



Guidance for Comprehensive Behavioral Health Plan & Progress Report

Background:

Coordinated Care Organizations (CCOs) are required to develop a Comprehensive Behavioral Health Plan (CBHP) pursuant to Exhibit-M of the CCO Contract. The CBHP is similar in structure and sequence to the Community Health Assessment (CHA) and the Community Health Improvement Plan (CHP). As with the CHA/CHP process, it is expected that each CCO’s development of its CBHP should occur in collaboration with community partners and meaningful consumer and family voice.

The CBHP submission sequence: Year One (1) involves a system assessment and the creation of an improvement plan. The following four (4) years involve the completion of a progress report for the improvement plans.

	Due Date	Covered Period
Year 1 – System assessment & improvement plan	7/19/2021	n/a
Year 2 – Progress Report	7/31/2022	July 2021 - June 2022
Year 3 – Progress Report	7/31/2023	July 2022 - June 2023
Year 4 – Progress Report	7/31/2024	July 2023 - June 2024
Year 5 – Progress Report	TBD	TBD

Based on recommendations from CCOs, OHA developed this guidance document, which includes the progress report and the CBHP criteria. In addition to the guidance document, OHA developed the evaluation criteria for the progress report submission.

Format Specifications:

- The CBHP must be written in 12-point Arial font with single spacing and accessibility standards.
- In the Evaluation document fill out the CCO narrative portion to indicate the document’s name and page numbers where evidence of progress can be found. Documents that are not mentioned in the narrative but are submitted will not be reviewed.
- All file names must clearly reflect the content (e.g., CCOxyz_CBHP_ProgressReport).
- The CBHP and relevant supporting documentation must be submitted to CCO.MCodeliverableReports@dhsosha.state.or.us by the due date.
- The CBHP should not exceed:

- *Year One (1) CBHP Assessment and Improvement Projects: 50 pages, including supporting documentation.*
- *Years Two (2) through Year Four (4): a total of three (3) pages per Improvement Project being reported on. CCOs may include supporting documents, such as data and charts, outside of the three (3) page limit. This could include referencing the community health assessment (CHA) or the community health improvement plan (CHP).*

For the progress report evaluation, the scoring section is scored as “Yes/No”, with “Yes” scores indicating the CCOs demonstrated continued progress improvement from the prior year’s evaluation. A “No” score signifies there wasn’t demonstration of continued progress from the prior year’s evaluation. If there is a “No” score marked, the CCO will be required to update the progress report and resubmit before formal approval.

For CBHP questions, please contact: Nicholas Lervick at Nicholas.Lervick@dhsosha.state.or.us

Annual CBHP Progress Report Guidance

The following guidance outlines the requirements for the CCOs CBHP Progress Reports, which occur in Year Two (2) through Year Four (4) of the CBHP Assessment and Plan five-year cycle. Year-One (1) CBHP contains the assessment, identification of priority areas that have been prioritized for improvement projects, and an overview of the identified improvement projects. The Annual CBHP Progress Report should document progress made in implementing each CBHP Improvement Plan.

Progress reports shall include an update on activities and mechanisms for ongoing monitoring performed and progress made to date on each Improvement Plan.

For each Improvement Plan include the following:

- Description of involved partners, including the CCO, and their associated role and level of involvement in the project
- Project management activities utilized to implement the improvement project
- Any OHA technical assistance utilized and how the assistance impacted the project
- Progress made to date, including any adjusted timelines
- Challenges and barriers during the process and strategies used to address them, and the level of impact
- Describe areas that were successful or indicated significant improvements
- Any updates to the Improvement Plan for the coming year, including updated measures and/or updated timelines
- If the CCO is replacing an improvement project:
 - Outline the replacement project, including involved partners, strategies, and timelines, following the elements included in #3 of the CBHP guidance
 - Provide information regarding the decision to discontinue the previous improvement project.

Comprehensive Behavioral Health Plan Guidance

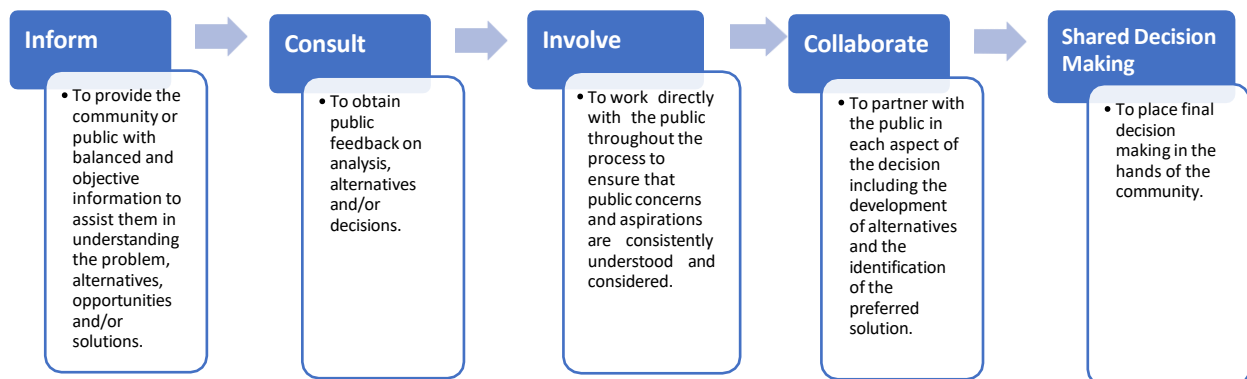
1: Environmental Scan

Conduct an Environmental Scan of the community. In addition to identifying new community needs, existing work and data, such as the Community Health Assessment, should be utilized to inform the Environmental Scan.

- 1.1 Describe the behavioral health needs and social determinants of health of the community. Please provide relevant data used to identify the community's behavioral health needs focusing on populations represented within the CCO membership, including children, families, adults, and underserved and marginalized populations.
- 1.2 Describe the CCO's level of engagement with community partners during the Environmental Scan. Community partners may include but are not limited to the following:

- Local Mental Health Authority
- Community Mental Health Providers
- Public Health
- Education/schools
- Law Enforcement
- Hospitals
- Corrections
- First Responders
- Child Welfare
- Department of Human Services (DHS)
- Housing Authority
- Housing Providers
- Courts
- Others

Community engagement is a process and may look different each year in the community/group/organization. The plan to meaningfully engage and thoughtfully connect with stakeholders to strengthen relationships in the community should be strategic and tailored to stakeholders and individual engagement efforts. When deciding how and when the CCO will engage the community, consideration needs to be given in determining the level of use and impact decisions may have on the community and stakeholders.



1.3 Describe the behavioral health system in the CCO's Service Area. At a minimum, include the following in the description:

- Service map/chart
- Accessibility
- Social determinants of health services and supports
- Continuum of care including outpatient, inpatient, crisis, SUD, co-occurring, and integrated care.
- Coordination of care transition between levels of care and referrals to community-based services and providers
- Provider needs assessment, including but not limited to the workforce, resources, and reimbursement
 - o Include licensed, non-licensed, community-based, and other providers serving individuals with behavioral health needs

2: Identify gaps and critical areas of concern in collaboration with community partners and choose at least three priority areas of intervention

Based on the Environmental Scan, identify any gaps and/or critical areas of concern impacting the behavioral health system and/or members in the CCO's service area.

2.1 Identify gaps and critical areas of concern in the CCO service area

- Describe the causes for each gap and/or critical area of concern.
- Explain how each gap and/or critical area of concern hinders or prevents the provision of needed services.
- Identify gaps and/or critical areas of concern that are shared at the state and local level and cannot be fully addressed by the CCO within its service area (e.g., systemic issues requiring state level involvement).

2.2 Considering the gaps and/or critical areas of concern, identify the most vital community priority areas (three or more). Priority areas can be: (1) areas where there is already an existing effort/plan, (2) a plan for addressing part of an existing priority area, and/or (3) a completely new priority area.

- Describe each community priority area
- Identify which gaps and/or critical areas are a part of this priority area
- Explain why each priority area is critical for the community
- Describe how priority areas were prioritized in collaboration with community partners and consumer and family voice.

3: Plan for improvement in at least three (3) Priority Areas for intervention

Develop an intervention/improvement plan for the selected Priority Areas.

At a minimum, include the following in the improvement plan for each selected Priority Area:

- Overview of the Improvement Plan
- Role and responsibility of CCO and each collaborating partner
- Measures to track improvement
- Timeline for plan, including periodic progress goals
- Plan for ongoing collaboration with collaborating partners
- Description of oversight and performance monitoring of the developed plan that ensures quality of services provided by the CCO
- Anticipated technical assistance needed from OHA and the timeline for TA requests (if known)
- Ongoing role of consumers and families in improvement project.

It is acknowledged that fully ameliorating a gap and/or critical area of concern may not be possible due to the size of the issue and/or ability to impact the issue. When addressing priority areas that can only be partially affected or resolved by the CCO and its partners, identify what aspects of the priority area will not be addressed and what is necessary to address them in the future. If approaching a priority area in a non-traditional manner, explain why the CCO chose a non-traditional approach so the intention and logic are clear.