



VACSB CCBHC Panel

Oct. 4, 2023







Today's Session

- High level intro to CCBHC, its purpose and relevance to Virginia
- Narrowing focus to Expansion CCBHCs in Virginia
- Introduction to our esteemed panelists
- Questions for each:
 - Why did you initially apply for the expansion grant?
 - How did you develop the local expertise to implement?
 - What are/were the basic components of your grantee agreement with SAMHSA?
 - What benefits have you seen for your organization and/or for the individuals you serve?
 - What lessons did you learn during the process?
- Where we go from here re: STEP-VA alignment with CCBHC







CCBHC

- Specially designated clinics providing comprehensive services to anyone who walks through the door
- CCBHCs are certified by their state and reimbursed at cost under a prospective payment model
- The clinics are held to high standards for access, continuous quality improvement, and data/reporting
- CCBHCs have been shown to increase access for individuals served
- Crisis services, including prevention, response, and post-crisis care are a growing focus in the CCBHC model
- Demonstration CCBHCs vs. Expansion CCBHCs: Similar goals, different expectations
 - Demonstration CCBHCs have more stringent reporting requirements, PPS reimbursement, and E-FMAP Certified as meeting all criteria by their state
 - Expansion CCBHCs still offer the required services, funding supplemented by SAMHSA, PPS not required Attest directly to SAMHSA they meet all criteria
- Four of Virginia's CSBs have been/are Expansion CSBs and are here to tell us more today







Your Panelists for Today

- Laura Davis, LCSW, LSATP, CCBHC Project Director, Mount Rogers CSB
- James Pritchett, LCSW, Executive Director, New River Valley CSB
- Diane Bowen, M.Ed, Sr. Vice President of Operations, Frontier Health\Planning District One Services
- John P. Lindstrom, Ph.D., LCP; CEO, RBHA







Why and How?

What drove you to apply for the expansion grant and how did you develop the local expertise required to implement such a big undertaking?







The Basics

Generally speaking, tell us about the basic components of your agreement with SAMHSA. Did you agree to serve a certain number of people? Serve a target population? Take all-comers at a specific site or program? Something different?







Benefits

Tell us how this work has benefited your organization and/or the individuals you serve.







Lessons Learned

Did you learn any lessons along the way that shape how you'll do things going forward?







Next Steps for VA

Our focus is shifting:

- From a cohort of 14 to a system of 40 CSBs
- From bifurcation as a step toward progress to unified system enhancement
- From Virginia-specific metrics to nationally accepted outcomes
- From the STEP-VA of the past to the the STEP-VA of the future







Next Steps for <u>US</u>

We're ready to harness the energy that has built related to CCBHC and pivot that toward STEP-VA

- We're ready to restart/rethink/rebrand/reinvigorate STACC or any other STEP-VA apparatus to catalyze system improvement
- We're ready to put laser focus on outcomes and the programs that support those outcomes
- We're ready to leverage the data exchange program and the broader modernization effort to serve STEP-VA goals in ways similar to how it would serve CCBHC
- We're ready to work with Q&O, DMC, etc. to align STEP-VA (measurements +) with CCBHC (measurements +)
 - Where is this an easy get?
 - Where is the limiting factor data infrastructure?
 - Where is the limiting factor cost-based reimbursement?







Confirming Priorities

Objective 7, Key Result A: Develop an implementation plan for structural changes to enhance the financing and delivery of BH/DD services, encompassing CSBs, private providers and state facilities

The endpoints might change, but we will not cease in our dogged pursuit of 'better' for our employees, our stakeholders, and the individuals we/you serve.

