

Planning Grants for Certified Community Behavioral Health Clinics

Overall Score:

Sample Narrative Score Sheet

Instructions for using this Sample Score Sheet:

- In order to be scored, the required information must be found in each of the appropriate sections as instructed within the RFA (i.e., Organizational Staffing information that is included as part of Section A will not be considered for scoring purposes in Section C)
- Record the page number where the information is found in the “Apparent” Box to indicate the location of the response to the evaluation criteria.
- Place an “x” before the appropriate descriptor (i.e., Outstanding, Very Good, Acceptable, Marginal, Unacceptable)
- For those sections that you indicate are Marginal or Unacceptable, be very specific about how they can be improved upon in the next iteration of the draft.

Section A: Statement of Need

A-1. The applicant:

<i>Objective Check:</i>					
Apparent Page #	Not Apparent:	Contributing Factors:			
		Describes how behavioral health services are organized, funded, and provided in the state.			
<i>Qualitative Assessment:</i>					
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Outstanding	Very Good	Acceptable	Marginal	Unacceptable	

Reason for Marginal or Unacceptable:

A-2. The applicant:

<i>Objective Check:</i>					
Apparent Page #	Not Apparent:	Contributing Factors:			
		Describes the prevalence rates of adults and children with mental illness and/or substance use disorders in the state and particularly in the areas of the state being considered for CCBHCs.			
		Includes sub-populations such as adults with serious mental illness and children with serious emotional disturbances, and those with long term and serious substance use disorders and populations experiencing behavioral health disparities.			
<i>Qualitative Assessment:</i>					
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Outstanding	Very Good	Acceptable	Marginal	Unacceptable	

Reason for Marginal or Unacceptable:

A-3. The applicant:

<i>Objective Check:</i>

Apparent Page #	Not Apparent:	Contributing Factors:		
		Describes the capacity of the current Medicaid State Plan to provide the services listed in Appendix II of the RFA.		
<i>Qualitative Assessment:</i>				
Outstanding	Very Good	Acceptable	Marginal	Unacceptable

Reason for Marginal or Unacceptable:

A-4. The applicant:

<i>Objective Check:</i>				
Apparent Page #	Not Apparent:	Contributing Factors:		
		Describes the nature of the problem, including service gaps		
		Documents the need (i.e., current prevalence rates or incidence data) for the population(s) of focus based on data.		
		Identifies the source of the data.		
<i>Qualitative Assessment:</i>				
Outstanding	Very Good	Acceptable	Marginal	Unacceptable

Reason for Marginal or Unacceptable:

Overall Assessment of Section A: Statement of Need (Maximum Points: 15)

	Outstanding (15-14)	Very Good (13-12)	Acceptable (11)	Marginal (10-9)	Unacceptable (8-0)
Your Score					

Reviewer Comments:

After you have arrived at a numerical score for the Overall Section Assessment, please write comments which justify the numerical score you assigned that outline the key strengths and weaknesses of the section. Please clearly articulate in what way items were missing/incomplete from the application, how the section can be improved, and/or in what way items were done exceptionally well in the application.

Insert Comments Here:

Section B: Proposed Approach

B-1. The applicant:

<i>Objective Check:</i>		
Apparent	Not Apparent:	Contributing Factors:

Page #					
		Describes how the capacity, access and availability of services to the population of focus will be expanded.			
		Includes activities such as outreach and engagement, staff training, and workforce diversity.			
<i>Qualitative Assessment:</i>					
	Outstanding	Very Good	Acceptable	Marginal	Unacceptable

Reason for Marginal or Unacceptable:

B-2. The applicant:

<i>Objective Check:</i>					
Apparent Page #	Not Apparent:	Contributing Factors:			
		Describes how input on the development of the demonstration program will be solicited from consumers, family members, providers, and other stakeholders including American Indian/Native Alaskans			
		Describes how these stakeholders will be kept informed of the activities, changes, and processes related to the project.			
<i>Qualitative Assessment:</i>					
	Outstanding	Very Good	Acceptable	Marginal	Unacceptable

Reason for Marginal or Unacceptable:

B-3. The applicant:

<i>Objective Check:</i>					
Apparent Page #	Not Apparent:	Contributing Factors:			
		Describes how community behavioral health clinics will be selected to participate			
		Describes how the state will work with the selected clinics to meet or prepare to meet the requirements in Appendix II.			
<i>Qualitative Assessment:</i>					
	Outstanding	Very Good	Acceptable	Marginal	Unacceptable

Reason for Marginal or Unacceptable:

B-4. The applicant:

<i>Objective Check:</i>					
Apparent Page #	Not Apparent:	Contributing Factors:			
		Describes how all of the services outlined in Appendix II will be provided by CCBHCs in the state.			
<i>Qualitative Assessment:</i>					
	Outstanding	Very Good	Acceptable	Marginal	Unacceptable

Reason for Marginal or Unacceptable:

B-5. The applicant:

<i>Objective Check:</i>					
Apparent Page #	Not Apparent:	Contributing Factors:			
		Identifies the evidence-based practices that CCBHCs will be required to provide			
		Justifies the selection of the evidence-based practices.			
<i>Qualitative Assessment:</i>					
Outstanding	Very Good	Acceptable	Marginal	Unacceptable	

Reason for Marginal or Unacceptable:

B-6. The applicant:

<i>Objective Check:</i>					
Apparent Page #	Not Apparent:	Contributing Factors:			
		Describe how the state will certify community behavioral health clinics in both urban and rural areas (where applicable) in the state.			
<i>Qualitative Assessment:</i>					
Outstanding	Very Good	Acceptable	Marginal	Unacceptable	

Reason for Marginal or Unacceptable:

B-7. The applicant:

<i>Objective Check:</i>					
Apparent Page #	Not Apparent:	Contributing Factors:			
		Describes how the state will finalize planning activities and assist with the transition to implementation of the demonstration program, if selected to participate in the demonstration program.			
<i>Qualitative Assessment:</i>					
Outstanding	Very Good	Acceptable	Marginal	Unacceptable	

Reason for Marginal or Unacceptable:

B-8. The applicant:

<i>Objective Check:</i>					
Apparent Page #	Not Apparent:	Contributing Factors:			
		Describes and justifies the selection of the PPS rate-setting methodology.			
		Describes how CCBHCs base cost with supporting data, as			

		specified in Appendix III will be collected.		
<i>Qualitative Assessment:</i>				
Outstanding	Very Good	Acceptable	Marginal	Unacceptable

Reason for Marginal or Unacceptable:

B-9. The applicant:

<i>Objective Check:</i>				
Apparent Page #	Not Apparent:	Contributing Factors:		
		Describes how the state will establish a PPS for behavioral health services provided by CCBHCs in accordance with CMS guidance in Appendix III.		
<i>Qualitative Assessment:</i>				
Outstanding	Very Good	Acceptable	Marginal	Unacceptable

Reason for Marginal or Unacceptable:

B-10. The applicant:

Apparent Page #	Not Apparent:	Not Applicable	Contributing Factors:	
			Identifies any other organization(s) that will participate in the proposed project.	
			Describes their roles and responsibilities and demonstrate their commitment to the project.	
			Includes letters of commitment from these organizations in Attachment 1 of the application.	
<i>Qualitative Assessment:</i>				
Outstanding	Very Good	Acceptable	Marginal	Unacceptable

Reason for Marginal or Unacceptable:

B-11. The applicant:

<i>Objective Check:</i>				
Apparent Page #	Not Apparent:	Contributing Factors:		
		Describes how the state will work with CCBHCs to develop a process of board governance or other appropriate opportunities for meaningful input by consumers, persons in recover, and family members as described in Appendix II, Program Requirement 6: Organizational Authority, Governance and Accreditation.		
<i>Qualitative Assessment:</i>				
Outstanding	Very Good	Acceptable	Marginal	Unacceptable

Reason for Marginal or Unacceptable:

Overall Assessment of Section B: Proposed Approach (Maximum Points: 40)

	Outstanding (40-36)	Very Good (35-31)	Acceptable (30-28)	Marginal (27-24)	Unacceptable (23-0)
Your Score					

Reviewer Comments:

After you have arrived at a numerical score for the Overall Section Assessment, please write comments which justify the numerical score you assigned that outline the key strengths and weaknesses of the section. Please clearly articulate in what way items were missing/incomplete from the application, how the section can be improved, and/or in what way items were done exceptionally well in the application.

Insert Comments Here:

Section C: Staff, Management, and Relevant Experience

C-1. The applicant:

<i>Objective Check:</i>					
Apparent Page #	Not Apparent:	Contributing Factors:			
		Discusses the capability and experience of the applicant organization and other participating organizations with similar projects and populations			
		Includes relevant experience in providing recovery-oriented and culturally appropriate/competent services.			
<i>Qualitative Assessment:</i>					
	Outstanding	Very Good	Acceptable	Marginal	Unacceptable

Reason for Marginal or Unacceptable:

C-2. The applicant:

<i>Objective Check:</i>					
Apparent Page #	Not Apparent:	Contributing Factors:			
		Provides a complete list of staff positions for the project, including the Project Director and other key personnel			
		Shows the role of each key personnel and their level of effort and qualifications			
<i>Qualitative Assessment:</i>					
	Outstanding	Very Good	Acceptable	Marginal	Unacceptable

Reason for Marginal or Unacceptable:

C-3. The applicant:

<i>Objective Check:</i>					
Apparent Page #	Not Apparent:	Contributing Factors:			
		Discusses how key staff have demonstrated experience and are qualified to develop the infrastructure for the population(s) to engage in activities			
		Discusses how key staff are familiar with the population of focus's culture(s) and language(s).			
<i>Qualitative Assessment:</i>					
Outstanding	Very Good	Acceptable	Marginal	Unacceptable	

Reason for Marginal or Unacceptable:

**Overall Assessment of Section C: Staff, Management, and Relevant Experience
(Maximum Points: 10)**

	Outstanding (10-9)	Very Good (8-7)	Acceptable (6)	Marginal (5-4)	Unacceptable (3-0)
Your Score					

Reviewer Comments:

After you have arrived at a numerical score for the Overall Section Assessment, please write comments which justify the numerical score you assigned that outline the key strengths and weaknesses of the section. Please clearly articulate in what way items were missing/incomplete from the application, how the section can be improved, and/or in what way items were done exceptionally well in the application.

Insert Comments Here:

Section D: Data Collection and Performance Measurement

D-1. The applicant:

<i>Objective Check:</i>					
Apparent Page #	Not Apparent:	Contributing Factors:			
		Documents their ability to collect and report on the required performance measures as specified in Section I-2.2 of this RFA.			
		Describes the plan for data collection, management, analysis, and reporting of data for the program.			
		Specifies and justifies any additional measures the state plans to use for the grant project.			
<i>Qualitative Assessment:</i>					
Outstanding	Very Good	Acceptable	Marginal	Unacceptable	

Reason for Marginal or Unacceptable:

D-2. The applicant:

<i>Objective Check:</i>					
Apparent Page #	Not Apparent:	Contributing Factors:			
		Describes how the state will support CCBHCs as they build the performance measurement infrastructure and implement continuous quality improvement processes.			
<i>Qualitative Assessment:</i>					
Outstanding	Very Good	Acceptable	Marginal	Unacceptable	

Reason for Marginal or Unacceptable:

D-3. The applicant:

<i>Objective Check:</i>					
Apparent Page #	Not Apparent:	Contributing Factors:			
		Describes the plan for conducting the performance assessment as specified in Section I-2.3 of this RFA			
		Documents their ability to conduct the assessment.			
<i>Qualitative Assessment:</i>					
Outstanding	Very Good	Acceptable	Marginal	Unacceptable	

Reason for Marginal or Unacceptable:

D-4. The applicant:

<i>Objective Check:</i>					
Apparent Page #	Not Apparent:	Contributing Factors:			
		Discusses the challenges that may be encountered in collecting the data required for the national evaluation			
		Describes how the state will address these challenges.			
<i>Qualitative Assessment:</i>					
Outstanding	Very Good	Acceptable	Marginal	Unacceptable	

Reason for Marginal or Unacceptable:

D-5. The applicant:

<i>Objective Check:</i>					
Apparent Page #	Not Apparent:	Contributing Factors:			
		Describes a preliminary plan on how the state will select a comparison group for an assessment of access, quality, and scope of services available to Medicaid enrollees served by CCBHCs compared with Medicaid enrollees who access			

		community-based mental health services from other providers.
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Qualitative Assessment:

Outstanding	Very Good	Acceptable	Marginal	Unacceptable
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Reason for Marginal or Unacceptable:

D-6. The applicant:

Objective Check:

Apparent Page #	Not Apparent:	Contributing Factors:
		Describes their capacity to collect data to inform the national evaluation of the demonstration program including:
		<ul style="list-style-type: none"> • Claims and encounter data,
		<ul style="list-style-type: none"> • Patient records,
		<ul style="list-style-type: none"> • Chart-based/registry data, and
		<ul style="list-style-type: none"> • Patient experience data.

Qualitative Assessment:

Outstanding	Very Good	Acceptable	Marginal	Unacceptable
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Reason for Marginal or Unacceptable:

Overall Assessment of Section D: Data Collection and Performance Measurement (Maximum Points: 35)

	Outstanding (35-31)	Very Good (30-27)	Acceptable (26-23)	Marginal (22-19)	Unacceptable (18-0)
Your Score					

Reviewer Comments:

After you have arrived at a numerical score for the Overall Section Assessment, please write comments which justify the numerical score you assigned that outline the key strengths and weaknesses of the section. Please clearly articulate in what way items were missing/incomplete from the application, how the section can be improved, and/or in what way items were done exceptionally well in the application.

Insert Comments Here: