

Advancing the CCBHC Model: An Opportunity to Create a New Quality Standard in Colorado

Background

- Certified Community Behavioral Health Clinics (CCBHCs) were introduced federally in 2014 under the Protecting Access to Medicare Act (PAMA)
- CCBHCs create uniform standards of care for behavioral health safety net providers and new mechanisms for Medicaid to create value-based payment options.
- CCBHCs were designed to increase access and improve the quality of community mental and substance use disorder treatment services
- States that are part of the Demonstration will get a federal match under Section 223 of PAMA. The match is equivalent to the standard Children's Health Insurance Program (CHIP) rate given to Medicaid beneficiaries for CCBHC services (or the rate available to newly eligible beneficiaries)
- Competitive grants to become a CCBHC are available through SAMHSA to expand 24/7 comprehensive behavioral healthcare
- Similar in concept to Federally Qualified Health Centers (FQHCs)

Benefits of the CCBHC Model

- CCBHCs are required to provide a robust range of mental health and substance use disorder services which allow for the full continuum of care
- CCBHCs are required to serve clients regardless of ability to pay
- CCBHCs must adhere to rigorous, uniform data collection requirements and implement continuous quality improvement

CCBHCs in Action

How will CCBHCs serve Coloradans?

- CCBHCs **on average serve 17% more people** than prior to becoming a CCBHC
- 95% of CCBHCs collaborate with law enforcement
- On average people wait 48 days to receive mental health services; **50% of CCBHCs provide same-day care**
- **84% of CCBHCs see clients within one week**
- CCBHCs are addressing the nation's opioid crisis by dramatically expanding access to MAT, which is the gold standard of substance use care
- **89% of CCBHCs offer one or more forms of MAT**, compared to only 56% of substance use clinics nationwide
- 75% reported increasing screening to address social determinants of health
- 79% coordinate with hospitals and emergency departments to prevent avoidable admissions when individuals are in crisis
- **45% were able to add services for armed forces and veterans**

This data comes from the National Council for Mental Well Being 2021 CCBHC Impact Report. For the full report, see link below.

- CCBHC data reporting requirements allow for performance comparisons between clinics nationally
- Model requirements align with Colorado-specific efforts such as the BHTF recommendations; creation of the BHA; and SB 19-222 Plan to Expand and Strengthen the HB Safety Net System.

National Research Supports Implementation of CCBHC model:

- Increased access to mental health and substance use disorder services;
- Improvements in BH workforce recruitment, retention, and training;
- Expanded capacity to address the opioid crisis;
- Innovative partnerships with law enforcement resulting in decreased recidivism; and
- Renewed partnerships with hospitals to decrease readmissions.

Colorado CCBHC Activity and Innovation:

Five community mental health centers in the state have been awarded SAMHSA CCBHC grant funds. This funding is enabling each center to expand access to care in their local communities by enhancing their service delivery and improving quality. To date, notable achievements include:

Southeast Health Group developed community-specific programs, including specialized services for Veterans through the six county Veterans Services Officers. They have also focused outreach for agricultural communities through their local Ag Advisory Council.

Mental Health Partners strengthened their continuum of care by implementing new intensive outpatient programs, expanding integrated care programs, and creating a Community Health Worker (CHW) program. CHWs conduct proactive outreach to engage current and new clients in care and assist them in accessing other needed community supports. Read more here: <https://www.mhpcolorado.org/community-health-workers/>. They have also begun a statistical analyses of behavioral health outcomes using the National Outcome Measures set (NOMS). In an initial analysis, 54 percent of clients experienced a decrease in psychiatric distress.

Aurora Mental Health Center is expanding their new employee orientation and employee training program to focus on trauma-informed, culturally responsive person-centered care, as well as developing additional training to increase SUD capacity and expertise.

North Range Behavioral Health is working to increase same day access to care and enhance services for underserved populations. They are also increasing center-wide data collection and quality improvement efforts and will utilize the National Outcome Measures Scale (NOMS) for all new clients.

Mind Springs Health is working to increase access to care for underserved populations, including Spanish-speaking clients, Veterans, and individuals experiencing homelessness.

Additional Information and Resources:

- CCBHC Criteria: https://www.samhsa.gov/sites/default/files/programs_campaigns/ccbhc-criteria.pdf
- National Council for Mental Well Being 2021 CCBHC Impact Report: https://www.thenationalcouncil.org/wp-content/uploads/2021/05/052421_CCBHC_ImpactReport_2021_Final.pdf?dof=375ateTbd56
- GAO 2021 CCBHC Report to Congress: <https://www.gao.gov/assets/gao-21-394.pdf>
- National Council for Mental Wellbeing's CCBHC Success Center webpage at <https://www.thenationalcouncil.org/ccbhc-success-center/>