

CCBHC Financial Management and Sustainability Learning and Action Series, Session 2: Understanding Your Baseline CCBHC Program

Wednesday, June 14th, 2023 2:30-4:00 pm E.T.

CCBHC-E National Training and Technical Assistance Center

Funded by Substance Abuse and Mental Health Services Administration and operated by the National Council for Mental Wellbeing

Acknowledgements and Disclaimer

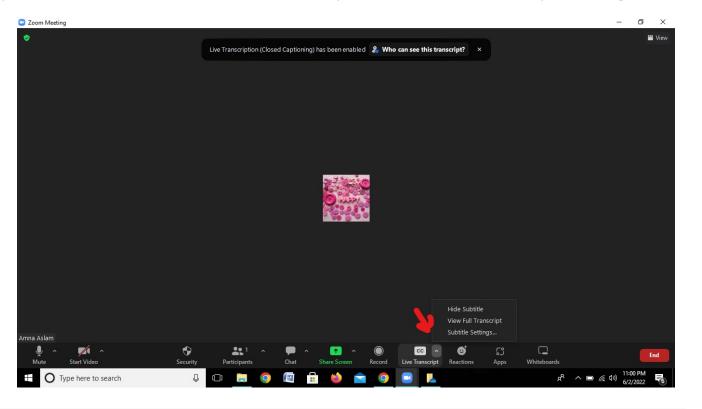
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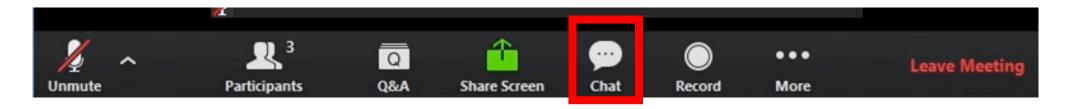
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How to Ask a Question

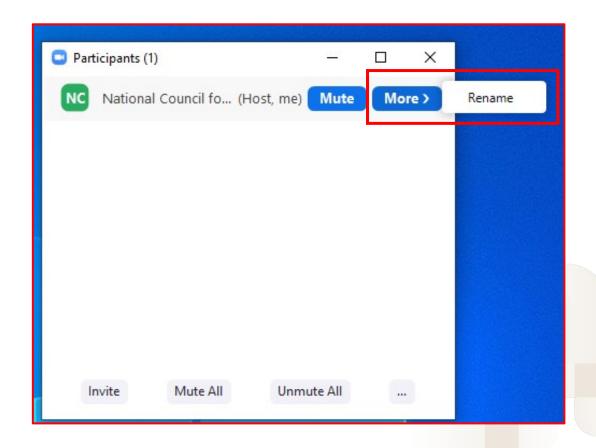


Please share questions throughout today's session using the **Chat Box** on your Zoom toolbar. **We'll answer as many questions as we can throughout today's session.**



Name and Organization

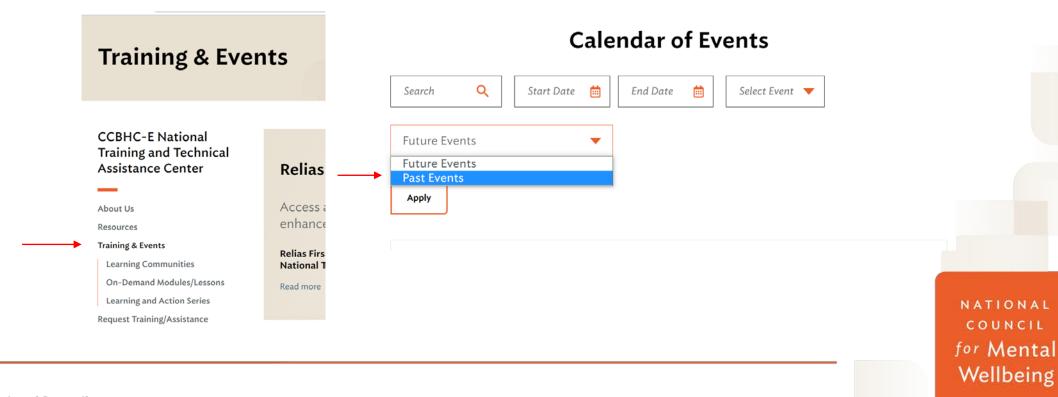
- Please join by video if you are able!
- Please rename yourself so your name includes your organization.
 - For example:
 - Hope Rothenberg, National Council
 - To rename yourself:
 - Click on the Participants icon at the bottom of the screen
 - Find your name and hover your mouse over it
 - Click Rename
- If you are having any issues, please send a Zoom chat message to **Ritu Dhar, National Council**





Today's Session: Slides and Recording

Slides and the session recording link will be available on the <u>CCBHC-E NTTAC website</u> under "Training and Events" > "Past Events" within 2 business days.



Today's Agenda

- Welcome and logistics
- Review of agenda, learning objectives, and presenters
- Discussion Homework Assignment from Session #1
- Review of Sustainability Plan and underlying financial plan
- CCBHC Baseline
 - Personnel costs
 - Other then personnel services (OTPS) costs
- Requirements of finance and operations systems
- Homework Assignment
- Questions



Learning Objectives

- Define baseline services and allocation between CCBHC and non-CCBHC services and activities
- Identify techniques to allocating baseline costs between CCBHC and non-CCBHC programs/services
- Review the data capture and reporting requirements for CCBHC sustainability and understand potential modifications to existing systems



Today's Presenters



Peter R. Epp, CPA

Partner,

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CohnReznick LLP



Joanne McNamara, JD

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council for Mental Wellbeing

Understanding Your Baseline CCBHC Program

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Partner, Community
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Homework Assignment from Session #1

In Session #1, we discussed:

- Sustainability Plans and the elements of the underlying financial model
- The CCBHC "Total Budget Concept"
- Costing-out the CCBHC Total Budget
- Potential revenue streams available to sustain the CCBHC program

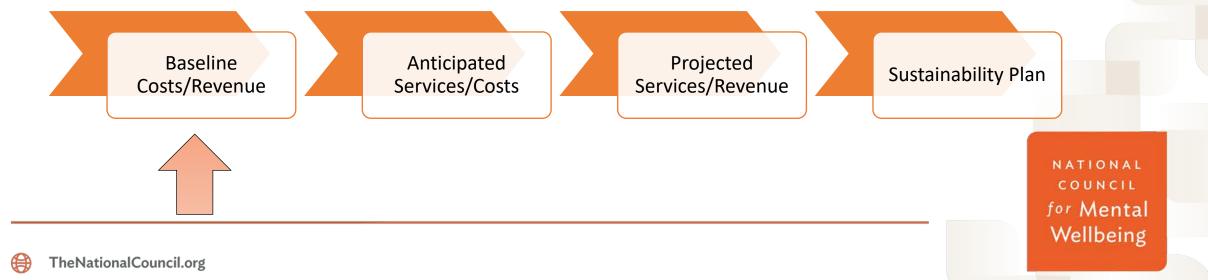
Homework for Session #2:

- What services should be included and excluded from the CCBHC Total Budget?
- What are your current thoughts on revenue streams that may support the implementation of the fully-compliant CCBHC program? What are the obstacles?
- Other comments?



Summary – Potential Elements of a CCBHC Sustainability Plan

- An Executive Summary that describes, in narrative form, the previously described elements of the Business Plan
- The Sustainability Plan should be supported by a financial plan/projection covering the CCBHC "Total Budget" concept with the following components:
 - Summary revenue and expense projections
 - Client and services/volume budget



Components of the CCBHC Total Budget

	ССВНС	N	lon-CCBHC	Indir	ect/Overhead	TOTALS
Salaries & Wages:						
Base Year, Adjusted	\$ 7,500,000	\$	1,000,000	\$	1,500,000	\$ 10,000,000
Anticipated	\$ 5,000,000	\$	-	\$	500,000	\$ 5,500,000
Total Salaries & Wages	\$ 12,500,000	\$	1,000,000	\$	2,000,000	\$ 15,500,000
Fringe Benefits & Payroll Taxes:						
Base Year	\$ 1,500,000	\$	200,000	\$	300,000	\$ 2,000,000
Anticipated	\$ 1,312,500	\$	25,000	\$	150,000	\$ 1,487,500
Total Fringe Benefits & Payroll Taxes	\$ 2,812,500	\$	225,000	\$	450,000	\$ 3,487,500
Other Than Personnel Services:						
Base Year	\$ 2,500,000	\$	500,000	\$	250,000	\$ 3,250,000
Anticipated Costs	\$ 500,000	\$	-	\$	100,000	\$ 600,000
Total Other Than Personnel Services	\$ 3,000,000	\$	500,000	\$	350,000	\$ 3,850,000
Total Expenses, Before Allocation	\$ 18,312,500	\$	1,725,000	\$	2,800,000	\$ 22,837,500
Direct Program Expense %s	91.39%		8.61%			100.00%
Allocation of Indirect/Overhead	\$ 2,558,952	\$	241,048	\$	(2,800,000)	\$ -
Total Expenses, After Allocation	\$ 20,871,452	\$	1,966,048	\$	_	\$ 22,837,500

Components of
Base Year Costs to
be Identified/
Captured

Steps to Capturing CCBHC Baseline Costs

1st Understand CCBHC Covered Services*

Review CCBHC core required services in the CCBHC Certification Criteria

2nd Compare Existing Services Versus CCBHC Covered Services*

 Identify what CCBHC Covered Services are currently provided and where captured in the financial and billing systems

3rd Allocate Direct Costs to CCBHC, non-CCBHC and Agency Overhead

- Personnel costs (salaries & wages, and fringe benefits)
- Other then personnel costs (OTPS)

4th Allocate Overhead Costs (Agency Wide)

Overhead costs that benefit both CCBHC and non-CCBHC services should be allocated

* These steps must be performed through a multi-disciplinary effort of the clinical, operational and financial teams!



- CCBHC Covered Services are identified in the SAMHSA CCBHC Certification Criteria
- Program and operations staff generally develop a tracking template containing the CCBHC Certification Criteria and documentation of compliance with the Criteria
- Finance staff should work with program and operations staff to understand the CCBHC services that are currently provided by the agency

Criteria	Description of Item Meeting Requirement	Documentation of Evidence	Status of Completion
GEN	ERAL SERVICE PROVISIONS	5	
4.a.1 - CCBHC Scope of Services			
4.a.2 - DCO Accessible Services			
4.a.3 - CCBHC/DCO Grievance Procedures			
4.a.4 - DCO Service Quality Standards			
4.a.5 - CCBHC/DCO Care Coordination			
4.b.1 - CCBHC Person-centered/Family-centered Care			
4.b.2 - Culturally Sensitive Care			
4.c.1 - Crisis Behavioral Health Services			
4.d.1 - Screening/Assessment/Diagnosis			

Excerpt from "CCBHC New Grantee Resource Package, Appendix C: CCBHC Attestation Certification Criteria Compliance Template" – National Council for Mental Wellbeing



- Finance staff need to then translate the CCBHC Covered Services provided analysis to where these activities (revenue and expenses) are captured in the accounting records (general ledger)
- Program activities are generally captured in the accounting records utilizing subaccounts, cost centers or department codes
- A crosswalk linking the CCBHC Covered Services to accounting record account codes can assist with capturing the costs of CCBHC Covered Services

CCBHC Certification Criteria	General Ledger Sub-account Description	General Ledger Sub- account	X = CCBHC Core Service	X = Non-CCBHC Service	X = Both CCBHC & Non-CCBHC Services	X = Central Agency Administration (Overhead)
Crisis Behavioral Health Services	Crisis Clinic	1000	X			
Screening/Assessment/Diagnosis	Outpatient Clinic	2000	X			
Residential Treatment	Treatment Facility	3000		Х		
Accounting Department	Accounting	8000				Х



Trial Balance		ССВНС	Financial Plan
CCBHC Direct Cost	Item:		
Program A	\$ 100,000		
Program B	75,000		
Program C	50,000		
TOTAL	\$225,000		\$225,000
Non-CCBHC Direct	Cost Item:		
Program D	\$50,000		\$50,000
Overhead Cost Ite	<u>m:</u>		
Department 1	\$75,000		
Department 2	50,000		
TOTAL	\$125,000		\$125,000

Example of accounting records (trial balance) CCBHC crosswalk

 Group expenses for subaccounts aligned with the CCBHC program to capture direct costs for CCBHC, non-CCBHC, and Overhead

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Steps to Review Current Subaccount Coding Structure

If a subaccount contains cost items in more than one category, the CCBHC has 2 options

1st Allocate costs in a separate schedule (Excel spreadsheet) to the appropriate cost category

2nd Separate the current subaccount category into 2 or more "new" subaccounts

- Most CCBHCS opt for option 1
- Special Note on Salary Cost:
 - The allocation of salaries in the accounting records by subaccount is often not reflective of the movement of staff between programs and services
 - Most CCBHCs allocate salary cost utilizing a separate schedule with a detailed salary list by individual name, job title, salary paid, FTE and services provided, if any, and allocate between the 3 cost categories in consultation with program and operations staff



- To assist with allocating clinical staff between CCBHC and non-CCBHC services, consider building a template assigning CPT codes to the CCBHC Covered Services list
- This CPT code list will also assist with sustainability planning
 - Allocate patient revenue to the CCBHC program
- States in the CCBHC Medicaid Demonstration program have developed CCBHC CPT code sets to assists CCBHCs with billing

HCPC S/CPT	Mod 1	Mod 2	Description of Service							
DEMONSTRATION SERVICES (ENCOUNTERS THAT TRIGGER PPS RATE) - T1041										
	EMERGENCY CRISIS INTERVENTION, 24 HOUR MOBILE									
H0030	HH/HF		Crisis Intervention Services, Telephone	LBHP						
H2011	HH/HF		Crisis intervention services	LBHP						
H2011	HH/HF	GT	Crisis intervention services - Telehealth	LBHP						
90839	HH/HF		Mobile Crisis - first 60 minutes	LBHP						
90839	HH/HF	GT	Mobile Crisis - first 60 minutes - Telehealth	LBHP						
90840	HH/HF		Mobile Crisis - additional 30 minutes	LBHP						
90840	HH/HF	GT	Mobile Crisis - additional 30 minutes - Telehealth	LBHP						





Personnel Costs – Salaries & Wages

- Prepare an Excel worksheet with the following information to allow for an accurate allocation of staff costs between CCBHC, non-CCBHC and overhead
 - Staff name
 - Job position/title
 - Full-time equivalent (FTE) *
 - Salary paid
 - Allocation of salary cost between CCBHC, non-CCBHC and overhead
 - Percentage and Amount
 - * FTE is a calculation of an individual's time spent working at the agency as compared to a full-time employee. For example, if a full-time employee works 40 hours a week for 53 weeks, they are working 2,080 hour per year. If an individual works 1,040 hour per year, they are considered a .50 FTE $(1,040 \div 2,080 \text{ hours})$



Personnel Costs – Salaries & Wages (Example Template)

	FY2022	2 Bas	e Year		% Alloc		А	ctua	Salary / Amo	unt	Paid Allocation	n					
Job Title	Actual FTE Amount	Actual Salary / Amount Paid		, ,		Direct CCBHC %	Direct Non- CCBHC %	Indirect / Overhead %	Total (100%)	Dir	ect CCBHC \$		irect Non- CCBHC \$		Indirect / Overhead \$		Total \$
	231.50	\$	10,000,000					\$	7,500,000	\$	1,000,000	\$	1,500,000	\$	10,000,000		
Psychiatrist	1.00	\$	200,000	75%		25%	100%	\$	150,000	\$	-	\$	50,000	\$	200,000		
Psychiatrist	0.50	\$	125,000		100%		100%	\$	-	\$	125,000	\$	-	\$	125,000		
Licensed Clinical Social Worker	1.00	\$	90,000	100%			100%	\$	90,000	\$	-	\$	1	\$	90,000		
Residential Treatment Support Staff	1.00	\$	50,000		100%		100%	\$	-	\$	50,000	\$	-	\$	50,000		
CCBHC Program Director	1.00	\$	100,000	100%			100%	\$	100,000	\$	-	\$	1	\$	100,000		
Accountant	1.00	\$	50,000			100%	100%	\$	-	\$	-	\$	50,000	\$	50,000		

<u>NOTE:</u> For staff shared between multiple categories, time can be allocated based on time studies, schedules or billable activity as indicated in the electronic health record/billing systems



Personnel Costs – Fringe Benefits & Payroll Taxes

- Fringe benefits and payroll taxes expenses are typically aligned with salary expense
- There are 2 option for allocating fringe benefits and payroll taxes to CCBHC, non-CCBHC and overhead
 - Charging each expense to each individual and allocating consistent with the salary allocation template
 - Develop a fringe benefit/payroll tax rate (total fringe benefits & payroll taxes as a % of total salary expense) and allocate fringe benefits to each category based on this %

Total Fringe Benefits & Payroll

Taxes Expense = Fringe Rate (%)

Total Salary Expense

• The 2nd alternative is often utilized as it is administratively less burdensome



Personnel Costs – Fringe Benefits & Payroll Taxes (Example)

Calculation of the fringe rate

Salaries & Wages			\$ 10,000,000
Fringe Benefits & Payroll Taxes	Fringe Rate >	20.00%	\$ 2,000,000
Total Personnel Costs			\$ 12,000,000

Allocation of fringe benefits and payroll taxes

	ССВНС	N	on-CCBHC	Indir	ect/Overhead	TOTALS
<u>Salaries & Wages:</u> Base Year, Adjusted	\$ 7,500,000	\$	1,000,000	\$	1,500,000	\$ 10,000,000
Fringe Benefits & Payroll Taxes: Base Year @ 20%	\$ 1,500,000	\$	200,000	\$	300,000	\$ 2,000,000
TOTAL PERSONNEL COSTS - BASE YEAR	\$ 9,000,000	\$	1,200,000	\$	1,800,000	\$ 12,000,000



Other Then Personnel Services (OTPS) Costs

- Similar to salary costs, prepare an Excel worksheet with the following information to allow for an accurate allocation of OTPS costs between CCBHC, non-CCBHC and overhead
 - Account and subaccount number
 - Description of expense
 - Expense amount
 - Allocation of OTPS cost between CCBHC, non-CCBHC and overhead
 - Percentage and Amount



Other Then Personnel Services (OTPS) Costs (Example Template)

Expense Account Number	Subaccount Number	Expense Description	\$ Amount
Other Than Person	nel Services:		\$ 3,250,000
1000	250	Clinical Supplies	\$ 250,000
1000	500	Residential Supplies	\$ 50,000
1000	750	Office Supplies	\$ 25,000
2000	600	Rent Expense	\$ 750,000
2000	500	Rent - Residences	\$ 100,000
5000	800	Telephone Expense	\$ 50,000

	% Allocation									
Direct CCBHC %	Direct Non- CCBHC %	Total (100%)								
100%			100%							
	100%		100%							
		100%	100%							
75%		25%	100%							
	100%		100%							
50%	10%	40%	100%							

	Expense Allocation										
Direct CCBHC \$		ı	Direct Non- CCBHC \$	Indirect / Overhead \$			Total \$				
\$	2,500,000	\$	500,000	\$ 250,000		\$	3,250,000				
\$	250,000	\$	-	\$	-	\$	250,000				
\$	-	\$	50,000	\$	-	\$	50,000				
\$	-	\$	-	\$	25,000	\$	25,000				
\$	562,500	\$	-	\$	187,500	\$	750,000				
\$	-	\$	100,000	\$	-	\$	100,000				
\$	25,000	\$	5,000	\$	20,000	\$	50,000				

<u>NOTE:</u> For OTPS expenses shared between multiple cost categories, expenses can be allocated based on statistics that have a "cause-and-effect" relationship (e.g., allocate rent expense based on square footage)



Revenue

- Aside from building the baseline costs of the CCBHC program, current revenue received to support the current operations included in the CCBHC Total Budget must also be determined
- These revenue items are required to understand existing revenue streams that will support the CCBHC program, once fully implemented, and quantify the unfunded portion of the CCBHC program
- The building of the CCBHC revenue template would look the same as the OTPS template identifying from the accounting records
 - Revenue account and subaccount numbers
 - Revenue description
 - Revenue amount
 - Allocation between CCBHC and non-CCBHC activities



Review of Financial/Operating Systems and Potential Modifications

- Develop templates to guide the identification of CCBHC covered services and allocation of revenue and expenses to the CCBHC program
 - Crosswalk of CCBHC Certification Criteria to programs captured in the finance systems
 - CPT code set of CCBHC Covered Services
- Accounting System
 - Review general ledger subaccount coding system to align with the CCBHC program
- Develop allocations methodologies for certain expense types utilizing statistics that have a "cause-and-effect" relationship
- Electronic Health Record/Billing System has capability to segregate activities between CCBHC and non-CCBHC programs



Coming up:

Session 1:Sustainability Overview

- Overview of CCBHC Sustainability Planning
- Framework for development of total budget and total revenue concepts
- Overview of approaches to sustain CCBHC operations

Session 2: Understanding Baseline Operations

- Identification of baseline (current) services and allocation between CCBHC and non-CCBHC programs
- Review of data capture systems and discussion of modifications to existing systems to support data capture

Session 3: Evaluating "Anticipated" Costs

- Framework for evaluating costs for new or expanded services
- Approaches for projecting need for services based on identified gaps, utilization patterns, and staffing requirements

Session 4: Capturing CCBHC Services/Visits

- Translating visits and utilization to costing units and identifying impact on financial management systems
- Linkage of utilization to various payment models and impact to sustainability planning

Session 5: Pulling All the Elements Together

- Review of foundational elements across sessions to project costs and evaluate approaches to sustainability planning
- Process for monitoring and updating sustainability plans

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Homework Assignment for Session #3

The first section of Session #3 will be a discussion with participants on what was learned during this session and comments on building the CCBHC baseline for the Sustainability Plan. Please review these 2 questions and be prepared to discuss next time:

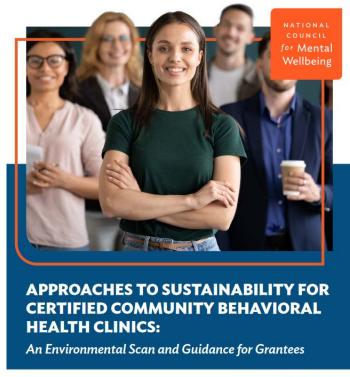
- Have you created a multi-disciplinary team of the finance, program and operation functions to collectively develop a CCBHC Sustainability Plan?
- Are your financial and operational systems designed and functioning to support the development of a Sustainability Plan? If not, what gaps were identified and what are your plans to modify those systems?
- Other concerns?





Questions?

Additional Resources



Approaches to Sustainability for CCBHCs: Guidance for Grantees

This resource identifies strategies being utilized by CCBHC grantees to achieve sustainable funding for model implementation.

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Upcoming Events

Financial Management and Sustainability (May-August 2023)

- **Session Three:** Evaluating the "Anticipated" Costs of Becoming a CCBHC June 28, 2:30-4 p.m. ET. Learn approaches for forecasting future clients served as a CCBHC and their impact on future services provided and staffing needs.
- **Session Four:** Capturing CCBHC Services/Visits July 12, 2:30-4 p.m. ET. Understand CCBHC Medicaid Prospective Payment System (PPS) and learn how to project future clients and services that will impact future potential revenue streams.
- Session Five: Pulling It All Together August 2, 2:30-4 p.m. ET. Understand the different approaches of sustaining the CCBHC program and learn the elements and structure for pulling together a sustainability plan.

Population Health Management Learning Series (June-August 2023)

- The CCBHC-E NTTAC is hosting a three session Learning and Action series focused on Population Health Management. Building on foundational concepts covered in the Optimizing Data Series, this series will expand and advance on effective population health management approaches and strategies to drive clinical care decisions focusing on topics including risk stratification to identify gaps in care, continuous quality improvement to identify and address health disparities and using advance data analytics assess patient needs and support.
 - Session One: Population Health Management (PHM) and the Role of Health Information Technology June 29, 3-4:30 p.m. ET.
 - Session Two: Risk Stratification July 27, 3-4:30 p.m. ET.
 - Session Three: Preventative Health Care and Predictive Data Analytics August 24, 3-4:30 p.m. ET.

Zero Suicide Academy (June)

• The Zero Suicide Academy training consists of two days of eight-hour online sessions on June 20 and 21, 2023. A pre-Academy online session will be conducted on June 13, 2023, to introduce participants to the Zero Suicide framework. CCBHC grantee clinics interested in this opportunity can apply here!



CCBHC-E TTA Center Website



About the CCBHC-E National Training and Technical Assistance Center

The Certified Community Behavioral Health Clinic Expansion Grantee National Training and Technical Assistance Center (CCBHC-E National TTA Center) is committed to advancing the CCBHC model by providing Substance Abuse and Mental Health Services Administration (SAMHSA) CCBHC Expansion Grantees (CCBHC-E grantees) training and technical assistance related to certification, sustainability and the implementation of processes that support access to care and evidence-based practices.

Learn More

Access our ever-growing resource library, upcoming trainings and events, and request for individualized support.

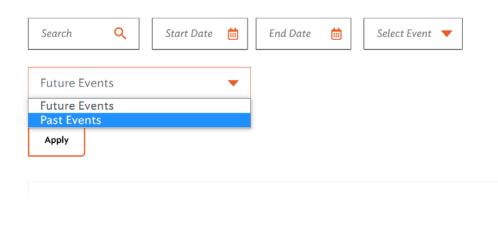
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Thank You!

Thank you for attending today's event.

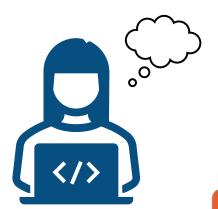
Slides and the session recording link will be available on the CCBHC-E NTTAC website under "Training and Events" > "Past Events" within 2 business days.

Calendar of Events



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Please complete the brief event survey that will open in a new browser window at the end of this meeting. Your input helps us improve our support offerings and meet our SAMHSA data metrics.



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