The NC Certified Community Behavioral Health Clinic Planning Grant
Overview
Legislative Mandate

• Section 223 “Demonstration Programs to Improve Community Mental Health Services” of the PAMA Act

• Protecting Access to Medicare Act of 2014 (H.R. 4302)

• Enacted on April 1, 2014
Populations Served

• Adults with serious mental illness
• Children with serious emotional disturbance
• Those with long term and serious substance use disorders
• Others with mental illness and substance use disorders
Section 223 Requirements

• Establish and publish criteria for certification for clinics to enable them to participate in a demonstration program

• Issue guidance on the development of a Prospective Payment System to be tested during the demonstration program

• Award planning grants to develop proposals for participation in the two-year demonstration program
Certification Criteria

- Developed by SAMHSA
- Focuses on the following areas:
  - Staffing
  - Availability of Services
  - Care Coordination
  - Scope of Services
  - Quality/Other reporting
  - Organizational Authority, Governance, and Accreditation
Prospective Payment System (PPS)

• Guidance prepared by CMS
• States select one of two PPS rate methodologies.
  – CC PPS-1
    • FQHC-like PPS that provides reimbursement of cost on a daily basis; optional bonus payments for meeting defined quality metrics
  – CC PPS Alternative (CC PPS-2)
    • monthly unit of payment; quality bonus payments required
The Demonstration Program

- All states awarded the CCBHC Planning Grants are expected to apply for the demonstration program.

- Eight states will be selected for the demonstration program.

- Selected states will bill Medicaid under a CMS-approved PPS for behavioral health services provided to Medicaid-eligible individuals.
The NC CCBHC Planning Project

- A collaboration between DMHDDSAS and DMA

- Awarded to DMHDDSAS in October 2015 for a one-year period

- Total award = $978,401
The NC CCBHC Planning Project, continued

- Funds will be used for the following:
  - Personnel (Project Director, Evaluator, Research/Administrative Assistant)
  - Development of PPS/consultation with actuarial agency
  - Development of data collection/reporting methodologies
  - Development of electronic health records
  - Training on EBPs
  - Certification process
  - Marketing/Training/Information Dissemination
MAJOR PROJECT ACTIVITIES
A. Solicit Input

• Establish a steering committee to guide and provide input

• Conduct outreach, recruit and engage the population(s) of focus in the solicitation of input

• Coordinate activities with other local, state, federal agencies and tribes to ensure that services are accessible and available
B. CCBHC CERTIFICATION

• Construct an instrument to determine the extent to which the community behavioral health clinic or FQHC meets each of the specified criteria for certification

• Determine selection process

• Establish an objective panel of experts who will rate applicants on the eligibility criteria and make their recommendations to the State

• Conduct a needs assessment of the catchment area where the community behavioral health center or federally qualified health center (FQHC) operates;
B. CCBHC CERTIFICATION (continued)

• Certify at least two community behavioral health clinics (one rural, one urban)

• Assist clinics with meeting certification standards
C. Establish PPS Methodology

- Obtain guidance from SAMHSA/CMS
- Consult with LME/MCOs
- Consult with an actuarial agency
D. CCBHC Services

• Crisis mental health services, including 24-hour mobile crisis teams, emergency crisis intervention services and crisis stabilization
• Screening, assessment and diagnosis, including risk assessment
• Patient-centered treatment planning, including risk assessment and crisis planning
• Outpatient mental health and substance use services
D. CCBHC Services, continued

- Outpatient clinic primary care screening and monitoring of key health indicators and health risk
- Targeted case management
- Psychiatric rehabilitation services
- Peer support and counselor services and family supports
- Intensive, community-based mental health care for members of the armed forces and veterans
E. Data Collection

• Develop/enhance data collection and reporting capacity to meet grant program requirements

• Use a cost report format that is developed to conform to CMS guidance, collect cost reports from CCBHCs

• Assist CCBHCs with preparing to use data to inform and support continuous quality improvement processes within CCBHCs
F. National Evaluation of Demonstration Program

• Collaborate with the national evaluation planning team

• Construct a comparison group

• Obtain Institutional Review Board approval as necessary
G. Proposal for Demonstration Program

• Submit a proposal to participate in the demonstration program

• Proposals are due by October 31, 2016
Next Steps

- Hire Project Director
- Hire Research/Administrative Associate
- Convene Steering Committee
- Staff Planning Groups
  - PPS
  - Data Collection and Evaluation
  - Certification
  - Statewide Coordination
For more information

- FOA# - SM-16-001