Pennsylvania CCBHC Initiative: Early results show expanded access to care, increased scope of services

Section 223 of the Protecting Access to Medicare Act of 2014 established a federal definition and criteria for Certified Community Behavioral Health Clinics (CCBHCs). These entities, a new provider type in Medicaid, provide a comprehensive range of addiction and mental health services to vulnerable individuals while meeting additional requirements related to staffing, governance, data and quality reporting, and more. In return, CCBHCs receive a Medicaid reimbursement rate based on their anticipated costs of expanding services to meet the needs of these complex populations. CCBHCs are currently in operation in eight states selected for participation in the Section 223 demonstration (also known as the CCBHC demonstration or the Excellence in Mental Health Act demonstration): Minnesota, Missouri, Nevada, New Jersey, New York, Oklahoma, Oregon, and Pennsylvania.

CCBHCs are a vehicle for expanded access to intensive community-based services for individuals with untreated severe mental illness or addiction. Recent estimates indicate that only 43.1 percent of all people living with serious mental illnesses like schizophrenia, bipolar disorders and major clinical depression receive behavioral health care; the remainder are served in homeless shelters, Medicaid financed hospital emergency rooms, and penal institutions, which serve as the largest inpatient psychiatric facilities in the United States. Only 1 in 10 Americans with an addiction receive treatment in any given year. CCBHCs were established to fill the gap in unmet need and expand access to community-based treatment for these populations.

Pennsylvania’s participation in the demonstration began in July 2017. In November 2017, the National Council for Behavioral Health surveyed CCBHCs about the impact of their participation in the program to date; 48 of the 67 participating CCBHCs across the United States provided responses, including two of the seven CCBHCs in Pennsylvania. This report highlights Pennsylvania-specific impacts of the CCBHC Demonstration as of November 2017.

Staff / Workforce Capacity Expansion

A key goal of the CCBHC initiative was to expand clinics’ capacity to serve more people via an expanded workforce. Early results show major workforce expansions at CCBHC locations across all states, with CCBHCs nationwide reporting they have hired 1,160 new staff. In Pennsylvania, two CCBHCs (100% of those surveyed) reported that they have added new staff positions. Of those that added new positions, 49 new positions have been added, including 5 psychiatrists and 15 staff with an addiction specialty or focus.

In the midst of a nationwide behavioral health workforce shortage, CCBHC status has helped clinics recruit and retain desperately needed staff. For example, CCBHCs in Pennsylvania report:

- “We are in a position to create a team of clinicians with specialties in several key areas such as Child & Family Specialist, Veteran’s Specialist, substance use disorder specialist, and trauma informed specialist.”
- “We have created a holistic approach to care in the delivery of our services since June 2017.”
Ability to Serve New/Additional Patients as a CCBHC

Two CCBHCs (100% of those surveyed) reported that they have seen an increase in the number of patients served. These two CCBHCs reported that most of their new clients had either not previously been enrolled in treatment despite having a mental health or substance use need, or were newly referred to treatment for the first time, an indicator of these organizations’ ability to expand access to care in their communities.

Opioid Treatment Expansion

In response to the recent surge in opioid addiction and opioid-related deaths, addiction treatment is a core component of CCBHCs’ required service array, and the CCBHC payment rate has supported clinics in expanding the scope of addiction care they provide. In many states, individuals with opioid addiction are a target population for the CCBHC demonstration. In Pennsylvania, since the launch date of the demonstration, clinics have reported implementing the following activities to expand their patients’ access to opioid treatment:

![Bar chart showing Pennsylvania CCBHCs’ activities to expand opioid treatment capacity]

- Expanded existing Medication-Assisted Treatment (MAT) program (100%)
- Hired new staff with an addiction specialty/focus or trained existing staff in new addiction-focused competencies (50%)
- Hired peer recovery specialists to provide recovery support (50%)
- Trained staff or community partners in naloxone administration (50%)

Among the ways CCBHC status has supported Pennsylvania's clinics’ ability to provide opioid treatment, prevention or recovery support are:

- “Organization has been providing MAT as a leader in the Philadelphia area for 15 years...CCBHC has allowed us to continue to provide MAT services with more integrated care.”
Expansion of Services, Technology, Other Innovations

The CCBHC demonstration was designed to support clinics in expanding service delivery and bringing the latest evidence-based practices and technologies to bear on improving the quality and scope of care. Many of these activities have not been reimbursable under previous funding streams, making it impossible for organizations to implement the latest treatment innovations known to improve outcomes. CCBHCs nationwide report that the new payment rate has enabled them to open new service lines and leverage new technologies to improve care. In Pennsylvania, these initiatives include:

- More timely response to emerging crisis; quicker access to care; better integration; increased utilization of evidence-based practices
- We partner with a designated collaborating organization (DCO) for mobile crisis support and expanded our internal operations' on-call system with licensed Therapists and Recovery Coaches for the OP and Mobile services clients... We are establishing relationships with first responders; EMT, Fire Fighters, Police Departments and Veterans as well as other mental health nonprofits, school and community organizations.

CCBHCs in Pennsylvania report that the demonstration has expanded their ability to provide innovative treatment in the following ways:

- Initiate new programs, service lines or locations
- Implement new care delivery or outreach partnerships with criminal justice agencies, jails, prisons, or courts
- Implement same-day access protocols so that every client can be seen on the same day they are referred for services
- Adopt new technologies that support care delivery, such as EHR upgrades, mobile apps, web platforms, telehealth, etc.
- Expand capacity to provide crisis care
- Implement new care delivery or outreach partnerships with hospitals
- Improve or expand services to veterans
- Implement new care delivery or outreach partnerships with schools
- Improve outreach (e.g., hiring outreach workers, hiring care coordinators, implementing protocols to reduce no-shows via...
Biggest Impact as a CCBHC to Date

While the demonstration is still in its early stage, CCBHCs have already seen major benefits in their communities. Among the biggest successes reported in Pennsylvania are:

- **“Better integration** of mental health and substance use treatment”
- **“The ability to meet the intrinsic needs of all demographics with different presenting needs across settings.** Our ability to provide immediate access to care and to provide a holistic approach to treatment for co-occurring, dual diagnosis and all other mental health and D&A presentations. We can envelop each client with a full range of psychiatric services from psych Evaluation, Medication Management, Individual, Family and Group Therapy, cognitive behavioral therapy, and Trauma Informed focused treatment...[and] Mobile Services.”

Future of the CCBHC demonstration in Pennsylvania

The CCBHC demonstration is transforming Pennsylvania clinics’ ability to serve people in their communities. Unfortunately, without Congressional action, the state’s six CCBHCs will be forced to stop in their tracks when the program ends in 2019. The Excellence in Mental Health and Addiction Treatment Expansion Act (S. 1905/H.R. 3931) would extend Pennsylvania CCBHCs’ activities for an additional year and expand the program to include 11 other states that applied for the demonstration but were barred from participation by the eight-state limit in current law. The National Council for Behavioral Health urges Congress to take quick action to extend the life of this important demonstration program.

Please contact Rebecca Farley David at the National Council with questions (RebeccaD@TheNationalCouncil.org)