

CCBHC OVERVIEW

Data shows that only about 25.9% of the populations need for mental health is currently being met in Montana, adding to that, around 90% of people with a substance abuse disorder are not receiving care.

Mental Health America ranked Montana 39th in the country, meaning we have a high prevalence of mental illness and a low rate of access to care. By providing a comprehensive range of services of integrated care we are bridging the gap between population need and available access. With successful implementation of this CCBHC model into state Medicaid, we can achieve permanent sustainability and continue to provide open access to care for a population that is in dire need.

While we are still within the first year and early stages of CCBHC implementation while navigating through this pandemic, we have already seen major benefits in our community. Among these successes are:

- We have provided services to 382 new clients since expanding CCBHC services.
- We have added an additional 66 clients for substance abuse, showing a 1,220% increase.
- We have increased the number of Veterans being served by an additional 74 and are expected to see even larger growth over the next year.
- We have increased our encounters and have created processes that will promote shorter wait times from initial contact to first visit, with a set projected goal of 10 business days.
- Implemented a direct referral process between community partners who are providing services to the homeless population to increase and coordinate access to services.
- Increased communication with the hospitals to plan discharge and do follow up care, to reduce Hospital and ER utilization.
- Improving accessibility metrics by enhancing our ability to do integrated assessments and integrated treatment plans for mental health/substance use disorders

Some additional goals for the upcoming year include:

- Further implementing procedures and processes that will allow for open access hours to increase the number of individuals being served and minimize wait times from initial contact to first visit.
- Opening access to CCBHC services in Lewis and Clark County by implementation of the CCBHC model within our Helena location.
- Extending our telehealth capabilities to better serve our rural communities.
- Adding additional providers to support Physical, mental health and substance abuse services.
- Increase access to additional youth services by expanding school-based service to include additional preventative programming.
- Development and implementation of procedures to increase access to crisis stabilization services.

The importance of our communities to have access to expanded services through the CCBHC model has proven tried and true by reviewing data output from CCBHC demonstration sites around the country. Data shows substantial increase in individuals having access to care and receiving additional services. On average there has been an 18-69% decrease in Hospital and ER utilization. Initiation and engagement of treatment for alcohol and other drugs increased up to 50% within the third year for some locations. By all accounts the CCBHC's have outperformed HEDIS averages for this model and greatly improved care and wellness for the communities they continue to serve.