** Intensive In-Home Behavioral Health Treatment – Progress Report #1**

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| ***CCO Name:*** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | ***CCO Contact for this Report:*** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| ***Instructions:*** Please complete the gray cells with an update on the progress to date implementing the plans and activities for Intensive In-Home Behavioral Health Treatment (IIBHT) described in Exhibit M, Section 20 of the 2021 CCO contract. The progress report should clearly identify your CCO’s accomplishments and challenges in implementing the IIBHT requirements outlined in the contract. Be clear and concise in your responses. Do not exceed 5 total pages for your progress report.Please note that Progress Report #2 will be due April 15, 2021. An updated Progress Report template will be provided no later than March 15, 2021. Responses to this Progress Report #1 will be used to inform the development of the template for Progress Report #2.Submit your CCO’s completed Progress Report #1 to CCO.MCODeliverableReports@dhsoha.state.or.us by January 15, 2021.  |

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| **Intensive In-Home Behavioral Health Treatment Implementation** |
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| Describe your CCO’s progress to date and implementation steps it will undertake from January-March 2021.  |  |
|  *Does your update include the following elements? If no, briefly describe why.*  |
| 1. Plan for assessing network adequacy to determine the number of providers estimated to meet the needs of your service area
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| 1. Plan for contracting and/or engaging certified IIBHT providers for your service area(s)
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|  c) Updated list of tentative IIBHT contracted providers  |  |
| 1. Projected start date for IIBHT to be available in your CCO’s service area and timeline for building capacity
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| 1. Strategies your CCO is taking to resolve any barriers experienced by the CCO and/or providers
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| 1. Assistance your CCO needs from OHA to move forward
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