

# CCBHC-E NTTAC Sustainability Learning Series

## Session 1: Building the Value Case for Statewide CCBHC Implementation

November 14, 2022

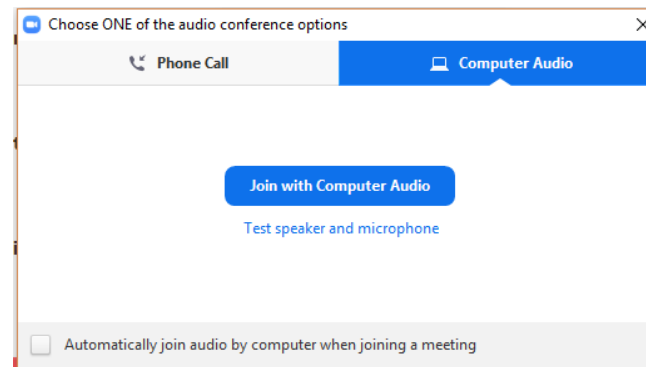
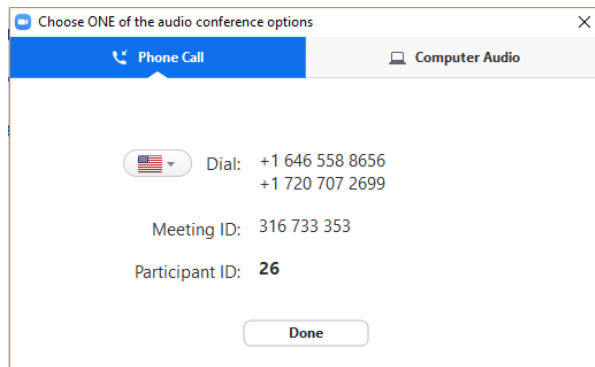
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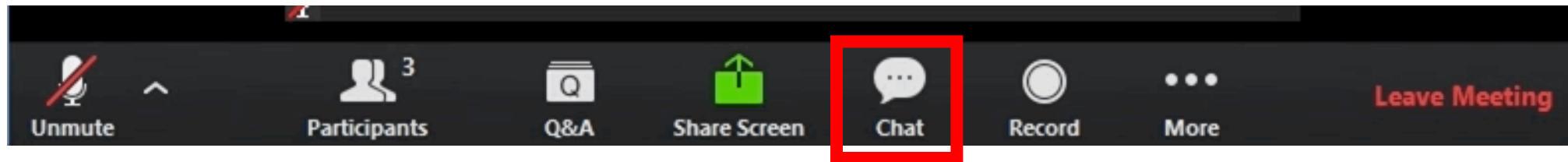
# Zoom Logistics

Call in on your telephone, or use your computer audio option

If you are on the phone, remember to enter your Audio PIN so your audio and computer logins are linked



# How to Ask a Question



Share questions throughout today's session using the **chat box** feature on your Zoom toolbar. **We'll answer as many questions as we can throughout today's session.**



# Acknowledgements and Disclaimer

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# Agenda



- Welcome and logistics
- Review of agenda, learning objectives and presenters
- Current status of CCBHC and CCBHC implementation pathways for grantees and states
- Using CCBHC data to build a value case
- Case Studies: KS and AR
- Next Steps: Sustainability plans and actions
- Questions



# Learning Objectives

- Describe approaches CCBHCs can take to work with partners and other stakeholders to demonstrate the value of the CCBHC model
- Identify how other clinics have used data to engage states in conversations about CCBHC implementation and impact



# Today's Presenters



**Jane King, PsyD, LP**  
*Senior Consultant*  
CCBHC-E NTTAC, National  
Council for Mental  
Wellbeing



**Mindy Klowden, MNM**  
*Senior Director*  
Third Horizon Strategies



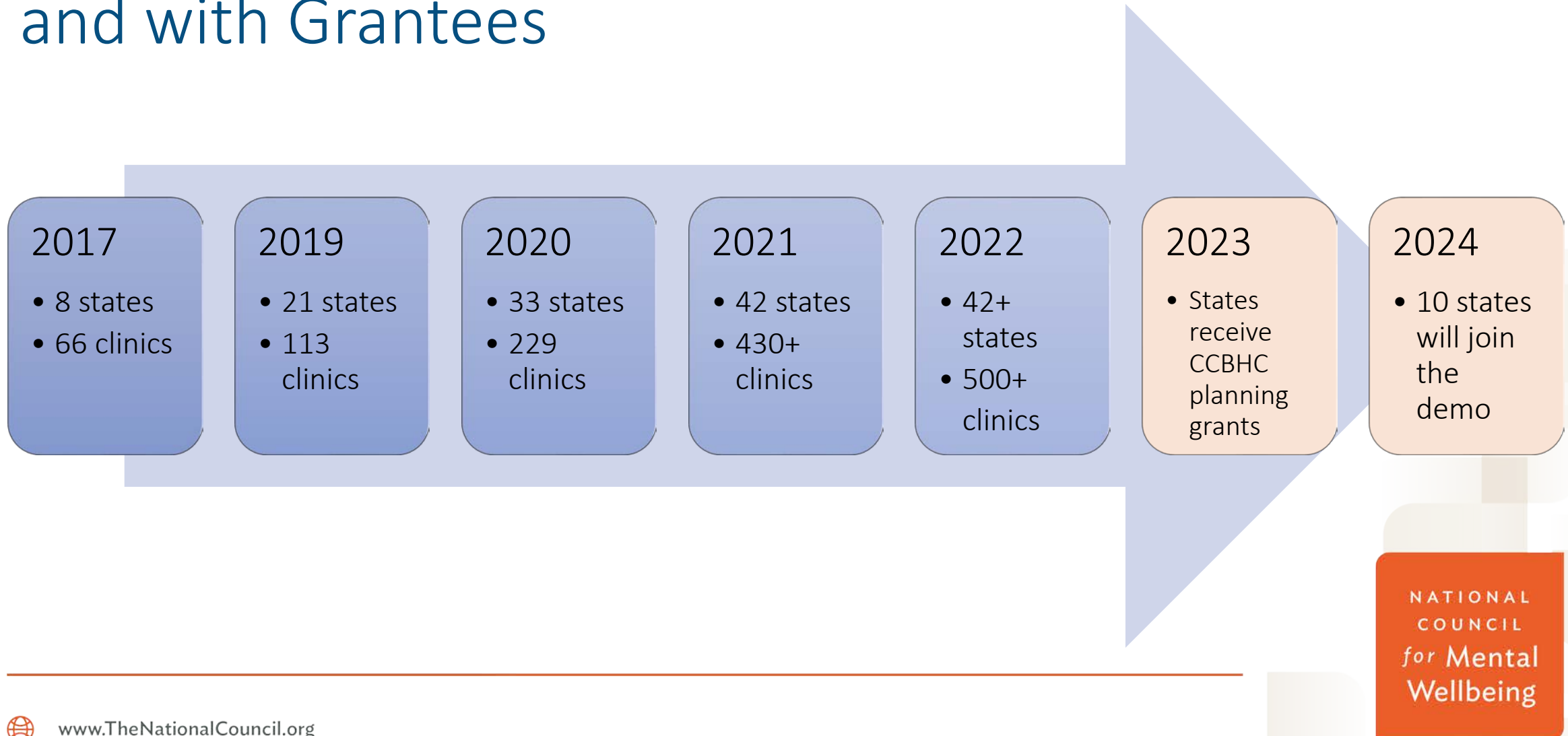
**Steve Denny**  
*Deputy Director*  
Four County Mental Health  
Center



**Rusti Holwick**  
*Chief Executive Officer*  
Western Arkansas Counseling  
and Guidance Center

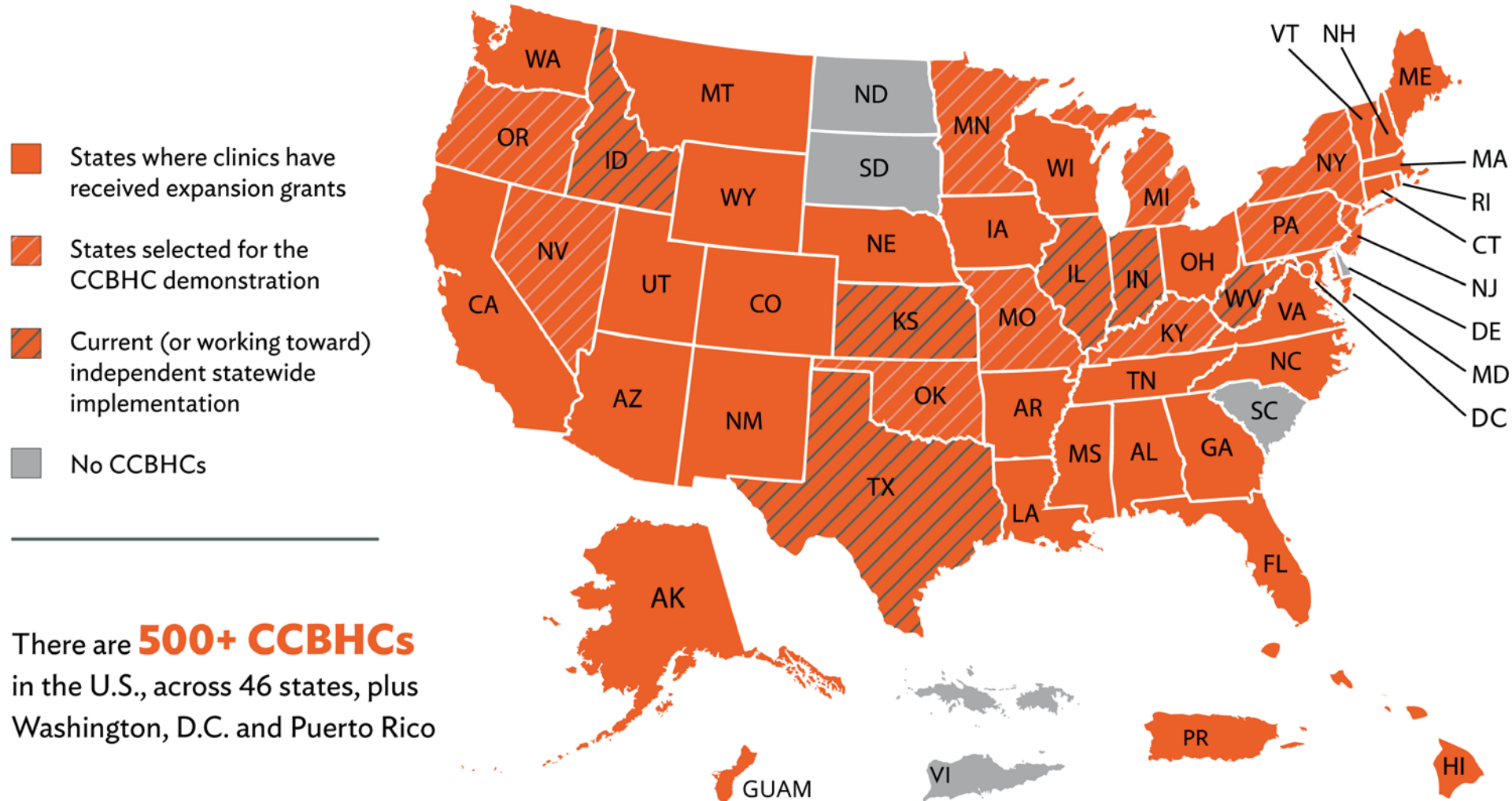


# Incredible Growth with the CCBHC Demonstration and with Grantees





# Status of Participation in the CCBHC Model



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# Bipartisan Safer Communities Act Expands CCBHC Demonstration Nationwide

- Beginning July 2024, and every 2 years thereafter, up to 10 additional states can be selected by HHS to join the demonstration.
- Makes planning grants available for new states to develop proposals to participate.
- Eight original demonstration state programs extended to September 2025, and the two newer demo states (Kentucky and Michigan) programs extended to 6 years after their program launch.
- Provides 4 years of enhanced Medicaid match for CCBHC services ([E-FMAP](#)).
- Appropriates \$40M for planning grants and technical assistance to states applying for the grants.



# The CCBHC Landscape

## Three implementation options:

1. Federal grant funding for clinics
  - 500+ grantees in 49 states and territories
2. Medicaid demonstration
  - 10 states approved for the Medicaid enhanced match
  - 10 more states will join in 2024 and 10 more every 2 years after
3. Independent state implementation via Medicaid SPA or waiver
  - Legislative actions in EIGHT legislatures to date, including funds for grants

### SAMHSA CCBHC Expansion Grants

Yearly funds awarded since 2018

Grantees in 49 states & territories

Largest cohort of awardees began September 2022

### CCBHC Medicaid Demonstration

Extended until **2025 and 2028**

8 states began in 2017

Michigan & Kentucky began in 2021

10 more states will join in 2024

### CCBHC State Actions

Texas' bundled payment began April 2022

Kansas CCBHC PPS payment began May 2022



# SAMHSA CCBHC Expansion Grants vs. Medicaid CCBHC Demonstration

Medicaid CCBHC Demonstration	SAMHSA CCBHC Expansion Grants
Open to participating demonstration states and the state determines how, and which clinics can participate.	Open to community-based behavioral health non-profit organizations, or organizations as defined by SAMHSA NOFO. Open in all states, grant application periods typically open annually.
Administered by state Medicaid and Behavioral Health authorities within guidelines set by SAMHSA/CMS.	Administered by SAMHSA.
States determine certification criteria using SAMHSA guidance as a baseline.	Grantees must submit an attestation demonstrating that they meet the CCBHC certification criteria requirements, whether through their state certification or via the federal CCBHC certification criteria.
CCBHCs are certified by their states.	Grantees can be certified by their states, where there is an option, but still, need to submit an attestation to SAMHSA.
CCBHCs receive clinic-specific Medicaid payments through the PPS methodology.	SAMHSA CCBHC grantees receive grant funds for a set period of time to implement approved services and activities and continue to bill Medicaid and other payers as usual during that period.



# Options for States via Medicaid

## Medicaid Waiver (e.g., 1115)

Enables states to experiment with delivery system reforms

Waives “state-wideness”: the state can limit the number of clinics selected to receive the PPS rate

Only authorizes CCBHC for 5 years

Allows the state to determine if state will follow criteria, PPS and outcome measures

TX is only state with approved 1115 (it follows demo criteria and not PPS)

## State Plan Amendment (SPA)

Enables states to **permanently** amend Medicaid plans to include CCBHC as a provider type, with scope of services, criteria and requirements, etc.

Cannot waive “state-wideness,”: State will have to pay claims from “any eligible provider” who meets certification standards

All current approved SPAs followed the CCBHC demo criteria and PPS

## CCBHC Demonstration

Enables states to experiment with delivery system reforms

Provides an enhanced Medicaid Match for states

**Currently state planning grant NOFO open with due date of 12/19/2022**

State may limit the number of clinics selected to receive the PPS rate

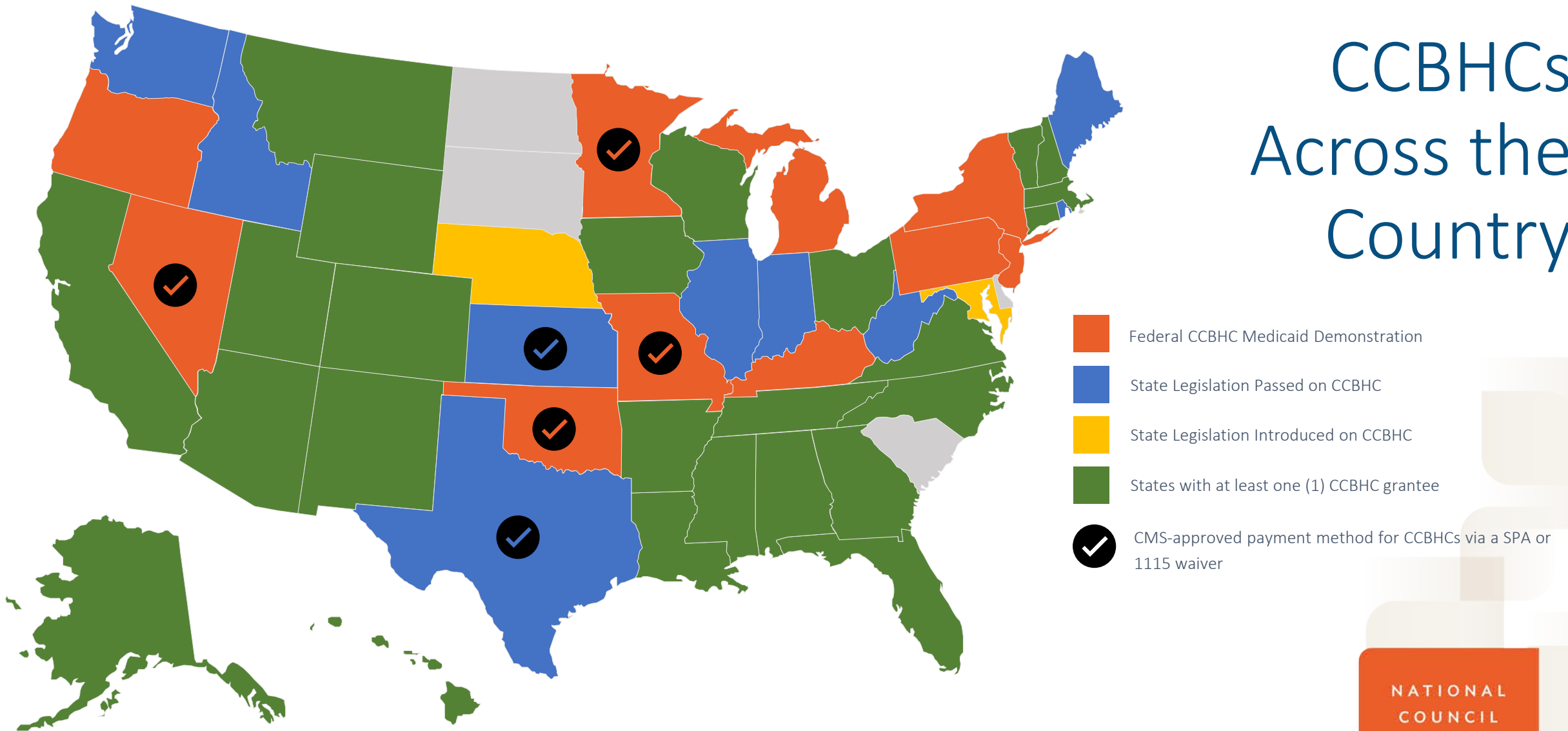
State must follow all CCBHC demo criteria and PPS

**1115 waivers:** Texas

**SPAs:** Missouri, Nevada, Oklahoma, Minnesota and Kansas



# CCBHCs Across the Country



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# The SAMHSA State Planning Grant Notice of Funding Opportunity is LIVE

- <https://www.samhsa.gov/sites/default/files/grants/pdf/fy-23-ccbhc-planning-grants-nofo.pdf>
- **Anticipated number of awards: 15**
- Amount per award: up to \$1M
- **Application due date: December 19, 2022**
- Anticipated award date: March 15, 2023
- Anticipated project start date: March 30, 2023
- Eligible entities: States (plus DC) that were not previously selected to participate in the CCBHC Demonstration Program



# Required Activities

1. **Solicit input** for the development of a state CCBHC Demonstration program from **consumers** (including youth), family members, **providers**, tribes, and other key stakeholders.
2. Ensure the **initial set of clinics** identified by the state for participation in the demonstration is **certified using the Certification Criteria** and establish procedures and necessary infrastructure to ensure clinic compliance with Certification Criteria throughout the CCBHC Demonstration period.
3. **Establish a PPS** for behavioral health services furnished by a CCBHC in accordance with the PPS Methodology Guidelines developed by CMS.
4. Establish the capacity to provide behavioral health services that meet the Certification Criteria.
5. **Develop or enhance data collection and reporting capacity** and provide information necessary for HHS to evaluate proposals submitted by states to participate in the CCBHC Demonstration program
6. Submit a Proposal to Participate in the CCBHC Demonstration Program







# States who were FIRST

Outside of the demonstration states who were the first to establish the model, three states have been innovative in their legislative efforts:

- **Kansas:** First state to **pass legislation requiring a state plan amendment** for CCBHC with the required criteria
  - Texas established criteria and a waiver for CCBHC but did not mention CCBHC by name.
- **Indiana:** First state to **include 988 (National Suicide Prevention Lifeline)** in legislation as part of its criteria.
  - Michigan required inclusion of its own statewide hotline, prior to 988 policies being established
- **Washington:** First state to **provide CCBHC bridge grants** for SAMHSA grantees at risk of losing funding
  - Illinois decided to use funds to support expiring grantees, but it was not in legislation.

# Recommendations for Advocacy and Building/ Spreading Your Value Case

- **You don't need to do this alone** -- Connect with your state association, peer CCBHCs, community stakeholders
  - Ensure your ask aligns with theirs – state associations are leaders and experts on advocacy.
  - Engage your community - Unexpected messengers (schools, teachers, county officials) are key advocates at the state and federal levels. Help them help you!
- **Know your data and your peer CCBHCs' data**
  - If most grantees are successful and sharing impact information in unison, it tells others that this works for the state, community, not just your clinic.
  - Consider connections to other priorities and contributions to other priorities and programs. *Ex: Using CCBHC as the vehicle for other MH/SU programs (e.g., 988, reentry supports, school-based care).*
  - Frame your data in a way that demonstrates impact. *Ex: Hiring 5 staff may not sound like a lot, but if your clinic only had 15 staff, you've increased your workforce by 33%!*
- **Keep it simple and short**
  - CCBHC can be complex to explain, keep the conversation high level and have talking points prepared.
  - Personal stories are powerful, but longer stories may lose their effect.



# Using Data Toward Other Sustainability Efforts

- Capture and share compelling data to demonstrate the value proposition of CCBHCs and promote sustainability.
- Build or expand community partnerships that can help champion the value of CCBHCs to state policymakers and payers – consider data sharing efforts between partners.
- Work alongside other grantees and state associations to educate and communicate the value of CCBHCs and explore pathways for statewide implementation.

## Other ideas (covered during Session Three!)

- Use data to identify opportunities and financial efforts that help achieve internal efficiencies, maximize billing, and understand costs.
- Develop your system's ability to capture all the services/contacts that CCBHCs are having with their clients can help drive the return on investment and make the value case to payers.



# What Data?

**Clinics should tailor their messaging to different audiences.** Some of the data stakeholders may find the most compelling include:

- National Outcomes Measures Survey (NOMS) data showing improvements in domains such as functioning, symptom severity, patient experience of care, and housing status
- Increased access to care (numbers and populations served, new services available in a community, reduced wait times)
- Improved health outcomes
- Impact on cost drivers (E.D. and hospital utilization, post-discharge coordination of care)



# Case Study: Four County Mental Health Center (FCMHC), Inc-Kansas

Steve Denny, Deputy Director, CCBHC Project Director

- FCMHC was the first CCBHC grant recipient in Kansas in July 2020
- Engaged in legislative planning, advocacy, and eventual testimony on bill
  - State Association (ACMHCK)
  - State Behavioral Health Authority (KDADS)
  - State Medicaid Authority (KDHE)
- Used existing CCBHC data from grant for testimony
  - Expanded services to veterans
  - Assertive Community Treatment (ACT)
  - Increased numbers served
- Legislation signed in June of 2021
- Started CCBHC service provision under PPS in May of 2022

## **CCBHC-E Grant Awards in Kansas:**

May 2020: 1 award (Four County MH)

Feb. 2021: 5 new grant awards

Aug 2022: 1 new grant award

Sept 2022: 10 PDI grant awards

Sept 2022: 3 IA grant awards

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# Case Study: Western Arkansas Counseling and Guidance Center

Rusti Holwick, Chief Executive Officer, Western Arkansas Counseling and Guidance Center

- Collaborated with all grantees in AR
- Utilized Tri-West to combine statewide CCBHC data
- Although legislation not passed, opened up communication between providers and state and built an association in AR when there had not been one before





# Questions?



# Developing a Sustainability Plan

## From CCBHC-E PDI NOFO:

- *“**Within one year of grant award**, develop and implement a sustainability plan to support delivery of services once federal grant funding ends; and update the sustainability plan annually.”*





# Next Steps...

## Connect

Reach out to your state association

Learn about progress made and information needed to advocate for CCBHC

Collaborate with other CCBHC-E grantees in your state

## Collect

Collect NOMS data for grant

Develop data dashboards

Research what data points are relevant for the state at this moment

Look for improvements in data after reassessment or compared to previous such as an increase in persons served

## Educate

Find out whether your state has already begun CCBHC planning work and get involved

Engage with your state on CCBHC Planning Grant proposal consideration and process (this year or in subsequent opportunities)

Research other sustainable funding sources in your state

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# CCBHC-E NTTAC Sustainability Learning Series Sessions

## Session 2: Transitioning from Grant Programs to State Certification

- Monday, Dec. 5, 2-3 p.m. ET
- [Register here](#)

## Session 3: Financing for Sustainability – Understanding Our Cost and Preparing for New Payment Models

- Monday, Jan. 9, 2-3 p.m. ET
- [Register here](#)



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# Questions or Looking for Support?



Visit our website and complete the **Request Technical Assistance** form:

<https://www.thenationalcouncil.org/ccbhc-e-nttac/>

## Receive assistance from our team of experts!

The CCBHC-E National Training and Technical Assistance Center provides consultation and technical assistance on CCBHC implementation to expansion grantees. Fill out this form to request assistance today.

Request Training/Assistance

Fields marked with an (\*) are required.

First name *	Last name *
<input type="text"/>	<input type="text"/>
Title *	Organization/Company *
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# Thank You!

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