

Definition of Satellite and other Facilities

The Protecting Access to Medicare Act (PAMA), Section 223 for a demonstration program to improve behavioral health services, stipulated that no payment shall be made under the demonstration program to satellite facilities of Certified Community Behavioral Health Clinics (CCBHCs)¹ if such facilities were established after April 1, 2014.

Satellite Facility Definition

For the purposes of this demonstration, a satellite facility of a CCBHC is a facility that was established by the behavioral health agency that is certified by the state as a CCBHC, operated under the governance and financial control of that CCBHC and provides at a minimum the four services required in the Criteria to be provided directly by a CCBHC. Per the statute, no payment shall be made to a satellite facility of a CCBHC established after April 1, 2014 under this demonstration. This definition does not limit the provision of services in non-clinic settings such as shelters and schools consistent with Criteria 2.a.3.

Renovated, Expanded, and/or Replaced Facilities

A behavioral health facility established before April 1, 2014 may be certified by the state as a CCBHC and may receive payment under the demonstration program and as such is permitted to renovate, expand, and/or replace facilities after April 1, 2014, based on the needs determined in the state prepared needs assessment without jeopardizing their certification or the PPS payment.

Designated Collaborating Organization

A Designated Collaborating Organization (DCO)² is distinct from a satellite facility and is an entity that is not under the direct supervision of the CCBHC but is engaged in a formal relationship with a CCBHC and delivers services under the same requirements as the CCBHC. Payment for DCO services is included within the scope of the CCBHC PPS, and the DCO encounters will be treated as CCBHC encounters for purposes of the PPS. DCOs are not considered to be Satellite facilities. For a full definition of a DCO, please refer to the Criteria.

Other Service Locations

Criteria 2.a.5 permit CCBHCs to utilize mobile, in-home, telehealth/telemedicine, and on-line treatment services (to the extent possible within the state Medicaid program and as allowed by state law) to ensure consumers have access to all required services.

¹ A CCBHC is an organization certified by states in accordance with the Criteria and with the requirements of PAMA. A CCBHC may offer services in different locations. For multi-site organizations, however, only clinics eligible pursuant to these criteria and PAMA may be certified as CCBHCs.

² A DCO is an entity that is not under the direct supervision of the CCBHC but is engaged in a formal relationship with the CCBHC and delivers services under the same requirements as the CCBHC. Payment for DCO services is included within the scope of the CCBHC PPS, and DCO encounters will be treated as CCBHC encounters for purposes of the PPS. The CCBHC maintains clinical responsibility for the services provided for CCBHC consumers by the DCO. To the extent that services are required that cannot be provided by either the CCBHC directly or by a DCO, referrals may be made to other providers or entities. The CCBHC retains responsibility for care coordination including services to which it refers consumers. Payment for those referred services is not through the PPS but is made through traditional mechanisms within Medicaid.