## **CCBHC Community Public Meeting**

Tuesday, October 9, 2024 11:30-1:00

**Location:** Microsoft Teams or Weeks Building, Waterbury **Facilitator**: Lori Vadakin, DMH, Director Mental Health and Health Care Integration

**Purpose**: The monthly meeting aims to establish a clear message on the progress of Certified Community-Based Integrated Health Centers (CCBHCs) in Vermont. The Department of Mental Health's mission is to enhance the health of Vermonters, and pursuing CCBHC status aligns with this goal by integrating mental health, substance use disorder treatment, health equity, and physical health into a comprehensive care approach. This model supports the State's broader efforts to integrate services across the health care sector, as outlined by the Mental Health Integration Council.

## For information on CCBHC and notes please go to:

<u>Certified Community-Based Integrated Health Centers (CCBHCs) | Department of Mental Health (vermont.gov)</u>

## Attendees:

Amy Guidice, Daisy Berbeco, Laura Kass, Jennifer Fucile, Cynthia Taylor-Patch, Simone Rueschemeyer, Michael Hartman, Cara Capparelli (NFI VT), Lori Vadakin, Steve DeVoe, Nicole DiStasio (they/she), Shannon Thompson (she/her), Laura Flint (she/her), Kheya Ganguly (She/Her), Kameron McConnell, Joanne Crawford, Julie Parker, Bill Claessens, Amy Fela (she/her), Jennifer Epstein (NFI VT), Kate Lamphere, John Wurzbacher, Lisa Lambert, Trevor Hanbridge, Robyn Daley, Denis Houle, Chuck Myers (NAFI VT), Jessica Kell, Beth Sightler, Anne Bilodeau, Shawn Richards, Kim McClellan, Cheryl Huntley, Mary Williamson (NFI VT), Loree Zeif, Alya Reeve, Alison Neto, Trisha Ketchum, Clare Neal, Erin O'Keefe, Rachel L. Lee, Tori Matteson, Christie Everett, Tim Ross, Christine Henshaw, Emily Roemer, Madeline Powers, Cheryl Cavanagh, Lauren Welch (she/her), Tracy Thomasson

Agenda Item	Discussion Notes
Welcome ~ Lori Vadakin	<ul> <li>Today is the third of a series of monthly public meetings DMH will be holding to ensure we are keeping community members up to date with our CCBHC efforts in Vermont. All agendas and minutes for these public meetings can be found on the DMH Web site at <a href="Certified Community-Based Integrated Health Centers (CCBHCs)">Certified Community-Based Integrated Health Centers (CCBHCs)</a> Department of Mental Health (vermont.gov)</li> <li>Today you will be hearing about the different programs required by CCBHCs, what data will be tracked, and how we are planning for implementation in Vermont.</li> </ul>
Opening Remarks ~ Shannon Thompson	<ul> <li>Our goal is for CCBHCs to deliver holistic care while ensuring the model maintains a balance between flexibility and fee-for-service.</li> <li>This model addresses financing shortfalls by paying a Medicaid rate inclusive of providers anticipated costs at an enhanced federal participation (FMAP) rate. The enhanced FMAP rate matches the CHIP rate which is ~70% federal vs ~ 57% federal</li> </ul>

- (Traditional Medicaid) and allows the State a runway to develop these programs in a financially sustainable way.
- CCBHC services will be reimbursed through the daily Prospective Payment System (PPS-1) model. Under this system, each clinic's unique reimbursement rate is determined by dividing its allowable costs by the number of qualifying daily encounters throughout the year. The PPS-1 payment model supports clinics in expanding services, increasing the number of clients they serve, and enhancing their flexibility to deliver client-centered care.
- Discussed status of the demonstration project and reiterated department priority for implementing CMC and Rutland as the first two certified sites. It is important for us to engage with the entire system, so we are beginning to do that, but we will first focus on the two agencies that are preparing to become certified on July 1, 2025.
- We have contracted with Guidehouse to assist us in developing the PPS rates for these two organizations, and this work will begin on 10/15/24.
- DMH has information on our website that includes a FAQ and other resources to consider when questions arise. See the DMH website for a list of resources: <u>Certified Community-Based</u> <u>Integrated Health Centers (CCBHCs) | Department of Mental</u> <u>Health (vermont.gov)</u>
  - Before asking questions from DMH staff, please review the website to see if your question has already been addressed either in the FAQ or in other documentation.
  - If the question cannot be answered by the website or internally by staff who may be involved in subgroups, please send them to Lori Vadakin.
  - VCP should filter the questions before sending them to DMH.

## Billing/Codin g Overview ~Nicole DiStasio

- Nicole presented on the status of the Finance and Billing subcommittee, including examples of what is not included.
  - CCBHC Billing & Finance 10 8 2024
- Reiterated that the CCBHC model is a demonstration, this means we should expect the model to continuously evolve as we learn. We expect the model to adapt.
- Q: What does it mean when we say that services are "not included in billing" mean? A: "Not included" means that these services are not part of the CCBHC model and cannot be billed under the CCBHC provider number. However, they may still be offered by the provider but would be funded through other sources, such as fee-for-service arrangements (using a different provider number), grants/contracts, or as bundled payments like those used in the Blueprint.
- Discussed release of the draft CCBHC Billing Manual and Code List
  - DRAFT CCBHC Billing Manual
  - CCBHC PPS & Encounter Claims
- Feedback requested by 10/25/2024 (please refer to the email Nicole sent to agencies on the afternoon of 10/8 for directions on

	<u></u>
	<ul> <li>how to provide feedback).</li> <li>Other dates to consider: Publish CCBHC Billing Manual targeted for 4/1/2025 and Annual Code Review (Aug-Dec annually)</li> </ul>
Certification, Recertificatio n & Clinical Services ~Patty Breneman	<ul> <li>Reported out on the clinical/certification subcommittee that met for the first time on 9/27/24.</li> <li>Subgroup focused on discussing the draft Community Needs Assessment (Patty pasted the link in the chat)</li> <li>Subgroup offered a few suggestions that will be added to the draft</li> <li>Public meeting attendees suggested Building Bright Futures and a stronger focus on the children, youth and family population.</li> </ul>
Quality Measures & Data Collection and Reporting ~ Steve DeVoe	<ul> <li>Reported that the subcommittee is co-lead by Patty Breneman and the first planning meeting is scheduled for 10/9/2024</li> <li>Discussed the SAMHSA Data Reporting templates:         <a href="https://www.samhsa.gov/certified-community-behavioral-health-clinics/guidance-and-webinars/data-reporting-templates-disclaimers">https://www.samhsa.gov/certified-community-behavioral-health-clinics/guidance-and-webinars/data-reporting-templates-disclaimers</a> (must accept terms to download)</li> </ul>
Community Needs Assessment ~ Laura Flint	<ul> <li>See slides in PowerPoint for full information</li> <li>Slides Community Needs Assessment Update for Public Mtg 10.8.24</li> <li>Presented availability of draft CNA Guide for public input (due 11/15)</li> <li>Included schedule to review draft CNA Guide with Adult Program and Children's Program Standing Committees in early November.</li> <li>Publish final on website by 1/30/2025</li> </ul>
Communicati ons (internal and external) ~ Laura Flint and Lori Vadakin	<ul> <li>Request feedback on communications efforts – what are people noticing, needing? No feedback given.</li> <li>Discussed internal process to vet questions. Reiterated request for people to look at the DMH website for the FAQ/Resources prior to asking questions as many have been answered.</li> <li>Lori explained goal to improve internal/external communication to keep community informed of CCBHC integration.</li> <li>Monthly 1-page, public meeting (agenda/minutes), FAQ, Govenor report, GPO meeting, Demo meeting, community partner meeting.</li> </ul>
Public Comment, Q&A	Julie Parker mentioned a need to have a targeted conversation around messaging CCBHC to Primary Care, discussing primary care screening/monitoring requirements, and firming up guidance around the Hub and Spoke model. Meeting has been scheduled. Blueprint is in the middle of a 2-year pilot with primary care.