

CCBHCs and Peer Services

Kate Davidson, LCSW
National Council for Behavioral Health



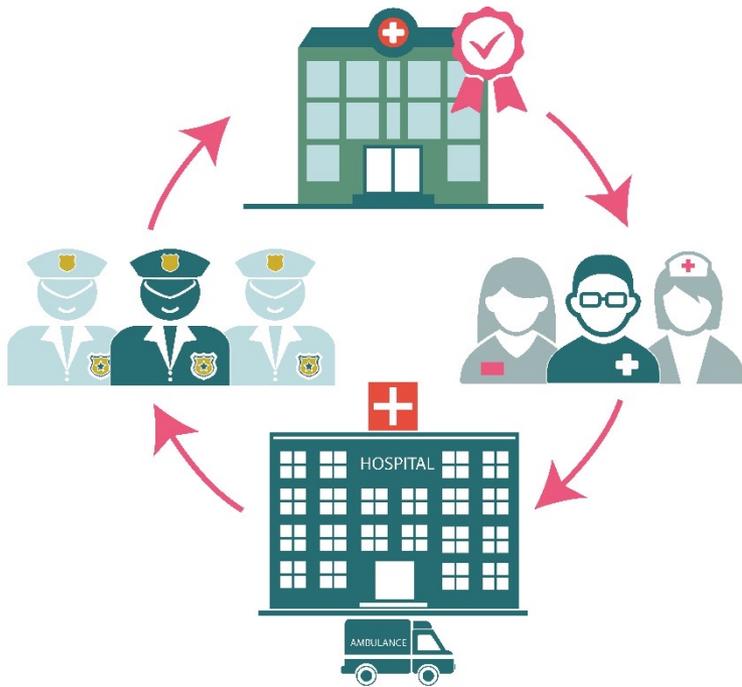
The Vision



Certified Community Behavioral Health Clinics

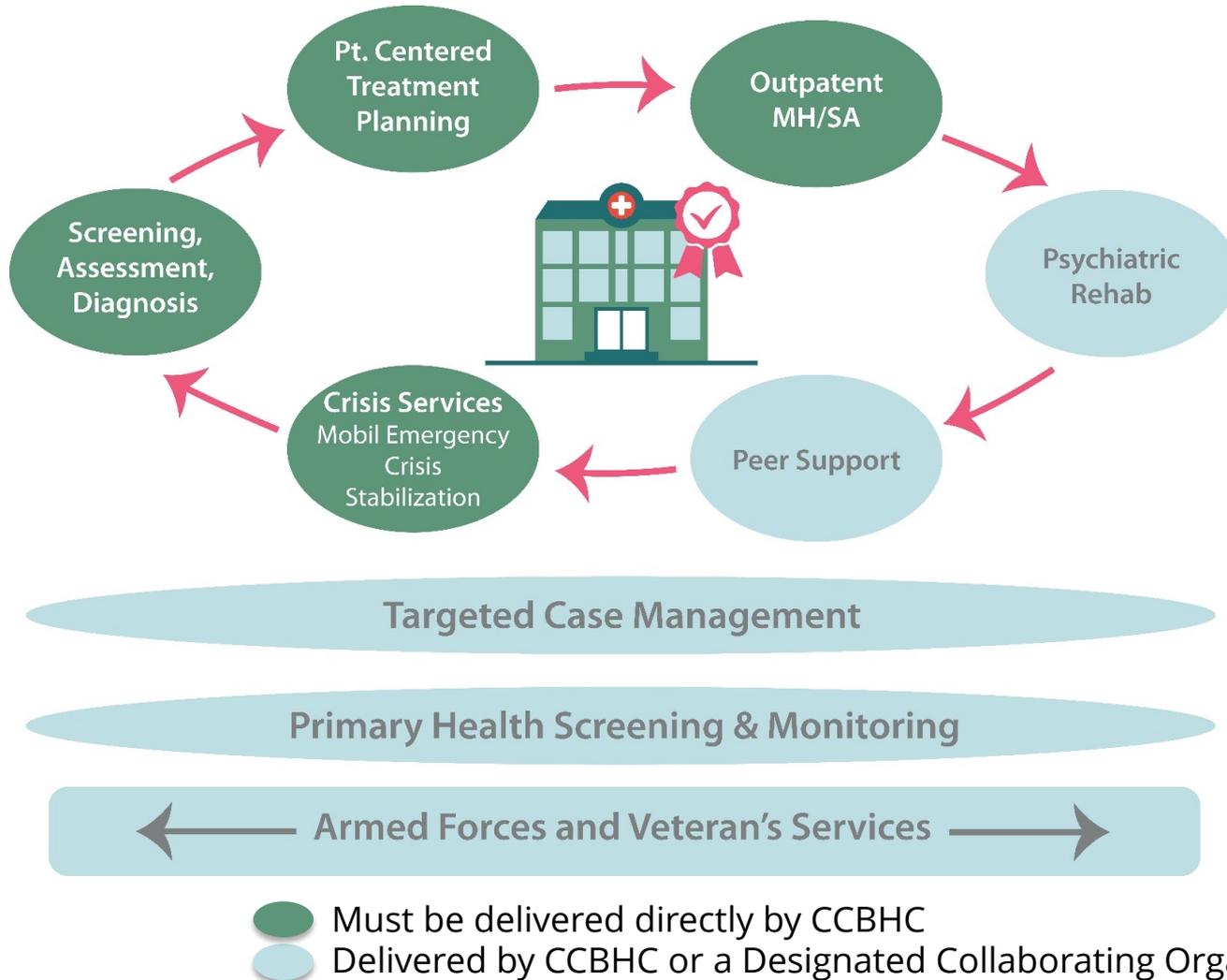
- Improve overall health by bolstering community-based mental health and addiction treatment
- Advance behavioral health care to the next stage of integration with physical health care
- Assimilate and utilize evidence-based practices on a more consistent basis

What makes CCBHCs so different?



- New provider type in Medicaid
- Distinct service delivery model: trauma-informed recovery outside the traditional four walls
- New prospective payment system (PPS) methodology
- Care coordination and service delivery requirements necessitate new relationships with partner entities

Decision Point: Scope of Services



MANDATORY: Peers built into the fabric of the CCBHC services

- Facilitating peer-run drop-in centers
- Providing crisis services and support
- Addressing the impact of trauma
- Easing the transition from EDs, detox or residential settings through peer bridge services
- Providing care coordination



OPTIONAL: As a DCO

- CCBHC faces a choice: build, buy, or partner?
 - Hire new staff to provide peer services?
 - Merge/affiliate with local peer service provider?
 - Contract with existing peer service provider as a DCO?
- CCBHCs are clinically and financially responsible for DCO services
- 20% of CCBHCs are partnering with external peer service providers



Latest news from Capitol Hill

\$100 million for CCBHCs and/or planning grant states

- Unknown:
 - What activities will the grant \$ fund?
 - Who will be eligible?
 - Over what time period will the grants be disbursed?
- The good news: an indication of support for the CCBHC model
 - More work ahead to expand the demonstration via Medicaid!



Options for states post-2019

Section 1115 Waiver

Enables states to experiment with delivery system reforms

Requires budget neutrality

Must be renewed every 5 years

State must be sure to specify inclusion of selected CCBHC services (some may not otherwise be included in state plan)

With CMS approval, offers opportunity to continue PPS

Subject to CMS approval process; consider timing of request

State Plan Amendment

Enables states to permanently amend Medicaid plans to include CCBHC provider type, scope of services, requirements, etc.

Does not require budget neutrality

With CMS approval, can continue PPS

May have to certify additional CCBHCs to meet statewideness requirements

Subject to CMS approval process; consider timing of request



Minnesota Medicaid 1115 Waiver

MN plans to continue supporting its 6 CCBHCs after the federal demo ends through an 1115 waiver

The proposed waiver would:

- ✓ Target improving the substance use disorder treatment delivery system
- ✓ Support CCBHCs from July 2019 - June 2023
- ✓ Continue the Prospective Payment System
- ✓ Continue all quality measures and formal evaluations



Questions?

Kate Davidson, LCSW

Assistant Vice President, Policy and
Advocacy

kated@thenationalcouncil.org

