

PROGRAM DESCRIPTION

Department: Mental Health

HB Section(s): 10.215

Program Name: ACP Certified Community Behavioral Health Organization

Program is found in the following core budget(s): ACP CCBHO

1a. What strategic priority does this program address?

Advance supports for recovery from behavioral health conditions and decrease premature deaths associated with co-morbid conditions, suicide, and other mental health conditions.

1b. What does this program do?

Certified Community Behavioral Health Organizations (CCBHOs) provide services to adults who have moderate or serious mental illnesses (SMI); youth who have serious emotional disturbances (SED); individuals with mild or moderate mental illnesses and/or substance use disorders (SUD), and complex health conditions.

CCBHOs are required to provide a comprehensive array of services, including psychiatric rehabilitation, healthcare homes, and outpatient mental health (MH) and SUD treatment, which include medication services. CCBHOs must provide timely access to evaluation and treatment; most offer "open access" at many sites. Treatment is patient centered, and includes risk assessment and crisis prevention planning. CCBHOs are required to provide primary care screening and monitoring of key health indicators and health risk. In each service area the CCBHOs must provide crisis mental health services, including a 24-hour crisis line and a mobile response team. CCBHOs provide peer support and family support services.

CCBHOs are required to have a variety of staff to enhance and improve services. CCBHOs provide professional treatment for individuals by employing professionals with expertise and training in evidence-based practices for trauma related disorders, smoking cessation, wellness, suicide prevention, Medication Assisted Treatment, and motivational interviewing. CCBHOs employ Community Behavioral Health Liaisons that assist law enforcement, jails, and courts by facilitating access to behavioral health services. CCBHOs also employ a Medical Director who is a licensed psychiatrist along with licensed mental health professionals who are trained in evidence-based, best, and promising practices, including Cognitive Behavioral therapy, Eye Movement Desensitization and Reprocessing, and Integrated Treatment for Co-occurring Disorders.

A key feature of the CCBHO initiative is a focus on quality and outcomes. The CCBHOs are required to perform successfully on a variety of different outcome measures in this pay-for-performance model. This core funding allows to further shift toward paying for service quality versus service volume.

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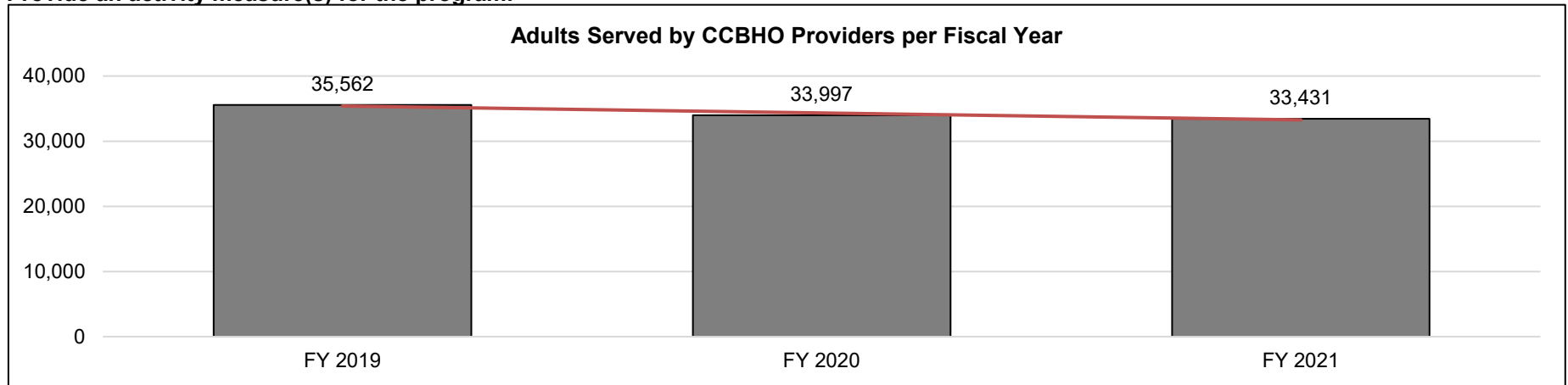
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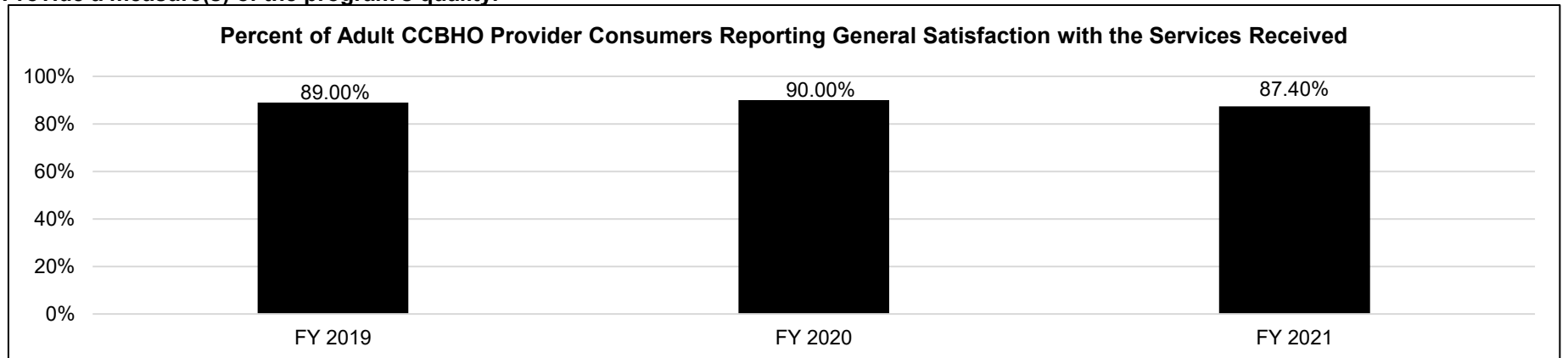
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2a. Provide an activity measure(s) for the program.



2b. Provide a measure(s) of the program's quality.



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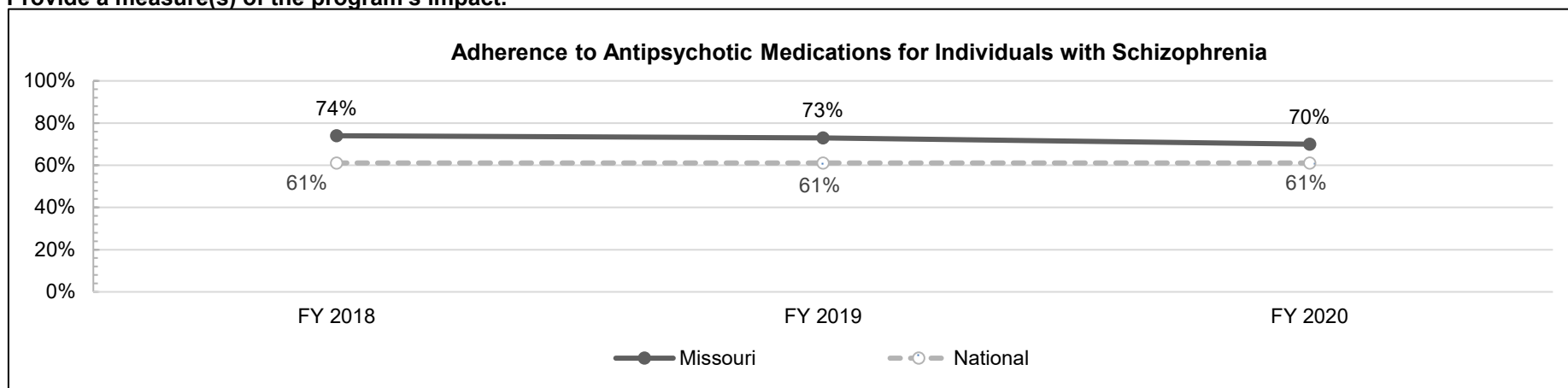
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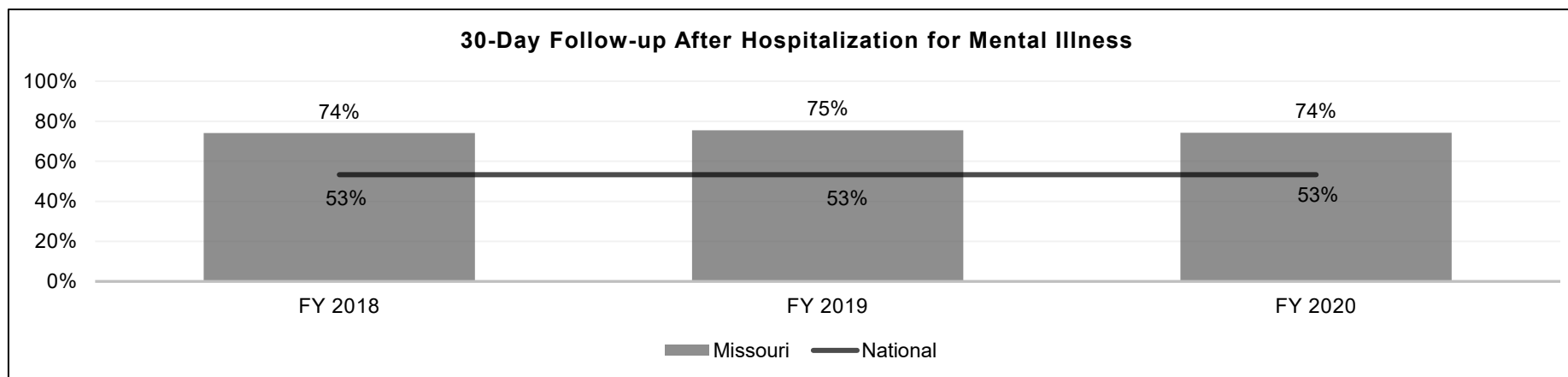
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2c. Provide a measure(s) of the program's impact.



Note: Adherence to antipsychotic medications for individuals with schizophrenia for both Medicaid and Medicare is above the national average. The national data are from the FFY 2019 Adult Core Set Report, SAA-AD. FY 2021 data not yet available.



NOTE: Follow-up after hospitalization for mental illness for CCBHO providers is well above the national average for all mental health providers. The national data are from the FFY 2019 Adult Core Set Report, FUH-AD. FY 2021 data not yet available.

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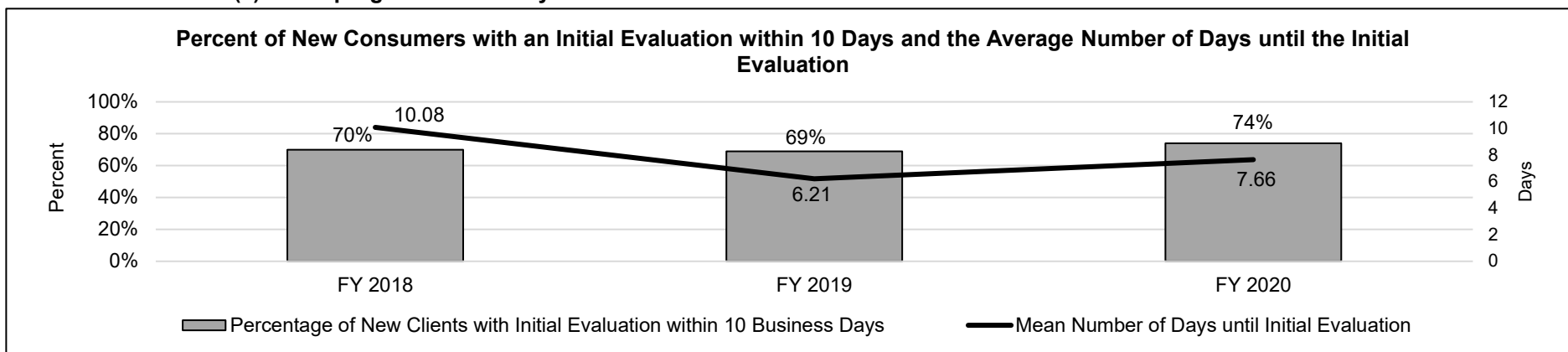
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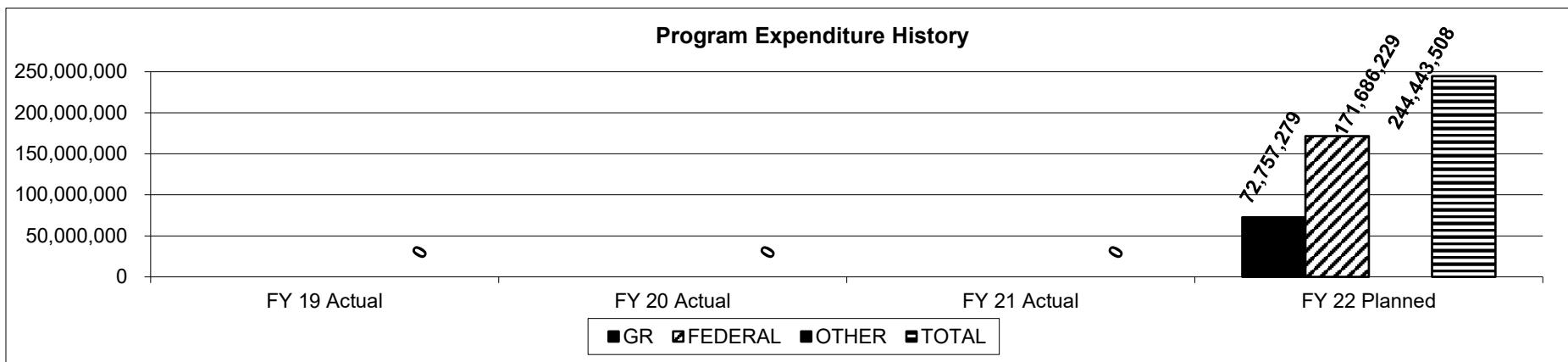
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2d. Provide a measure(s) of the program's efficiency.



Note: The percentage of new clients with an initial evaluation within 10 days has increased. The average days until evaluation increased from FY 2019 to FY 2020, but remains lower than the first CCBHO year in FY 2018. FY 2021 data not yet available.

3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



Note: This house bill was newly created during the FY 2021 legislative session.

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4. What are the sources of the "Other " funds? None.	
5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.) Sections 632.010.1, 632.010.2(1), 632.050 and 632.055 RSMo.	
6. Are there federal matching requirements? If yes, please explain. The federal Community Mental Health Services Block Grant requires that the state maintain an aggregate level of general revenue spending for mental health services that is greater than or equal to the average of the past two years. (This is called the "Maintenance of Effort," or MOE, requirement.) Community Psychiatric Rehabilitation and Targeted Case Management are MO HealthNet services and require a state match.	
7. Is this a federally mandated program? If yes, please explain. The Americans with Disability Act (Supreme Court Ruling in Olmstead vs. LC, 1999) requires states to identify institutional residents who could live in integrated community settings.	