

Table of contents

• <u>BHCEF's purpose</u>	2
• <u>What does BHCEF do?</u>	3
• Help behavioral health treatment providers financially	
• Provide a prevention program curriculum for providers	
• <u>How does the process work?</u>	
• Grants awarded to qualified behavioral health treatment providers	4
• Prevention program curriculum for treatment providers	5
• <u>Grants:</u>	
• Eligibility criteria	6
• Application	8
• Application process	10
• Fund allocation	11
• Fund distribution	12
• Transparency	14
• <u>Prevention program curriculum:</u>	15
• Eligibility criteria	
• Prevention program curriculum	
• Program implementation and additional resources for treatment providers	

BHCEF'S Purpose

General Purpose

The corporation is a nonprofit public benefit corporation and is not organized for the private gain of any person. It is organized under the Nonprofit Corporation Law of California (*"California Nonprofit Corporation Law"*) for public charitable purpose.

Special Purpose

The specific purpose of the corporation shall include without limitation providing additional resources to behavioral healthcare providers based on performances.

Sources

- Articles of Incorporation of a Nonprofit Public Corporation filed with the California Secretary of State On 05/08/2018
- BHCEF By-Laws, Article 3 adopted by the Board of Directors on 06/05/2018

What Does BHCEF Do?

Financially Helping Behavioral Treatment Providers

Through annual grant campaigns, BHCEF offers qualified treatment providers funding to improve quality of care, including and not limited to partially funding scholarships. The process starts with a three-month application period and ends with one-month grant payments (*6 months after the application process has ended*). To ensure optimum transparency, BHCEF publishes campaigns results on its website one month after payments have been liquidated.

Providing a Prevention Program Curriculum to Providers

BHCEF has secured the support of professionals in the fields of psychiatry, psychology, internal medicine (*with SUD specialization*), life coaching, licensed marriage and family therapy, addiction counseling, and diet and nutrition to develop a prevention program that is licensed free of charge to applicants. In addition, BHCEF has developed a marketing pro forma to help providers develop the prevention program.

How does the Process Work? Grants to Qualified Treatment Providers

Reaching out Campaign to Potential Applicants: From December 1st to February 28th BHCEF is inviting treatment providers to apply for grants. Invitations are sent via email and U.S. mail

Applicants Qualification: To be eligible, applicants must meet specific criteria. Criteria are published on the BHCEF website

Application Process: Applications are processed by our BHCEF team who work in tandem with applicants

Fundraising: Throughout the year, BHCEF raises funds from various donors through fundraising campaigns handled by BHCEF (*yearly publication includes professional fundraisers' information*)

Grants Allocation: BHCEF has developed a method that includes the following parameters: total number of clients serviced, number of clients serviced by each applicant, applicant's economic efficacy, and applicant's clinical efficacy

Grants Payments: Grants are paid during the month of September via ACH or check pursuant to funding agreements between recipients and BHCEF

Results Publication: During the months of October and November, results are published on the BHCEF website

How Does the Process Work?

Prevention Program Curriculum for Treatment Providers

Purpose + Aim

- Spreading useful information about causes of addiction, addiction telltales, drugs inventory, and responses to acute situations encountered by those suffering from addiction
- The information is aimed to educate parents, adolescents, social influencers, and schools

Content

- The curriculum is organized in three groups: (i) Childhood (*from 3 YO to 11YO*), (ii) Adolescents (*from 12 YO to 18 YO*) and (iii) young adults (*from 19 YO to 25 YO*)
- Each group covers: (i) Addiction mechanisms, (ii) Social environment, (iii) Medical environment, and (iv) Taking action

Availability

- Curriculum is available to qualified applicants starting March 1st

Marketing and Additional Revenue

- To help providers to successfully implement the prevention program, BHCEF provides a marketing pro forma that enables them to determine their marketing and financial needs and resources

Grants Eligibility criteria

Be a business in good standing

Operate a business in any of the following capacities:

(i) Psychiatric hospitals, (ii) Residential treatment centers, (iii) Detoxification treatment centers, (iv) Partial hospitalization programs, (v) Intensive outpatient programs, (vi) Outpatient programs, (vii) Sober / halfway houses

Be actively and continuously in business in The United States of America for no less than 6 months *(Only US businesses are eligible. Businesses must be actively and continuously in business for more than 6 months. Businesses undergoing bankruptcy, liquidation, or who are winding up their operations or projects are not eligible)*

Fill out the application

Implement a reliable system that monitors and reports outcomes for each client and facility's overall performance

Grants Eligibility Criteria (2)

Agreeing without reserve to the terms contained in the application

Director/Manager must sign the application on behalf of the organization
(*provider*)

*

* *

Grants Application (1)

Form

Applications must be sent via electronic mail to steve@BHCEF.org

Content

- Applicant identification: All fields must be filled. During the application process, unfilled fields may be filled by BHCEF representatives. Information received via phone must be confirmed via email with applicant's URL
- Operations: All fields must be filled. During the application process, unfilled fields may be filled by BHCEF representatives. Information received via phone must be confirmed via email with applicant's URL. One given applicant can request a grant per facility when applicant owns, controls, or operates more than one facility.
- Modalities: Applicants must mark all modalities they regularly offer to patients during the year of reference
- Performance Analytics: This section aims at avoiding misconceptions
- Data: All fields must be filled. During the application process, unfilled fields may be filled by BHCEF representatives. Information received via phone must be confirmed via email with applicant's URL

Grants Application (2)

Supporting documentation

- All and every requested item must be provided by applicant.
- During the application process, missing documents may be provided to BHCEF. Additional or amended documents must be received no later than February 28th.
- Any document received afterwards will be discarded and application may be rejected for lack of completion.

Certain terms

Authentication and certification

Appendices: must be provided in PDF form

From time to time forms may be revised by the BOD

Forms are dated(MM/YY)

Application Process

- The process starts with applicant filling out an application for a grant with BHCEF
- Application process shall not exceed 92 calendar days (*From December 1st through February 28th*)
- Qualification or the lack thereof is notified to applicant via dated stamped electronic mail or facsimile. BHCEF's decision is final and not subject to challenges. Attempt to challenge BHCEF's qualification is sufficient cause for an applicant's disqualification
- Application contains pertinent information BHCEF needs to draft the funding agreement (*e.g., Tax ID #, legal name, address, NPI #*)
- Applicant must execute the application and provided all requested information
- Applicant must agree without reserve with the terms contained in the funding agreement
- By September 30TH qualified applicants will receive their grants via ACH, wire, or check
- All BHCEF grants are subject to federal and state reporting

Funds Allocation

Funds raised are pooled (\$\$)

Distributed funds = Funds raised – Operating costs

Capped at 15% + professional fundraisers costs if any (to be part of the annual disclosures)

Allocation parameters

- Total number of clients serviced by all applicants during the year of reference (A)
- Each applicant's total number of clients serviced during the year of reference (B)
- Each applicant's economic efficacy: total number of aggregated days of sobriety regarding the total potential of aggregated days of sobriety for this applicant (C)
- Each applicant must have an outcome survey system matching the standards contained in the application *(to measure progresses on a year-to-year basis)*

Allocation formula

$$$: (B) \times (A) \times (C)$

Lack of qualified outcome survey

- Disqualification

Funds Distribution (1)

Prerequisites

- Applicants must qualify
- Applications must be complete
- Applications must be received timely
- Applications have been reviewed and confirmed by BHCEF
- Allocated funds
- Executed funding agreement

Funding agreement: Standardized agreement between BHCEF and recipients stating funding terms, more specifically:

- The amount that is paid out
- Funding purpose: covering some of the operating costs
- Efficacy Measurement System & Aftercare Program: Beneficiary agrees to run for a minimum term of 12 months one efficacy measurement system and an aftercare program as further depicted in the application
- BHCEF's limited role: The fact that BHCEF provide Beneficiary with funds to cover its patients' treatment and boarding while in treatment and thereafter (*in compliance with parameters set forth in the application*) is not intended to confer on BHCEF the right to consult with Beneficiary with respect to its patients' care in any manner

Funds Distribution (2)

Funding agreement: Standardized agreement between BHCEF and recipients stating funding terms, more specifically:

- Nothing in this agreement shall grant to BHCEF the status or role of a healthcare provider with respect to any of Beneficiary's patients.
- Insurance Coverage: Beneficiary warrants and represents that it will acquire and maintain appropriate insurance coverage for its operations.
- Liability: BHCEF does not assume any liability for any claim by or against Beneficiary's patients which may arise in connection with patients' treatment by Beneficiary.
- Indemnification: Beneficiary shall indemnify and hold BHCEF harmless against any claim that may arise as a result of Beneficiary's patients' treatment (*including efficacy measurement system and aftercare programs*).

Grants payment

- Payments are made to beneficiaries via wire or check
- Payments are reported to IRS and state tax authorities
- Payments are made between September 1st and September 30th
- In case of multiple facilities, payments are made per facility

Transparency

Transparency

- Annual reporting to federal and state treasuries
- Annual reporting to California Justice Department
- Annual report published on BHCEF website from 10/01 through 11/30 each year

*

* *

Prevention Program Curriculum

Eligibility criteria

- See grant eligibility criteria

Prevention program curriculum

- Curriculum is available to qualified applicants starting March 1st
- Curriculum is evolving
- Curriculum is delivered electronically
- Beneficiaries are licensed to use curriculum for their own needs only: they cannot sub-license, loan and \ or claim ownership thereof

Program implementation and additional resources for providers

- Marketing pro forma provided by BHCEF concurrently with curriculum
- Media co-op

What if Quality Outcome Data is not Available for F.Y. 2022?

Let's see what is available:

- Do you have clinical outcome surveys?
- Do your outcome surveys cover all your clients for 2022?
- Do you have aftercare surveys / statistics?
- With that set of data, we can help you define a temporary efficacy ratio that can be used in our grant allocation process.

Moving forward:

- For subsequent campaigns, we will require outcome survey data to meet the standards embodied in our application. More specifically:
 - Full census must be covered (*partial census cannot reflect one provider's complete performance*)
 - Aftercare up to 12 months must be covered (*to quantify treatment long term efficacy*)
 - Efficacy outcome measurement must cover each individual AND all clients for the year of reference
 - Aggregated clinical outcome surveys must cover the following challenges:
Depression, Anxieties, Trauma / PTSD, CSSRS, ACE
 - At least three tests covering: Mania, Somatic experiences, DAST-10, Audit-C & panic attacks