

The Multi-Payer Fee Schedule: FAQ for Legal Aid Attorneys and Advocates for Students

What is it?

The Multi-payer fee schedule is a behavioral healthcare model that allows for the additional provision of therapeutic services through school for California public school students, with funding coming primarily through managed care organizations (MCOs) or commercial health plans.¹

It mandates that Medi-Cal and commercial plans adhere to fixed rates for schools and school-affiliated providers, developing a statewide provider network and streamlined reimbursement processes.²

What do students and their families receive?

Students receive increased access to a specific array of behavioral health services from kindergarten through higher ed.³

Students and their families receive services without out-of-pocket expenses or impact to their existing insurance plans or deductibles.⁴

Why is the Multi-payer fee schedule important?

This model is an opportunity to substantially expand the availability of community-based supports for youth through increased funding for community-based organizations

and schools. As a new tool within the Children and Youth Behavioral Health Initiative (CYBHI), it demonstrates the state's serious commitment to addressing the mental health crisis impacting young people.

All plans, both Medi-Cal Managed Care Plans (MCPs) and commercial plans, can partner with public institutions of higher education (IHEs) and County Offices of Education (COEs) to identify Local Education Agencies (LEAs), create needs assessments, and choose targeted behavioral health interventions to implement at member schools.⁵

Where are Multi-payer fee-schedule-based services available?

The broad scope of services can be provided both at physical school sites and at other locations—such as off-campus clinics, mobile counseling service locations, and similar access points in the community—as long as a member school has arranged for medically necessary treatment of a mental health or substance use disorder.⁶

How is the Multi-payer fee schedule funded?

California launched the CYBHI with a \$4.4 billion investment in 2021. The initiative included a \$389 million investment in the

Student Behavioral Health Incentive Program (SBHIP) and a \$400 million investment in School Partnership Grants towards the adoption of the Multi-payer system.⁷

Through Multi-payer, services will be provided, billed for by the relevant payer, and then reimbursed directly.⁸ There are no statutory barriers to prevent any insurance plan from taking part in the system.

Through the Multi-payer system, in partnership with MCPs and other plans, no county-level match is required, decreasing fiscal burdens on local jurisdictions.

What is the scope of services for the Multi-payer fee schedule?

Behavioral interventions under Multi-payer fall under these service categories:

1. **Psychoeducation**
2. **Screenings and assessments**
3. **Treatment**
4. **Case management and care coordination**⁹

These categories include services such as education and training for patient self-management (psychoeducation), structured screenings for trauma and substance abuse (screenings and assessments), individual and family psychotherapy (psychotherapy), and medication training and support (case management/care coordination).¹⁰

For students ages 12-17 on Medi-Cal, the Multi-payer fee schedule may include MCP

services such as peer-to-peer in school counseling (funded through SBHIP). Health staff for young people ages 18-25 include **community health workers, doulas, wellness coaches, social work (SW) and marriage & family therapists (MFT) interns, and Associate SWs and Associate MFTs.**¹¹

Multi-payer services are intended to work in conjunction with existing educational resources for behavioral health in community schools—such as Multi-Tiered System Support (MTSS) and Positive Behavior Intervention and Supports (PBIS)—primarily for Tier 1 (school-wide) and Tier 2 (short-term targeted) interventions, but also potentially as Tier 3 (longer-term, intensive) interventions.¹²

Services provided through the fee schedule should in no way limit or replace services that are guaranteed to students through an Individualized Education Program (IEP) or Section 504 plan.

How does a school implement the Multi-payer fee schedule?

LEAs/COEs or IHEs enroll in a provider network to establish “designated providers” with appropriate contracts and credentials to provide services.¹³ To build healthcare infrastructure capacity and form contracts, participating schools can increase funding for existing school staff and/or engage with external providers, such as community-based organizations (CBOs).

CBOs, some of which are already under contract with County Mental Health Plans through Special Mental Health Services (SMHS) and provide services in schools, can supplement and expand their contracts for services with LEAs, decreasing fragmentation of services and providing a greater breadth of care.

The Multi-payer system's streamlined reimbursement model for behavioral health services can also increase sustainability for longer-term interventions.

How can advocates help their students access Multi-payer fee schedule services?

After a year of introductory cohorts, LEAs/COEs and IHEs can now enroll in Multi-payer cohorts on a rolling, opt-in basis.¹⁴ The goal is to eventually include all California public schools in the fee schedule.

Advocates can visit the [CYBHI Fee Schedule Program](#) webpage to learn if a student's school district is enrolled in an ongoing cohort or how a LEA/COE or IHE can enroll in upcoming cohorts.¹⁵

Once participating districts complete the capacity-building and healthcare infrastructural components of Multi-payer program onboarding, the service provision and billing phase can begin.

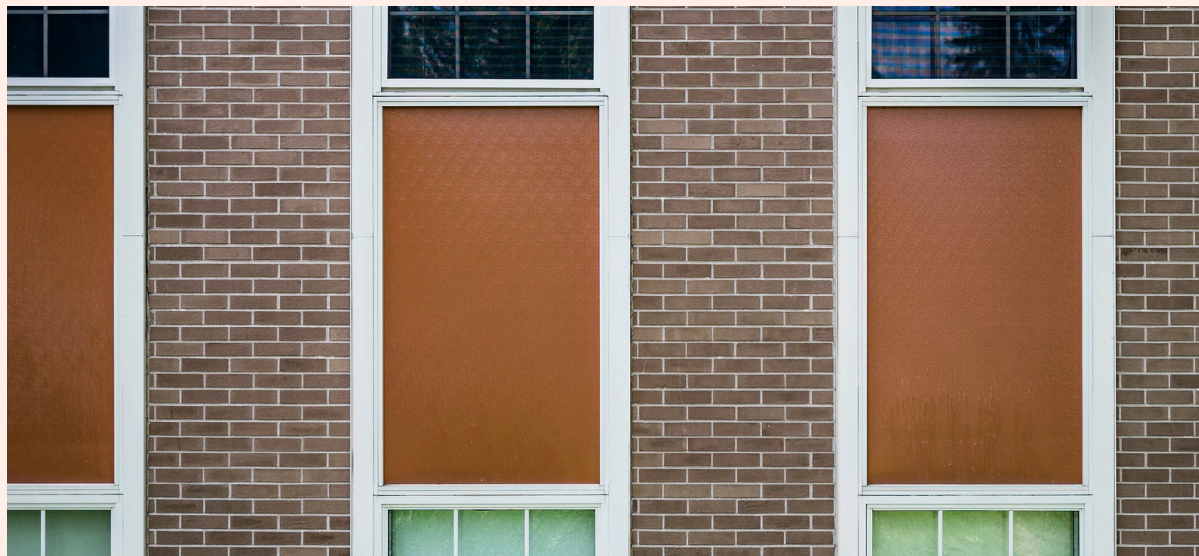
Student advocates can work with participating schools to ensure that students have access to the wide-ranging continuum of services.

What are areas of opportunity within the Multi-payer fee schedule?

Multi-payer could be used to expand funding and availability of services through CBOs—especially for those who have pre-existing relationships with difficult-to-serve communities. Such expansion should not supplant any existing contracts or funding for Specialty Mental Health Services with the County Mental Health Plan.

Multi-payer is also a possible funding source for community-based supports for youth in higher education through the age of 25. These can be an important supplement to SMHS or Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) services, which may stop at the age of 21.¹⁶

For more information, contact the Youth Law Center at info@ylc.org.



REFERENCES

¹ See CAL. WELF. & INST. CODE §5961.4.

² Id. §5961.4(c)(1)–(2).

³ Id. §§ 5961.4(c)(1), 5961.4(j)(2)–(3).

⁴ CAL. HEALTH & SAF. CODE §1374.722(c)(7)–(8).

⁵ Id. §§ 1374.722(a)(1), 1374.722(b)(2)–(3).

⁶ Id. §1374.722(b)(6).

⁷ CAL. DEP'T OF HEALTH CARE SERVS., Accelerating The Expansion of Quality School-Based Health: A Primer on Available State Resources for Local Education Agencies (LEAs) and Health Partners, 6 (2023), <https://www.dhcs.ca.gov/formsandpubs/Documents/SBH-Funding-Opportunity-508.pdf>; See CAL. DEP'T OF HEALTH CARE SERVS., Student Behavioral Health Incentive Program All Plan Letter No. 23-035 (2019), <https://www.dhcs.ca.gov/formsandpubs/Documents/MMCDAPLsandPolicyLetters/APL2023/APL23-035.pdf>; See CAL. WELF. & INST. CODE §§ 5961.2(a)(1)–(3), 5961.3(a)–(b).

⁸ CAL. WELF. & INST. CODE §5961.4(c)(1)–(2).

⁹ CAL. DEP'T OF HEALTH CARE SERVS., CYBHI Fee Schedule Program Scope of Services, Codes, and Reimbursement Rates, 2-11 (2025), <https://www.dhcs.ca.gov/CYBHI/Documents/CYBHI-Fee-Schedule-Scope-of-Services-Rates-and-Codes.pdf>.

¹⁰ Id.

¹¹ CAL. DEP'T OF HEALTH CARE SERVS., Medi-Cal Children's Health Advisory Panel (MCHAP), 67 (2025), <https://www.dhcs.ca.gov/services/Documents/03-13-25-MCHAP-Meeting-Deck.pdf>; CAL. DEP'T OF HEALTH & HUMAN SERVS. & CALIFORNIA CHILDREN'S TRUST, Integrating Behavioral Health Initiatives with Child Welfare Efforts: Presentation to the Child Welfare Council, 24-25 (2023), https://www.chhs.ca.gov/wp-content/uploads/2023/10/BH-Initiatives-and-CW_for-posting-on-CWC.pdf.

¹² CAL. DEP'T OF EDUCATION, Multi-Tiered System of Support, Statewide Initiative (2025), <https://www.cde.ca.gov/ci/cr/ri/>; CAL. DEP'T OF EDUCATION, California PBIS CIM Support Grant, Funding (2025), <https://www.cde.ca.gov/fg/fo/profile.asp?id=6230>; CAL. DEP'T OF HEALTH CARE SERVS., Children and Youth Behavioral Health Initiative: Fee Schedule Workgroup Session 3 Powerpoint Slides, 7 (2023), <https://www.dhcs.ca.gov/CYBHI/Pages/MeetingsandEvents.aspx>; CALIFORNIA CHILDREN'S TRUST, Financing and Sustaining School Health Programs, Webinar Series: The Path to Funding Racially Just, Relationship-Centered Schools, 51 (2022), <https://cachildrenstrust.org/wp-content/uploads/2022/10/Training-2-Financing-and-Sustaining-School-Health-Programs.pdf>.

¹³ CAL. DEP'T OF HEALTH CARE SERVS., CYBHI Fee Schedule Program Guideline for the Participation of Community Providers, 1 (2025), <https://www.dhcs.ca.gov/es/CYBHI/Documents/DHCS-CYBHI-Fee-Schedule-Program-Participation-of-Community-Providers.pdf>; CAL. WELF. & INST. CODE §5961.4(d)(2)(A).

¹⁴ CAL. DEP'T OF HEALTH CARE SERVS., Children and Youth Behavioral Health Initiative Fee Schedule Program (2025), <https://www.dhcs.ca.gov/CYBHI/Pages/Fee-Schedule.aspx>.

¹⁵ Id.

¹⁶ CAL. CODE REGS. TIT. 9, §1810.355(5).