

Town Hall Meeting

Certified Community Behavioral Health (CCBHC) Program

April 24, 2024

1:00 pm – 3:00 pm

Presented by



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Agenda Items

1. Overview of National CCBHC Program and Nebraska Legislative Bill (LB) 276 – Adopt CCBHC Act
2. Nebraska Department of Health & Human Services (DHHS) CCBHC Program Approach Including Timeline

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Housekeeping

- This meeting will be recorded.
- All lines are muted.
- Questions may be asked through the chat box or by unmuting your line.
- Additional questions can be submitted to DHHS.CCBHC@nebraska.gov.

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Agenda Item 1:

Overview of National CCBHC Program and Nebraska Legislative Bill (LB) 276 – Adopt CCBHC Act

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CCBHC Federal Legislation

- The Protecting Access to Medicare Act (PAMA) of 2014, effective April 1, 2014 (Public Law [Pub. L.] 113-93, Section 223) set standards for states to transform the delivery of behavioral health and primary health screening services through the CCBHC model. PAMA authorized a two-year, eight-state Medicaid CCBHC demonstration.
- The 2022 Bipartisan Safer Communities Act (BSCA) extended and expanded the CCBHC federal demonstration to an additional 10 states every two years.

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National CCBHC Program – Nine Core Services

CCBHCs Provide Nine Core Services Directly or Through Formal Partnerships

Crisis Services



Outpatient Mental Health & Substance Use Services



Screening, Diagnosis & Risk Assessment



Person- & Family-Centered Treatment Planning



Psychiatric Rehabilitation Services



Community-Based Mental Health Care for Veterans



Outpatient Primary Care Screening & Monitoring



Peer, Family Support & Counselor Services



Targeted Case Management



- Nine core services are required.
- CCBHCs can establish formal partnerships with designated collaborating organizations (DCOs), if needed, to provide core services.
- CCBHCs are responsible for providing 51 percent of the core services.

<https://www.samhsa.gov/sites/default/files/ccbhc-criteria-2023.pdf>

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Nebraska LB 276 CCBHC Act

Intent

- Increase access to mental health and substance use treatment and expand capacity for comprehensive, holistic services, respond to local needs, incorporate evidence-based practice (EBP), and establish care coordination as a linchpin for service delivery including effective community partnerships with law enforcement, schools, hospitals, primary care providers, and public and private service organizations to improve care, reduce recidivism, and address health disparities.



LB 276 closely follows the requirements as listed in PAMA.

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Nebraska LB 276 CCBHC Act

Eligible Providers

A provider who wishes to become a state-certified CCBHC must provide nationally accredited community-based mental health and substance use health services and be one of the following provider types:

Nonprofit organization.	Compact with IHS pursuant to the Indian Self-Determination and Education Assistance Act of 1975.
Unit of the local behavioral health authority.	Entity that is an urban Indian organization pursuant to a grant or contract with IHS under Title V of the Indian Health Care Improvement Act, Pub. L. 94-437.
Entity operated under authority of the Indian Health Service (IHS), Indian Tribe, or Tribal organization pursuant to a contract, grant, or cooperative agreement.	

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Nebraska LB 276 CCBHC Act

Services

- Provide, at a minimum, community-based services (nine core services required by the National CCBHC Program) either directly or indirectly through formal relationships with other providers.

Certification

- Meet the federal certification criteria of the federal PAMA of 2014 or a state certification system for CCBHCs to be established by the department and which shall be substantially equivalent to the federal PAMA of 2014.

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Nebraska LB 276 CCBHC Act

Reimbursement

- Requires development of a PPS under the medical assistance program for funding CCBHCs. Such a system shall permit either daily or monthly payment rates.
- DHHS shall submit to CMS any approval request necessary for a Medicaid state plan amendment to implement.
- Subject to such approval, such PPS shall be implemented before January 1, 2026.

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Current CCBHC Funding Resources

Centers for Medicare & Medicaid Services (CMS) Demonstration

\$40 million approved for fiscal year (FY) 2023 planning grants, technical assistance grant applications, and states participating in the demonstration. Demonstration providers are paid using a prospective payment system (PPS).

CMS Expansion Grant

Federal funds participation (FFP) extended to cover six fiscal years for Kentucky and Michigan. Four fiscal years for states added under a new demonstration.

State Medicaid Programs

States can use a 1115 Waiver of the State Medicaid Program or Medicaid State authority to define the CCBHC services and payment. CCBHC providers are subject to state oversight through their Medicaid programs.

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Agenda Item 2:

Nebraska DHHS CCBHC Program Approach Including Timeline

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Nebraska DHHS CCBHC Program Approach



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DHHS CCBHC Planning Activities

Governance

- Implementation of the CCBHC model of care in Nebraska is led by DHHS.
- Specifically, the Division of Medicaid and Long-Term Care (MLTC) and the Division of Behavioral Health (DBH) have appointed project leads who are collaborating throughout the planning and implementation process through committees and other forums to develop the CCBHC model for Nebraska.
- CCBHC committees include staff from MLTC, DBH, the Division of Public Health, etc. to develop program components including required CCBHC services, EBP, PPS methodology, certification processes, etc.

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DHHS CCBHC Planning Activities

Governance – *Continued*

- All key program requirements are presented to DHHS leadership for review and approval.
- **Key Takeaway:** In the future, the state will convene an Stakeholder feedback group comprised of providers and other vested stakeholders to provide regular updates on CCBHC program development.

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DHHS CCBHC Planning Activities

Authority

- The Nebraska CCBHC model of care will be implemented using state plan authority.
- State plan authority was selected due to it being less administrative burden for both the state and providers.
- Additionally, use of the state plan (rather than applying for the demonstration) provides a greater assurance Nebraska can operationalize the program within the timelines outlined in LB 276.

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DHHS CCBHC Planning Activities

Provider Eligibility

- Requirements as listed on slide 8.
- Detailed provider enrollment requirements will be shared at a future date.
- Completed a Community Needs Assessment (CNA) of the identified CCBHC service area within the last three years with a plan to update every three years; or documented plan to complete a CNA of the identified service area with a plan to update every three years.



DHHS seeks to certify up to six CCBHCs for a start date no later than January 2026.

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DHHS CCBHC Planning Activities

Provider Eligibility - *Continued*

- Interested providers must complete a **Request for Application** and accompanying **Readiness Assessment**.

Request for Application



Application to become a state-certified CCBHC provider.

Readiness Assessment



Offers providers the opportunity to evaluate their readiness in becoming a state-certified CCBHC.

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DHHS CCBHC Planning Activities

CCBHC Covered Services

- CCBHC services are listed on slides 20-29.
- All services deemed a CCBHC service will be included on the CCBHC Allowable Services Code List. This resource will be available to providers once complete.
- Note: Required evidence-based practices and specific CPT codes remain under review.

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DHHS CCBHC Planning Activities

CCBHC Covered Services

Below are a listing of the services that will be required to be provided by the CCBHC either directly or indirectly (use of a DCO).

Core Service 1: Outpatient mental health and substance use services

Core Service 1: Covered services

(MH and SUD) Outpatient Individual Psychotherapy

(MH and SUD) Outpatient Family Psychotherapy

(MH and SUD) Outpatient Group Psychotherapy

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DHHS CCBHC Planning Activities

CCBHC Covered Services

Below are a listing of the services that will be required to be provided by the CCBHC either directly or indirectly (use of a DCO).

Core Service 2: Crisis Mental Health Services

Core Service 2: Covered services

24-Hour Crisis Line / Crisis Response

Crisis Outpatient Psychotherapy

Treatment Crisis Intervention (Crisis Stabilization)

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DHHS CCBHC Planning Activities

CCBHC Covered Services

Below are a listing of the services that will be required to be provided by the CCBHC either directly or indirectly (use of a DCO).

Core Service 3: Screening, assessment, and diagnosis, including risk assessments

Core Service 3: Covered services

SUD Assessment / Initial Diagnostic Interview

SUD Assessment Addendum / IDI Addendum

Psychological Evaluation and Testing

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DHHS CCBHC Planning Activities

CCBHC Covered Services

Below are a listing of the services that will be required to be provided by the CCBHC either directly or indirectly (use of a DCO).

Core Service 4: Person-Centered Treatment Planning

* This service is a required element of MH and SUD services. CCBHC providers will not bill a separate code for this service.

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DHHS CCBHC Planning Activities

CCBHC Covered Services

Below are a listing of the services that will be required to be provided by the CCBHC either directly or indirectly (use of a DCO).

Core Service 5: Outpatient clinic primary care screening and monitoring of key health indicators and health risks

Core Service 5: Covered services

Primary care screening – Evaluation and Management Services

Medication Management

Tobacco Cessation

Note: State is still determining what screeners will be required.

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DHHS CCBHC Planning Activities

CCBHC Covered Services

Below are a listing of the services that will be required to be provided by the CCBHC either directly or indirectly (use of a DCO).

Core Service 6: Targeted Case Management

Core Service 6: Covered services

Targeted Case Management

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DHHS CCBHC Planning Activities

CCBHC Covered Services

Below are a listing of the services that will be required to be provided by the CCBHC either directly or indirectly (use of a DCO).

Core Service 7: Psychiatric Rehabilitation Services

Core Services 7: Covered services

Assertive Community Treatment

SUD / MH Community Support

Community Treatment Aide

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DHHS CCBHC Planning Activities

CCBHC Covered Services

Below are a listing of the services that will be required to be provided by the CCBHC either directly or indirectly (use of a DCO).

Core Service 8: Peer Support and Counselor Services and Family Supports

Core Services 8: Covered services

Peer Support

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DHHS CCBHC Planning Activities

CCBHC Covered Services

Below are a listing of the services that will be required to be provided by the CCBHC either directly or indirectly (use of a DCO).

Core Service 9: Community-Based Mental Health care for Veterans

No specific services to include. Requirement for care to be designed to assist the CCBHC in providing quality clinical behavioral health services consistent with the Uniform Mental Health Services Handbook.

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DHHS CCBHC Planning Activities

Rates and Reimbursement

- Providers will be reimbursed using a PPS rate.
 - A daily rate for all allowable CCBHC services provided on that day will be paid.
 - Rates will be provider-specific and paid regardless of the intensity of service on that day.
 - The rate will be calculated by dividing total allowable CCBHC costs by total allowable CCBHC visits.

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DHHS CCBHC Planning Activities

Rates and Reimbursement – *Continued*

- The Medicare-developed CCBHC cost report template will be used to collect CCBHC cost report information and will be required to establish a PPS rate.
 - The cost report will be reviewed to ensure compliance with Medicare and Medicaid cost reimbursement principles.
 - Anticipated costs will be allowed for the first year cost report for estimated expenses and visits that may not be present in the base year cost report.

Cost report can be found here: <https://www.medicaid.gov/media/173111>

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DHHS CCBHC Planning Activities

Rates and Reimbursement – *Continued*

- Policy development is underway to consider:
 - Rebasing frequency.
 - Assistance with reimbursement for uninsured claims.
 - Potential implementation of quality bonus payment.
 - Additional rate setting and cost reporting details.

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DHHS CCBHC Planning Activities

Community Needs Assessment

- Statewide CCBHC Needs Assessment is in progress for Nebraska's statewide behavioral health and substance use disorder outpatient services to inform how best to approach CCBHC implementation.
- The CNA will help to inform CCBHC requirements of staffing, language and culture, services, locations, service hours, and EBP.
- As part of the statewide CNA process, providers will be sent a survey in the summer of 2024 requesting your perspectives on the strengths, challenges, and opportunities for the communities serviced within Nebraska's current behavioral health landscape.

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DHHS CCBHC Planning Activities

Stakeholder Engagement

- **Town Hall(s).** DHHS will host a Town Hall meeting(s) open to stakeholders providing an update on CCBHC program design and implementation. Additional meetings will be scheduled as warranted by the project.
- **Provider Survey.** Survey will deploy in the summer of 2024 and will ask specific questions about behavioral health needs and behavioral healthcare delivery across Nebraska.
- **CCBHC Website.** DHHS is hosting a website that will have CCBHC program information for both clients and providers.

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Nebraska CCBHC Program Timeline¹

Project Tasks	Feb – Mar 2024	Apr – June 2024	Jul – Sept 2024	Oct – Dec 2024	Jan – Mar 2025	Apr – June 2025	July – Sept 2025	Oct – Dec 2025
Determine CCBHC Services and Rate Model	▶							
Release Application and Readiness Assess		▶						
Select CCBHCs		▶						
Cost Reporting			▶					
CCBHC Training			▶					
Set PPS Rate					▶			
Certification					▶			
State Plan Amendment					▶			
CCBHC Go Live							▶	

¹ Timeline may be subject to change.

Questions?

Send questions to

DHHS.CCBHC@nebraska.gov

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