CCBHC Monthly Forum

July 30, 2025

Presented by: Colorado's Behavioral Health Administration and the Department of Health Care Policy and Financing

Our Missions

BHA

Co-create a people-first behavioral health system that meets the needs of all people in Colorado

HCPF

Improving health care equity, access and outcomes for the people we serve while saving Coloradans money on health care and driving value for Colorado.

What We Do

HCPF:

The Department of Health Care Policy and Financing administers Health First Colorado (Colorado's Medicaid program), Child Health Plan *Plus* (CHP+) and other health care programs for Coloradans who qualify.

BHA:

The Behavioral Health Administration (BHA) is the state administration responsible for ensuring all people in Colorado have access to quality mental health and substance use disorder services, regardless of where they live, or ability to pay.

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Agenda

- CCBHC Planning Grant Updates
- Subcommittee Work Updates - July
- Next Steps

Introductions

Thank you for your time today!

Share your name and who you represent in the chat!

Planning Grant Roadmap

12-month Process	Planning for CCBHC Implementation (January 2025 – December 2025)											
	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
Steering committee(s)		Develop committee(s)		Maintain committees, subcommittees, and partnerships (e.g., state, clinics, associations) with regular meeting cadences, notes, and deliverables to ensure stakeholder and community engagement in the CCBHC demo								
Populations & service areas			Solicit input from focus populations, identify potential CCBHCs & their service areas				Identify population health needs and secure insight from those communities, work with providers to select initial sites and regions they will serve as CCBHCs					
CCBHC training & education				Identify and provide TA needs for providers (e.g., CCBHC-PPS, billing, quality measures) as possible								
Infrastructure for data quality			Identify data collection infrastructure needs and begin processes for quality measurement				Onboard and maintain technology platforms for clinic and state efforts to ensure accurate measurement of quality measures and population health needs					
Assess clinic & community needs		Launch and complete community needs assessments and clinic readiness assessments					Ensure clinic/ community needs assessments and clinic readiness assessments are complete, accurate, and aligned for criteria and certification needs					
Scope of Services & Certification	Finalize Scope of Services and activities that will be included in certification & PPS rate				Formalize CCBHC criteria & Create certification process			Work with clinics to meet SAMHSA and state certification criteria, certify clinics, and plan for future certifications				
Establish CCBHC-PPS					Select CCBHC PPS		Establish a CCBHC-PPS system and work with clinics to help calculate a clinic-specific rate		Establish payment operations & review cost reports			
CMS Approval for CCBHC												Prepare to apply for the Demonstration in 2026

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CCBHC Planning Grant Timeline

January-March 2025
- Planning Grant Starts
- Stand up Committees
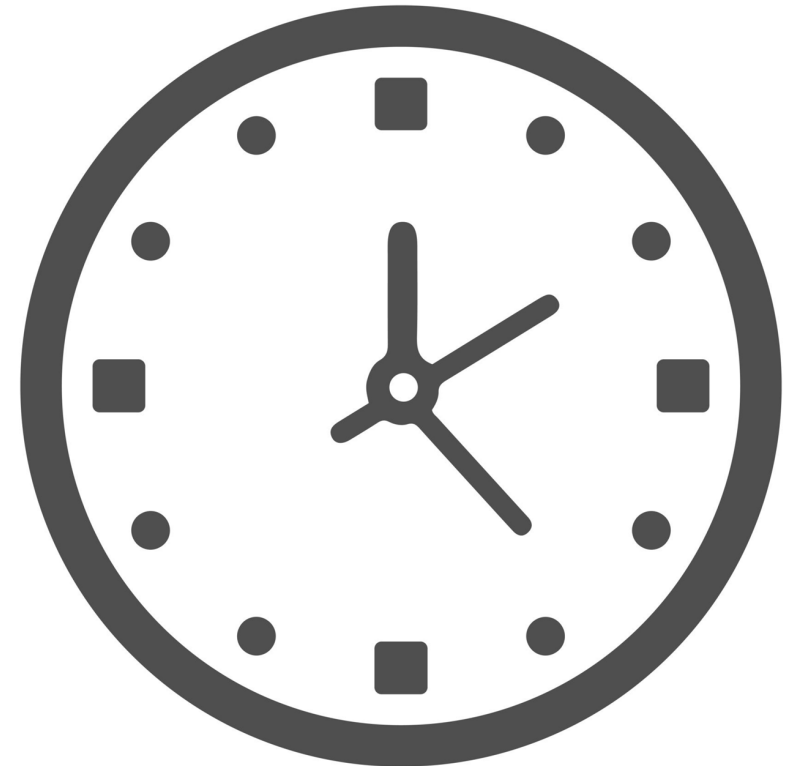- Begin Hiring Process

April-June 2025
- Onboard Grant Admin
- Begin grant reporting
- Data discovery
- PPS Type Decision

July – September 2025
- Grant reporting
- Committee work

October – December 2025
- Grant reporting
- Provider TTA
- Request No-Cost Extension
- Draft Demonstration Application

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Project Progress

- First Quarterly required SPARS submission completed
  - Submitted early on 7/24/25
  - Required measures within the work of the CCBHC Planning Grant Year
  - This is why we ask for your name and organization at each stakeholder engagement opportunity you attend!
- 2nd Programmatic Progress Report submitted 7/14/25

PPS Subcommittee

Prospective Payment System

This month the PPS team discussed:

- **Scope of Service Alignment (services covered by PPS)**
  - ➢ Current scope of services for PPS is well aligned with CCBHC scope of services with a few exceptions
  - ➢ OTP services would be included in the PPS
  - ➢ Greater OTP access needed in state
  - ➢ Need to ensure costs and payment for services occur only through PPS rate to avoid double payment

Prospective Payment System

- **Triggering Events (qualifying events to generate PPS payment)**
  - ➤ The PPS will use the current PPS triggers + MAT administration
  - ➤ Including MAT means the overall PPS will be lower, but there will be more paid encounters
- **Allowable Costs (costs that can be included in the PPS)**
  - ➤ Allowable costs consistent with current PPS + costs associated with MAT administration.
  - ➤ Providers may need to submit two cost reports in the same year to support CSNP cost reconciliation process and CCBHC rate setting.

Quality Measures Data Management Subcommittee

Quality Measure Data Management

- Follow Up: Quality Measure Norming

- NOMS and Population Characteristics Requirements

- Coming Soon/Questions

Quality Measure Norming

Question: Are CCBHC 223 Demonstration Quality Measures "normed"?

- CCBHC quality measures are <u>not</u> "normed" or "risk adjusted" to control for differences in the population measured (e.g., language preference)
- SAMHSA requirements stipulate that CCBHC quality measures will be **stratified** by, at minimum, payer, race, and ethnicity (see each measure specification for detail).
  - Colorado hopes to move beyond these requirements and drive towards more advanced quality disparity and inequity identification and tracking in future years (including potentially language preference).

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NOMS Reporting Comparison

Summary of Differences in NOMS Reporting Expansion Site vs. Demo Site

Feature	Expansion Grantee (SAMHSA)	223 Demo Site (CMS)
Overseen by	SAMHSA	CMS
Funding mechanism	Grant	Medicaid demonstration
NOMS reporting	Required to SAMHSA	Not required
System used	SPARS	CMS Medicaid reporting

223 Demonstration Site Population Characteristics

For 223 Demonstration sites, Population ("Case Load") Characteristics will be collected within the Demonstration template ([downloadable from CCBHC website here](#))
- Unlike for Expansion Grantees, Demonstration sites are not explicitly required to report on NOMs

The purpose of the Population Characteristics tab is to provide a breakdown of a clinic's patient population based on key characteristics, with columns for the number and percentage of individuals falling into each category.

- **Demographic Information:** Age ranges, sex, gender identity, ethnicity, and race.
- **Status Information:** Insurance status (e.g., Medicaid, Medicare, commercially insured, uninsured) and veteran/military status.
- **Population Totals:** A field for the "Total Clinic Population."

These characteristics align to NOMS assessment fields.

223 Demonstration Site Population Characteristics

Case Load Characteristics		
Characteristic	**Number**	**Percent**
Age		
0-11 years		
12-17 years		
18-64 years		
65+ years		
Sex		
Male		
Female		
Other		
Don't know		
Prefer not to state		
Gender Identity (optional)		
Female		
Male		
Transgender female		
Transgender male		
I use a different term		
Don't know		
Prefer not to state		
Ethnicity		
Not Hispanic or Latino		
Hispanic or Latino		
Unknown		

Grant Reporting Requirements

Moving from a CCBHC Expansion Site to a CCBHC 223 Demonstration Site:

Even if your clinic is a current expansion grantee and subsequently obtains certification as a Certified Community Behavioral Health Clinic (CCBHC) 223 Demonstration Site, it remains obligated to fulfill all grant reporting requirements as stipulated in your expansion grant award documents throughout the designated period.

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Coming Soon/Questions

- Next month we are hoping to provide a technical architecture overview for stakeholders and the Steering Committee.

- Questions?

Quality Measures Resources

[SAMHSA Quality Measures Guidance Page](#)

- [Quality Measures Specifications](#)
- [Data Reporting Templates](#)
- [Quality Measures FAQ](#)
- Webinar Series on CCBHC [website](#)

Certification Subcommittee

July 2025 Overview: Certification Workgroup Highlight

- Held two focused sub-workgroup sessions

- Reviewed certification steps and realistic timelines for implementation

- Assessed Provider Readiness Assessment for updates and clarity

- Gathered feedback on what support providers may need to meet benchmarks

Expanded Criteria & Community Needs Assessment

- Focused on Crisis Services and Opioid Treatment Program (OTP) readiness

- Gathered provider input on integrating crisis/OTP into existing systems

- Reviewed examples of how providers have completed Community Needs Assessments (CNAs)

- Explored how CNAs were used in prior SAMHSA grant applications

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Strategic Pivot: New Direction for CCBHC Implementation

- Based on feedback, we are moving toward a targeted implementation cohort

- Will use a Sub-Regulatory Certification Pathway with clear milestones

- Aim to demonstrate proof of concept prior to broader rollout

- Positions Colorado to begin the Demonstration period earlier

Moving Forward Together

- Strategic shift builds on existing workgroup efforts

- No work lost during this process regarding existing tools and feedback will be refined

- Continued transparency with steering and workgroup partners

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Engagement Opportunities

- **CCBHC Steering Committee Meeting**
- **Monthly Subcommittees**
  - **Certification/Provider**

    August 5th, 2:00pm
  - **Quality Measure and Data Collection**

    August 19th, 2:00pm
  - **PPS & Finance**

    August 20th, 2:00pm

- Register on the CCBHC Webpage
- Share feedback here: Feedback Survey

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HCPF/BHA Next Steps

- Continue Stakeholder Engagement
  - Continue Steering Committee and Subcommittees
  - Monitor **Feedback Survey** responses
- Meet federal grant requirements over the next quarter
- Continue exploration of CCBHC infrastructure options
  - Scope of Services
  - Allowable Costs and Triggering Services
  - Quality Measure Implementation
  - CCBHC Demonstration Timeline

Resources

HCPF Behavioral Health Benefits Inbox:
hcpf_bhbenefits@state.co.us

HCPF Websites:
[Behavioral Health](#) (calendar of stakeholder engagements)
[CCBHC](#)
[Newsletters](#)

Federal Updates:
[Understanding Potential Federal Funding Cuts](#)