## Name: Devanne Hernandez, MA

**Professional Title, Organization:** Director of Behavioral Health Programs, Eisner Health **CHIP Title:** Pursuing Certification as a Certified Community Behavioral Health Center (CCBHC)

## **Project Description:**

Due to the aftermath of COVID-19 and the global pandemic, we are experiencing an unprecedented demand for behavioral health (BH) services. As a Federally Qualified Health Center (FQHC), wholeperson care has only been available to patients within the mild to moderate level of impairment, resulting in referrals to county and other specialty mental health clinics for patients that are in crisis, require psychiatry and/or a higher level of care. Unfortunately, current wait times for patients seeking psychiatry and a higher level of care are reportedly between 6-8 months. These entities have also experienced a demand for service and staff shortage issues. To better support patients accessing BH services, I researched a solution to help FHQCs, such as ourselves, expand BH services of various levels of care internally. Certification as a Certified Community Behavioral Health Center (CCBHC) would place our organization in a position to qualify for federal funding under the Substance Abuse and Mental Health Administration (SAMHSA). As an FQHC, securing certification as a CCBHC would reduce the need to refer out, support the continuum care for patients, and provide the funding needed to staff our BH Department with psychiatry, care coordination, peer support, and 24/7 crisis response team.

## **Key Findings:**

- Toto receive CCBHC certification, the organization must commit to fulfilling nine critericriteriavice: (i) Crisis mental health services, including 24-hour mobile crisis teams, emergency crisis intervention services, and crisis stabilization. (ii) Screening, assessment, and diagnosis, including risk assessment. (iii) Patient-centered treatment planning or similar processes, including risk assessment and crisis planning. (iv) Outpatient mental health and substance use services. (v) Outpatient clinic primary care screening and monitoring key health indicators and health risks (vi) Targeted case management. (vii) Psychiatric rehabilitation services. (viii) Peer support and counselor services, and family support. (ix) Intensive, community-based mental health care for members of the armed forces and veterans, particularly those members and veterans located in rural areas, provided the care is consistent with minimum clinical mental health guidelines promulgated by the Veterans Health Administration, including clinical guidelines contained in the Uniform Mental Health Services Handbook of such Administration
  - We currently provide 4 of the i9-criterion required.
- The implementation grant offered a total of 4 million dollars to assist an organization in its program design. The award will be dispersed at 1 million per year, providing four years for full implementation. Given the current job market, we anticipate challenges in finding staff and being competitive in salary ranges.
  - We anticipate being able to hire 1 psychiatrist, 1 program manager, 3.5 LCSWs, 2 care coordinators, 1.5 peer advocates.
- With our CMO's guidance, we modified the number of clients we committed to service under this certification. This decision was based on the fact that our organization has not provided this level of BH service to our patients. She advised that our population be specific to allow us as an organization room for changes and modifications needed during the 4-year implementation.

## **Next Steps:**

- Await news to confirm if we were awarded the CCBHC implementation grant. If we were not selected, the funders would provide us notes advising how to improve our application for next year.
- If awarded, the first four months will be dedicated to recruiting staff and mapping out workflows.
- Create productivity expectations that are clinically appropriate, as well as supportive of the sustainability of this program.