this initiative will need to complete the following deliverables for each payment:

For initial $5,000 payment:

* Completion of all application materials
* Completion of tele-IBH pre assessment
* Attendance at kick off meeting
* Engagement with practice facilitator

For 2nd $2,500 payment:

* Participation in monthly meetings with practice facilitator
* Participation in other learning collaborative meetings
* Creation of a PDSA
* Completion of tele-IBH post-assessment

For 3rd $2,500 payment:

* Application for NCQA BH Distinction

OR

* Project plan outlining practice intention to apply for NCQA BH distinction within one year

**Are practices required to apply for NCQA BH distinction?**

Not necessarily, but practices are expected to work toward application over the course of their involvement with this project. To be eligible for the final $2,500 payment, practices can either apply for NCQA BH distinction or submit a project plan outlining their intention to apply within a year from the end of the learning collaborative.

**For this project, when using the word “telehealth,” is a distinction being made between video and telephonic services?**

While CTC recognizes that practices are currently being compensated for telephonic visits, this initiative will focus on video visits under the assumption that compensation for telephone-only services will begin to be phased out. If practices are currently offering only telephonic visits, this could be a good option for their PDSA focus.