



## Planning Grants for Certified Community Behavioral Health Clinics

July 23, 2015

Shannon M. McMahon, MPA  
Deputy Secretary, Health Care Financing  
[Shannon.McMahon@Maryland.gov](mailto:Shannon.McMahon@Maryland.gov)

Gayle Jordan-Randolph, MD  
Deputy Secretary, Behavioral Health  
[Gayle.Jordan-Randolph@Maryland.gov](mailto:Gayle.Jordan-Randolph@Maryland.gov)

### Scope of Presentation

---

- Grant Opportunity
- Number of CCBHCs
- Prospective Payment System
- CCBHC Services
- Selection and Certification Process
- Hands-On Technical Assistance
- Stakeholder Process
- Comments and Questions



## Grant Opportunity

## Grant Opportunity

---

- On May 20, 2015, the Substance Abuse and Mental Health Services Administration (SAMHSA) released a request for applications for the FY 2016 Planning Grants for Certified Community Behavioral Health Clinics (CCBHC).
- As many as 24 states will receive up to \$2 million in planning funds.
- Applications are due August 5, 2015.

## Grant Opportunity

---

- The planning monies are to be used to:
  - (1) select and certify behavioral health clinics;
  - (2) develop a prospective payment system (PPS);and
  - (3) prepare and submit an application to participate in a two-year demonstration program.
- Demonstration program applications are due no later than October 31, 2016. Up to eight states will be selected to participate in the demonstration program no later than September 1, 2017.

5

## Grant Opportunity

---

- Additional information regarding the funding opportunity can be obtained online, <http://www.samhsa.gov/about-us/who-we-are/laws-regulations/section-223>
- A copy of the Request for Applications (RFA) can be found here, <http://www.samhsa.gov/grants/grant-announcements/sm-16-001>

6



## Number of CCBHCs

7

## Number of CCBHCs

- Maryland will be required to select and certify at least two CCBHCs—one in an urban area and one in a rural area.
- Maryland must also select a control group in order to evaluate the CCBHCs.
- At this time, Maryland intends to select and certify a maximum of five CCBHCs for the demonstration.

8



## Prospective Payment System

9

## Prospective Payment System

---

- Maryland must identify whether the State intends to develop a PPS that pays CCBHCs based on a daily or a monthly rate in its application.
- At this time, Maryland intends to develop a PPS based on a daily rate.
- States have the opportunity to switch from a daily or monthly rate during the planning phase.
- Risks
  - Staff time/capacity to establish a capitated monthly rate with adjustments for patient severity and outliers.
  - Identifying a rural CCBHC who could bear from capitated monthly payments.

10



## CCBHC Services

11

## Service Design Requirements

---

CCHBCs will be designed to improve the somatic and behavioral health of recipients and will be required to:

1. use a patient-centered approach that focuses on the provision of community-based mental and substance use disorder services;
2. support the continued integration of behavioral health with physical health care;
3. use evidence-based practices; and
4. improved access to high quality care.

12

## CCBHC Services

### CCBHCs must offer a core set of mandatory services:

1. Crisis mental health services, including 24-hour mobile crisis teams, emergency crisis intervention services, and crisis stabilization.
2. Screening, assessment, and diagnosis, including risk assessment.
3. Patient-centered treatment planning or similar processes, including risk assessment and crisis planning.
4. Outpatient mental health and substance use services.
5. Outpatient clinic primary care screening and monitoring of key health indicators and health risk.\*
6. Targeted case management.\*
7. Psychiatric rehabilitation services.\*
8. Peer support and counselor services and family supports.\*
9. Intensive, targeted community-based mental health care for members of the armed forces and veterans\*

\*CCHBCs that do not have the capacity to offer services (5-9) may either enter into a relationship with a Designated Collaborating Organization (DCO) to provide them or develop provider referral relationships.

13

## Designated Collaborating Organizations

- CCHBCs that do not have the capacity to offer services (5-9) on the previous slide may either enter into a relationship with a Designated Collaborating Organization (DCO) to provide them or develop provider referral relationships.
- CCBHCs can only use provider referral relationships for services already covered by Medicaid.
- For services not covered by Medicaid, such as peer support services, the CCBHC must cover them either directly or through a DCO.
- The CCHBC's PPS rate will include the services covered by a DCO and the CCHBC will be responsible for reimbursing the DCO.
- Additionally, the CCBHC must cover the evidenced-based practices selected by Maryland.

14



## Selection and Certification Process

15

## Selection and Certification Process

---

- Maryland will establish an application process for providers to become CCBHCs.
- This process will focus on criteria outside of the national provider accreditation process including:
  - certifying ability to provide required services including evidence based practices either directly themselves, through a DCO, or through a referral process.
  - demonstrating that they have the systems required (e.g. electronic health records) to report quality measures.

16



## Alignment with Hospital Waiver

---

- On January 1, 2014, Maryland entered into a new all-payer contract with the federal government which established new goals that the State must meet in order to maintain its Medicare all-payer waiver.
- One of the primary goals of the all-payer Model is to reduce hospital costs and eventually total cost-of-care per capita.
- This provides a unique opportunity to develop quality measures focused on aligning the CCBHCs with the goals under the hospital waiver.
- Opportunities may exist to include CCBHCs in the HSCRC provider alignment activities.

17



## Hands-On Technical Assistance

18

## Hands-On Technical Assistance

---

- During the planning process, Maryland plans to provide hands-on technical assistance to up to five providers.
- Providers interested in becoming a CCBHC will be required to complete the CCBHC Certification Criteria Readiness Tool developed by MTM Services and the National Council for Behavioral Health.
- Maryland will use the results to select and identify providers who will be eligible for technical assistance.

19



## Stakeholder Process

20

## Stakeholder Process

- As part of the planning phase, Maryland must engage in a comprehensive stakeholder process to solicit input from consumers, family members, advocates, providers, state agencies, and other key stakeholders.
- The State plans to leverage existing stakeholder networks to support this effort, including the Maryland Medicaid Advisory Committee, the Behavioral Health Advisory Council, convened during the Behavioral Health Integration process, and the Health Home Advisory Committee, convened to support the State's Chronic Health Home initiative.
- Additional providers and community organizations will also be invited to join the planning phase in order to maximize community engagement and ensure the sustainability of the program.

21



**COMMENTS? QUESTIONS?**

22