

Progress and Impact Mid-Biennium Report: Certified Community Behavioral Health Centers (2025-2027)

Certified Community Behavioral Health Centers (CCBHCs) provide integrated outpatient mental health and substance use disorder services across the lifespan. Nearly \$178 million General Fund and Federal Funds are allocated for the 2025-27 biennium in the Legislatively Approved Budget.

Program background and summary

CCBHCs provide integrated outpatient mental health and substance use disorder services across the lifespan. CCBHCs provide nine core services regardless of an individual’s ability to pay, including: assessment, screening, diagnosis; patient-centered treatment planning; outpatient mental health and substance use services; crisis services, including 24-hour mobile crisis services; peer support services, psychiatric rehabilitation services, including supportive housing; targeted case management for individuals with mild, moderate, or severe mental illness and/or

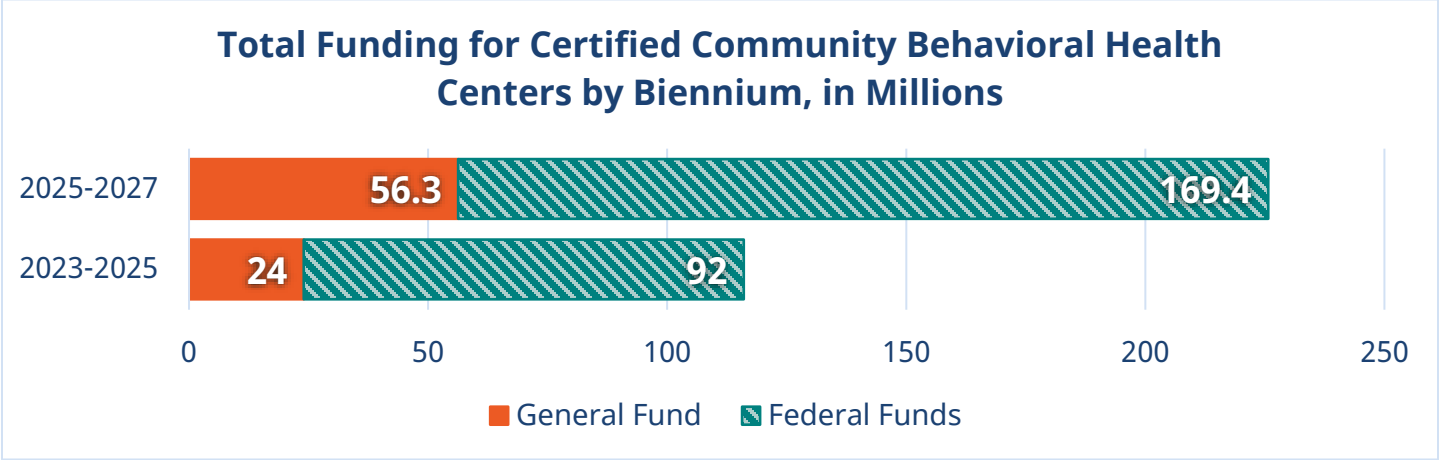
substance use disorders; outpatient physical health screening and monitoring; and intensive community -based mental health services for veterans. CCBHCs have care coordination partnerships with physical health providers, schools, child welfare, local intellectual and developmental disabilities departments, and other community partners. The primary goal of CCBHCs is to increase access to services, improve health outcomes and reduce utilization of higher cost services such as hospital emergency room visits, inpatient hospitalizations and residential stays.

Trends and outcomes summary

Between 2017 - 2021, Oregon CCBHCs increased access to services by 4.3%. Increases in access were most notable in rural areas with a 23.4% increase and remote areas with an 18.3% increase. When comparing the CCBHC statewide population to Coordinated Care Organization (CCO) statewide member population, CCBHCs generally demonstrate better outcomes on CMS core set measures CCBHCs demonstrated higher rates of initiation and engagement of substance use disorder treatment and follow-up from emergency department visits and hospital stays within 7 and 30 days.

The CCBHC team has worked collaboratively within OHA and across the Behavioral Health Division, Medicaid Division and Health Policy and Analytics Division to increase service delivery and reduce the number of touchpoints needed for providers. This means that providers can focus on services for CCBHC clients and decrease administrative time. Additionally, OHA is working to increase the number of CCBHC provider organizations and CCBHC service sites to increase access to these services.

Program funding



Objectives, outputs and outcomes

Objective 1:

Increase the number of people served and the number of outpatient and behavioral health crisis services provided.

Output 1:

Annual report on the number of people served and number of services provided.

Outcome 1:

Increase access to behavioral health services 3.5%.

Objective 2:

Set and regularly recalculate CCBHC Prospective Payment System (PPS) rates for each provider.

Output 2:

Cost Report reviews submitted every other year to adjust rates.

Outcome:

Rates consistent with actual cost of services to create greater financial sustainability for providers so that services for individuals continue due to consistent payments of providers.

Objective:

Decrease utilization of emergency department visits, hospitalization stays and other higher cost services.

Output:

Track utilization of higher cost services such as ED visits, in patient stays and residential services.

Outcome:

Report after close of biennium on utilization of higher cost services.

Objective 3:

Increase quality improvement and transparency for CCBHC services throughout the state.

Output:

Create clinic-specific dashboards visualizing performance and state-led metrics annually.

Identify benchmark setting procedures for metrics to support quality improvement.

Outcome:

Services provided in CCBHCs meet federal and state requirements and better services are provided for clients that utilize CCBHCs.

Data reporting through the continuous cross divisional work with HPA, BHD and Medicaid.

Considerations

There are currently 12 CCBHC provider organizations across Oregon. Additional increases in access and improved outcomes is based on increasing the number of CCBHC providers. OHA opened the application process for CCBHC certification January 2026. The

certification process can be lengthy based on the level of readiness of applying providers and OHA resources. Providers may not be onboarded and operating as a CCBHC until later within the biennium, delaying when increases in services will take place.

Other formats and languages

You can get this document in other languages, large print, braille or a format you prefer free of charge. Contact the CCBHC team at ccbhc@oha.oregon.gov or 503-931-2037. We accept all relay calls.

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