

## Subject: Scope of Services

### Requirements

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- 1. Programs Affected:** All CCBHC Demonstration participants.
- 2. Background and Purpose:** The Alabama Department of Mental Health (ADMH) requires that the full scope of SAMHSA-required CCBHC services be provided by each certified CCBHC provider in Alabama. These may be provided directly or through a Designated Collaborating Organization (DCO) however, the CCBHC must directly provide the majority (51% or more) of the service encounters. ***This policy bulletin describes the nine (9) Scope of Services for CCBHCs. For more information on the specific activities that underly each of these nine (9) required CCBHC services in Alabama, see Appendix 1.***

These nine (9) required services include:

1. Crisis Services
2. Screening, Assessment, and Diagnosis
3. Person-Centered, and Family Centered Treatment Planning
4. Outpatient Mental Health and Substance Use Disorder Services
5. Primary Care Screening and Monitoring
6. Targeted Case Management Services
7. Psychiatric Rehabilitation Services
8. Peer Supports and Family/Caregiver Supports
9. Community Care for Uniformed Service Members and Veterans<sup>1</sup>

### 3. SAMHSA CCBHC Criteria Authority

- 3.1. SAMHSA CCBHC certification criterion 4.a.2 requires that “the CCBHC ensures all CCBHC services, if not available directly through the CCBHC, are provided through a DCO, consistent with the freedom of the person receiving services to choose providers within the CCBHC and its DCOs. This requirement does not preclude the use of referrals outside the CCBHC or DCO if a needed specialty service is unavailable through the CCBHC or DCO entities”.
- 3.2. SAMHSA CCBHC certification criterion 4.a.3 states “With regard to either CCBHC or DCO services, people receiving services will be informed of and have access to the CCBHC’s existing grievance procedures, which must satisfy the minimum requirements of Medicaid

<sup>1</sup> <https://www.samhsa.gov/sites/default/files/ccbhc-criteria-2023.pdf>

and other grievance requirements such as those that may be mandated by relevant accrediting entities or state authorities”.

- 3.3. SAMHSA CCBHC certification criterion 4.a.4 requires that “DCO-provided services for people receiving CCBHC services must meet the same quality standards as those provided by the CCBHC. The entities with which the CCBHC coordinates care and all DCOs, taken in conjunction with the CCBHC itself, satisfy the mandatory aspects of these criteria”.

#### 4. Required Evidence Based Practices

- 4.1. Based upon the findings of the community needs assessment as required in program requirement 1, the ADMH has established a minimum set of evidence-based practices required of the CCBHCs. This list is not intended to be all-inclusive. CCBHCs are free to determine whether other evidence-based treatments may be appropriate. The following **Evidence-Based Practices (EBPs)** are required to be implemented by each CCBHC:

- Motivational Interviewing
- Cognitive Behavioral Therapy
- Integrated Treatment for Co-occurring Disorders
- Medications for Addiction Treatment (MAT)
- Trauma-Focused CBT
- Individualized Placement Support, Supported Employment, and linkage to Supportive Housing
- Assertive Community Treatment (ACT)
- Peer and Family Support

- 4.2. CCBHCs are encouraged to use evidence-based strategies such as measurement-based care (MBC) to improve service outcomes. Measurement-based care (MBC) is the systematic use of patient-reported information to inform clinical care and shared decision-making among clinicians and patients and to individualize ongoing treatment plans.

#### 5. Required Additional Capacity

- 5.1. In addition to the SAMHSA-required CCBHC criteria, ADMH requires the following additional capacity to be implemented by each CCBHC:
1. Connection to the AL Health Information Exchange, One Health platform, to exchange data with community partners like hospital systems and residential providers for care coordination;
  2. Connection to the state-sanctioned crisis system, including a DCO agreement with the nearest Crisis Center and Mobile Crisis Team (if the CCBHC is not certified in these services);
  3. Inclusion of an Outreach Worker in staffing for outreach and engagement activities in the community, with a focus on engaging historically underserved individuals/ communities including Alabama’s sub-population (Pregnant and Parenting Women (PPW), people experiencing Homelessness and people with Opioid Use Disorder (OUD) with emphasis on the African American

population;

While under Section 223 Medicaid Demonstration, these services *may* be available under CMS and *may* be paid for through a PPS-1 payment model structure. **Note: costs under the PPS-1 model may vary and is specific to the individual agency's cost reports and services that the ADMH has identified as "triggering events".**

## 6. Changes to the provision of the CCBHC Core Services

- 6.1. Failure to provide any of the nine (9) core services as attested may result in corrective action and/or decertification. Please review the Alabama Department of Mental Health (ADMH) Section 223 Medicaid Demonstration for Certified Community Behavioral Health Clinic (CCBHC) Certification Process for details on this requirement.
- 6.2. Any changes to the provision of any of the nine (9) required services that are related to DCO/ Partnership arrangements, Care Coordination agreements, use of telehealth services, changes to the agency's certification status (any program area), contractual agreements and/or changes to the CCBHC's ability to meet data and reporting requirements. Although this is not an exhaustive list, all changes must first be reviewed and approved by the Alabama Department of Mental Health (ADMH).

Disclaimer: The information contained in this implementation bulletin is for general information purposes only. For more details on the specific subject area covered in this bulletin, please refer to the Certified Community Behavioral Health Clinic (CCBHC) Certification Updated March 2023.