COMPREHENSIVE BEHAVIORAL HEALTH PLAN UPDATE AND PROGRESS REPORT IMPLEMENTATION GUIDE

Overview

The Oregon Health Authority (OHA) has implemented changes to the Comprehensive Behavioral Health Plan (CBHP) progress reporting format and evaluation process. OHA received feedback from CCOs about the previous reporting format which caused confusion and did not provide an intuitive reporting process. OHA incorporated CCO feedback and suggestions provided during further collaborative discussions. The new reporting format is effective for your 2023 CBHP progress report submission and should cover the reporting period beginning July, 2022 and ending June, 2023. The submission due date is December 31, 2023, unless otherwise indicated by OHA through a formal administrative notice.

The goals of the reporting changes are to:

- Improve clarity and make the reporting process more intuitive
- Transition to a dashboard reporting format to reduce administrative burden, create a more easily consumable report, and enable CCOs to provide highlights about the specific CBHP goals they have identified
- Integrate some reporting requirements from the Annual Behavioral Health Report (ABHR) into the CBHP and eliminate the ABHR as a separate deliverable, as part of OHA's ongoing efforts to reduce duplicative reporting requirements
- Provide an opportunity to highlight work toward the overarching goal of reducing behavioral health inequities for minoritized communities

Reporting format

The new dashboard reporting format provides individual sections for CCOs to report on their identified priority areas. CCOs should provide highlights about their work toward the goals of each priority area which has taken place since their last progress report submission. CCOs may add additional slides if they have more than three identified priority areas or if they need more room to provide the requested information. This includes the dashboard slides, commentary sections, and equity statement. CCOs may include any additional data, reports, or documents as an email attachment when they submit their report. CCOs will report on the following for each of their priority areas:

• Key Actions, Milestones and Data

Describe relevant progress toward the goals of your identified priority areas,
 including any milestones achieved, any new data obtained since the last progress

report, and new initiatives untaken concerning the goals of the priority area. CCOs should provide information about how the goals of each priority will/could be of value to the communities they serve.

Engagement Activities

 Describe how the CCO has continued to engage with the communities they serve. Include any regular meetings with the public, service providers, etc. as well as any feedback received regarding the identified priority area. Also, identify any information obtained regarding access and quality of service (positive or negative). This could be from community/consumer feedback, provider feedback, or other mechanisms.

Upcoming Dates & Decisions

Identify the timeline of any upcoming decisions, initiatives, milestones, etc.
 associated with your priority area for the coming year. This could include
 planned meetings to discuss progress toward identified goals, planned
 engagement with the community, services providers, or other subject matter
 experts, as well as training or education the CCO plans to participate in or
 provide.

Goals for Next Year

Describe how your experience over the past year will inform your CBHP work in the coming year. Include any changes to goals, processes, means of gathering data, and measuring outcomes. If changes to a priority area have been made, describe the reason for the change, the goals of the new priority, and how progress toward these goals will be measured. You can elaborate on this information in the commentary section of the report.

Commentary Section

A commentary section is provided for each priority area. Use this section to provide a narrative explaining what you have observed and experienced through your CBHP work since your last progress report submission. You are encouraged to provide success stories, challenges and feedback received from the communities you serve. Indicate how your work over the past year has impacted or could impact social determinants of health for those seeking out or receiving services. Elaborate on any information provided earlier in the report. You should clearly explain what the goals are for each priority area and how this will be measured. To the extent possible, the CCO should use of specific, measurable, attainable, relevant, and time-based (SMART) objectives. Describe how you will know if progress is being made toward your goals and how you will know when the goal is achieved.

It is especially important to use this section to elaborate on information provided in the Goals for Next Year section of the report if any changes have been made to the identified priority areas since the last CBHP progress report submission. If changes to a priority area, it's goals, or the approach to the work have taken place, explain the need for the change, specify what changes were made, and what the new goal/approach will be going forward. Be sure to explain how you will measure progress toward your goals.

Equity Statement

OHA aims to eliminate health inequities in Oregon by 2030. We are committed to helping CCOs create a more equitable behavioral health system and value your collaboration to benefit the people of Oregon.

An overarching goal of the CBHP is to reduce behavioral health inequities for minoritized communities. This includes improving access to culturally and linguistically appropriate behavioral health services designed specifically for certain communities. These communities include but are not limited to:

- Racially and ethnically diverse groups
- People who use languages other than English
- The LGBTQIA2S+ community
- People with disabilities
- Individuals involved with the criminal justice system
- Individuals with co-occurring disorders

Because of the unique nature of the communities served by each CCO, we realize progress toward reducing health inequities will look differently for each CCO. Use this section to describe what assets, strengths, and opportunities, both *in the community served by the CCO* and *within the CCO organization*, that are or could contribute to reducing health inequities as it relates to your CBHP work. The intent for this is for the CCO to explain the potential for advancing equity in the CCO service area, in the context of their CBHP priority areas and overall CBHP work. It's also intended to highlight any areas of their current CBHP work which aims to reduce behavioral health inequities. This could include engaging with community organizations or subject matter experts which serve specific minoritized communities, engaging with individuals belonging to minoritized communities, research the CCO has done regarding service equity, and involvement in current or future equity initiatives. Include any information about how specific minoritized communities have been or will be impacted by work toward the goals of your identified CBHP priority areas. Explain how you are or will measure progress toward reducing health inequities. Identify any barriers that exist in your community or organization to addressing these inequities.

Integration of the Annual Behavioral Health Report

In response to CCO feedback regarding administrative burden and duplicative reports, OHA has folded key metrics from the ABHR into the CBHP. As a result, the ABHR has been eliminated as a standalone deliverable. Going forward, CCOs will only be required to submit the following Wraparound data:

- Numbers meeting criteria for Wraparound
- Number enrolled in wraparound from among those determined to meet criteria
- Race: numbers by race
- Ethnicity: numbers by ethnicity
- Language: numbers by language

Data for the following measures specific to individuals experiencing Severe and Persistent Mental Illness (SPMI) is already collected by OHA and will be included in a dashboard separate from the CBHP.

Specific Measures:

- Number and percentage of members receiving ACT
- Number and percentage of members receiving Supported Employment
- Number and percentage of members receiving Peer Delivered Services
- Number and percentage of members receiving Secure Residential Treatment Services
- Number and percentage of members receiving Residential Treatment Services (non-Secure)
- Number and percentage of members admitted to ACPHs for MH diagnosis
- Number and percentage of members discharged from ACPHs with documentation of linkages to appropriate behavioral and primary health care prior to discharge
- Number and percentage of members discharged with documentation of Warm Handoffs from ACPHs to a community provider.
- Number and percentage of members who received a follow-up visit within seven (7) days
- Number and percentage of members who are homeless, that are connected to a housing provider with an appropriate documented housing assessment discharged from acute care
- Number and percentage of members who are readmitted within thirty (30) and one hundred and eighty (180) days
- Number and percentage of members admitted to the ED for a MH diagnosis
- ED boarding over 23 hours

OHA Commitment

OHA is committed to maintaining a collaborative relationship with CCOs. We share the same ultimate goal: to improve behavioral health care for the communities we serve. OHA will continue to be available to meet with CCOs to provide technical assistance and support as they go about completing their CBHP progress reports. We recognize that CCOs know their communities, their needs and experiences. CBHP progress reports are an important means for OHA to more fully understand the communities CCOs serve.

We will review the submitted reports based on the evaluation criteria provided to CCOs with this guide. Each CCO can expect a response from OHA within 45 days of the due date for this deliverable. This response will be via email and will include the CCO report and a completed evaluation form. At this time, we will also ask each CCO to schedule a meeting with OHA in order to discuss their report, provide feedback, and ask any clarifying questions about the information provided, if needed. If we are unable to determine whether a CCO has met an evaluation criterion, we will also discuss these items and collaborate with the CCO to ensure their report meets all required evaluation criteria.