

MENTAL HEALTH STUDIES NEW PROVIDER MODEL: CCBHC

BACKGROUND

In 2014, Congress approved an experimental model of care to test whether the new approach would improve the delivery of physical and behavioral health care services. The Certified Community Behavioral Health Clinic, or CCBHC, model is designed to provide a single point of entry for people to receive physical health care, mental health care, and substance use disorder treatment. In return, the facilities receive a higher level of Medicaid reimbursement.

Three Montana providers recently received federal grants to plan for CCBHCs.

KEY CRITERIA FOR CCBHC DESIGNATION

The Protecting Access to Medicare Act of 2014 required the U.S. Department of Health and Human Services to create criteria for an entity to become a CCBHC. The criteria had to address six elements specified in the law in the following ways:

- **Staffing**, which must include multidisciplinary backgrounds, meet state licensing and accreditation requirements, and be linguistically able to serve the clinic's patients;
- **Accessibility of services**, including having crisis services available 24 hours a day, accepting all patients for treatment, and basing fees on a patient's income;
- **Coordination of care** across settings and providers, including the use of partnerships or contracts with a range of other health care providers;
- **Scope of services** that must encompass:
 - crisis mental health services, including 24-hour mobile crisis teams, crisis intervention and stabilization, screening and assessment, patient-centered treatment planning, and outpatient mental health and substance use services, all provided directly by the CCBHC; and
 - outpatient primary care screening and monitoring of key health indicators, targeted case management, psychiatric rehabilitation services, peer support and family supports, and intensive community-based mental health care for veterans and military members, all of which can be offered by the CCBHC or through referrals to a collaborating entity.
- **Quality reporting** on measures such as patient encounters, clinical outcomes and other required data; and
- **Organizational structure** that uses a nonprofit entity, a local government behavioral health authority, or the Indian Health Service, an Indian tribe, or a tribal organization.

REIMBURSEMENT LEVEL

The federal law specified that mental health services provided by a CCBHC would be reimbursed using a prospective payment system to cover the costs of care provided. That payment model establishes a predetermined reimbursement amount for each classification of services to reflect the cost of providing the service. The payment system is already in use for federally qualified health centers.

PROGRAM EXPANSION OVER THE YEARS

The 2014 law provided funding for up to eight states to plan for and create the new clinics. Over the years, Congress has authorized expansion of the demonstration project to additional states.

In Fiscal Year 2021, three Montana providers received two-year SAMHSA grants of about \$4 million each, with the grants due to sunset in 2023. All three agencies plan to add or increase primary care services to provide integrated care and improve the continuum of care in their service areas. Their grant applications also identified goals for some new services. The three entities and some of the new services they plan to offer are listed below.

- **Western Montana Mental Health Center**, which serves 19 western Montana counties, will add telehealth services and increase its targeted case management and mobile crisis services.
- **The Center for Mental Health**, currently serving Cascade and Lewis and Clark counties and 13 rural counties, will add medication-assisted treatment to its services and increase referrals to peer support and housing services.
- **Rimrock Foundation**, which serves Yellowstone County and the surrounding region, will create a new mobile crisis unit with law enforcement, create a new Program for Assertive Community Treatment (PACT) team, and develop a clubhouse for recovery services.

WHAT'S NEXT

Legislation is pending in Congress to expand planning grants to communities and organizations. The bill also would allow any state to apply to participate in the CCBHC demonstration program and receive enhanced payment for CCBHC services while participating in the demonstration. Montana may have to take steps such as amending its state plan or obtaining a Medicaid waiver if it wants to implement the CCBHC model in the future.

Sources

- "Certified Community Behavioral Health Clinics Demonstration Program: Report to Congress, 2017. *Substance Abuse and Mental Health Services Administration*.
- "Daines Introduces Bipartisan Bill to Expand Mental Health and Addiction Services in Montana." Press release from the office of U.S. Sen. Steve Daines. June 15, 2021.
- Public Law 113-93, Protecting Access to Medicare Act of 2014. Enacted by Congress on April 1, 2014.
- S. 2069-117th Congress. Excellence in Mental Health and Addiction Treatment Act of 2021. Available at <https://www.congress.gov/bill/117th-congress/senate-bill/2069>. Accessed Oct. 29, 2021.
- "SM-20-012 Individual Grant Awards: CCBHC Expansion Grants." *Substance Abuse and Mental Health Services Administration*. Available at <https://www.samhsa.gov/grants/awards/2020/SM-20-012>. Accessed Oct. 5, 2021.
- "What is a CCBHC?" National Council for Mental Wellbeing. Available at https://www.thenationalcouncil.org/wp-content/uploads/2020/08/What_is_a_CCBHC_UPDATED_8-5-20.pdf?dof=375ateTbd56. Accessed Oct. 5, 2021.