

Prepublication Requirements

• Issued December 20, 2023 •



Revised Requirements for Certified Community Behavioral Health Clinics

The Joint Commission has approved the following revisions for prepublication. While revised requirements are published in the semiannual updates to the print manuals (as well as in the online *E-dition*®), accredited organizations and paid subscribers can also view them in the monthly periodical The *Joint Commission Perspectives*®. To begin your subscription, call 800-746-6578 or visit http://www.jcrinc.com.

Please note: Where applicable, this report shows current standards and EPs first, with deleted language struck-through. Then, the revised requirement follows in bold text, with new language underlined.

APPLICABLE TO THE BEHAVIORAL HEALTH CARE AND HUMAN SERVICES

Effective July 1, 2024

Care, Treatment, and Services (CTS) Chapter

CTS.01.01.01

The organization accepts for care, treatment, or services only those individuals whose identified care, treatment, or service needs it can meet.

Note 1: For opioid treatment programs: If an individual eligible for treatment applies for admission to a comprehensive maintenance treatment program but cannot be placed within 14 days in a program that is within a reasonable geographic area, an opioid treatment program's program sponsor may place the individual in interim maintenance treatment.

Note 2: For opioid treatment programs: There may be individuals in special populations who have a history of opioid use but are not currently physiologically dependent. Federal regulations waive the one-year history of addiction for these special populations, because these individuals are susceptible to relapse to opioid addiction, leading to high-risk behaviors with potentially life-threatening consequences. These populations include the following:

- Persons recently released from a penal institution
- Persons recently discharged from a chronic care facility
- Pregnant patients
- Previously treated patients

Element(s) of Performance for CTS.01.01.01

27. For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC provides outpatient clinical services, including walk-in services, during times that meet the needs of the individuals served, including some nights and weekend hours, and in locations that are accessible, as determined by the community needs assessment.	
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CTS.02.01.01

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December 20, 2023

The	e organization has a screening procedure for the early detection of risk of imminent harm to self or others. Element(s) of Performance for CTS.02.01.01	
3.	For Certified Community Behavioral Health Clinics (CCBHCs): If the screening and risk assessment identify an emergency or crisis need, the CCBHC takes immediate action, including developing plans to reduce or remove risk of harm to the individual served and facilitating any necessary outpatient follow-up. If the screening identifies an urgent need, the CCBHC provides care, treatment, or services, including an initial evaluation, within one business day of the time the request is made. (For more information on crisis services, refer to CTS.04.03.39) Note: For those presenting with emergency or crisis needs, the initial evaluation may be conducted via telephone or telehealth, but an in-person evaluation is preferred. If the initial evaluation is conducted via telephone, the CCBHC sees the individual in person at the next encounter after the emergency is resolved and reviews the initial evaluation. The in-person encounter occurs within 60 calendar days of the initial encounter.	
	S.02.01.03 reorganization performs screenings and assessments as defined by the organization's policy.	
	Element(s) of Performance for CTS.02.01.03	
9.	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC uses standardized and validated screening and assessment tools and brief motivational interviewing techniques. The tools are developmentally, culturally, and linguistically appropriate and accommodate all literacy levels and disabilities, when appropriate.	
10.	For Certified Community Behavioral Health Clinics (CCBHCs): After a preliminary screening and risk assessment, the CCBHC performs an initial evaluation within 10 business days and a comprehensive person-centered and family-centered diagnostic treatment planning evaluation within 60 calendar days from the first request for services by licensed behavioral health professionals who are members of the treatment team. Note 1: The CCBHC bases each evaluation on prior evaluations, and information gathered as part of the preliminary screening and initial evaluation may be considered a part of the comprehensive evaluation. The CCBHC may review recent information from outside providers with the individual served and incorporate it into the CCBHC's clinical/case record to help fulfill these requirements. Note 2: If the state has established independent screening and assessment processes for certain child and youth populations or other populations, the CCBHC should establish partnerships to incorporate findings and avoid duplication of effort.	
11.	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC asks all individuals inquiring about services if they have ever served in the US military.	

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12.	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC directs individuals served who are active-duty service members to use their servicing military treatment facility (MTF) and contacts the individual's MTF primary care managers regarding referrals outside the MTF.
13.	For Certified Community Behavioral Health Clinics (CCBHCs): The initial evaluation includes, at a minimum: - Preliminary diagnoses - The source of referral
	- The reason for seeking care, as stated by the individual served or other individuals who are significantly involved - Identification of the immediate clinical care needs related to the diagnosis for mental and
	substance use disorders of the individual served - A list of all medications and the indication for any medications
	- A summary of previous mental health and substance use disorder treatments with a focus on which treatments helped and were not helpful
	- The use of any alcohol and/or other drugs the individual served may be taking
	- An assessment of whether the individual served is a risk to self or to others, including suicide risk factors
	- An assessment of whether the individual served has other concerns for their safety, such as intimate partner violence
	 Assessment of need for medical care (with referral and follow-up as required) A determination of whether the person presently is, or ever has been, a member of the U.S. Armed Services
	- For children and youth, whether they have system involvement (such as child welfare and juvenile justice)



December 20, 2023

14.	For Certified Community Behavioral Health Clinics (CCBHCs): The comprehensive evaluation	
	includes the following:	

- Reasons for seeking services at the CCBHC, including information regarding onset of symptoms, severity of symptoms, and circumstances leading to the individual served presenting at the CCBHC.
- An overview of relevant social supports; health-related social needs such as housing, vocational, and educational status; family/caregiver and social support; legal issues; and insurance status.
- A description of cultural and environmental factors that may affect the treatment plan of the individual served, including the need for linguistic services or supports for people with limited English proficiency.
- Pregnancy and/or parenting status.
- Behavioral health history, including trauma history, and previous therapeutic interventions and hospitalizations, with a focus on what was helpful and what was not helpful in past treatments.
- Relevant medical history and major health conditions that impact current psychological status.
- Identification of medications that the individual served is taking, including those that are in a Prescription Drug Monitoring Program (PDMP) and could affect the individual's clinical presentation and/or pharmacotherapy.
- Allergies, including medication allergies.
- An examination that includes current mental status, mental health (including depression screening, and other tools that may be used in ongoing measurement-based care), and substance use disorders (including tobacco, alcohol, and other drugs).
- Basic screening for cognitive impairment.
- Assessment of imminent risk, including but not limited to suicide risk, withdrawal and overdose risk, danger to self or others, urgent or critical medical conditions, and threats from another person.
- The strengths, goals, preferences, and other factors to be considered in treatment and recovery planning for the individual served.
- Assessment of the need for other services coordinated by the CCBHC (for example, peer and family/caregiver support services, targeted case management, psychiatric rehabilitation services).
- Assessment of any relevant social service needs of the individual served, with necessary referrals made to social services. For children and youth receiving services, assessment of systems involvement such as child welfare and juvenile justice and referral to child welfare agencies as appropriate.
- An assessment of need for a physical exam or further evaluation by appropriate health care professionals, including the primary care provider (with appropriate referral and follow-up) of the individual served.
- The preferences of the individual served regarding the use of technologies such as telehealth, video conferencing, remote patient monitoring, and asynchronous interventions.

CTS.02.05.01

For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC screens for unsafe substance use.

Element(s) of Performance for CTS.02.05.01

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Prepublication Requirements *continued*

December 20, 2023

1.	For Certified Community Behavioral Health Clinics (CCBHCs): If screening identifies unsafe substance use, including problematic alcohol or other substance use, the CCBHC conducts a brief intervention, and provides the individual served with a full assessment and treatment, if appropriate within the level of care of the CCBHC, or refers the individual served to a more appropriate level of care.
CT	S.03.01.01
the Not respective the pote con bup	e organization bases the planned care, treatment, or services on the needs, strengths, preferences, and goals of individual served. e: For opioid treatment programs: Methadone has well-documented effects on several systems, including the biratory, nervous, and cardiac systems, and the liver. In addition, many medications including methadone can act increase the QT interval on an electrocardiogram and potentially lead to torsades de pointes, a potentially life-teatening cardiac arrhythmia. Therefore, it is important for the program physician to consider all of the medications patient is currently taking (including actual versus prescribed doses, illicit drugs, medically active adulterants tentially present in illicit substances, and medically active over-the-counter or natural remedies). Given sideration of this information, the program physician can determine whether the treatment drug will be methadone, trenorphine, or another medication and whether the treatment indicated for the patient is induction, withdrawal magement, or maintenance. Element(s) of Performance for CTS.03.01.01
15.	For Certified Community Behavioral Health Clinics (CCBHCs): An interdisciplinary treatment team, composed of staff and other providers, works together to coordinate the medical, psychiatric, psychosocial, emotional, therapeutic, and recovery needs of the individual served and includes traditional approaches to care for individuals served who are American Indian, Alaska Native, or from other cultural and ethnic groups.
CT	S.03.01.03
	organization has a plan for care, treatment, or services that reflects the assessed needs, strengths, preferences, goals of the individual served.
29.	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC directly, or through a designated collaborating organization, develops a person-centered, family-centered, and recovery-oriented plan for care, treatment, or services, including but not limited to risk assessment and crisis planning.
	assessment and erisis planning.



30.	For Certified Community Behavioral Health Clinics (CCBHCs): The individualized plan of care meets the following criteria: - Developed in collaboration with the individual served and, as appropriate, their family - Addresses the prevention, medical, and behavioral health needs of the individual served - Supports care in the least restrictive setting possible - Based on information obtained through the initial evaluation, comprehensive evaluation, ongoing screening and assessment, and the goals and preferences of the individual served Note: The CCBHC coordinates with staff of the programs necessary to carry out the plan.	
31.	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC, in agreement with the individual served, updates the plan for care, treatment, or services and assessment based on responses to treatment, when the status of the individual served changes, when the treatment goals change, or at least every 6 months or within the timeframe established by state or federal law and regulation, whichever is more stringent.	
32.	For Certified Community Behavioral Health Clinics (CCBHCs): The plan for care, treatment, or services includes person-centered and family-centered care that is responsive to the race, ethnicity, sexual orientation, and gender identity of the individual served and recognizes the cultural needs and other needs of the individual. This includes but is not limited to access to traditional approaches or medicines for individuals served who are American Indian or Alaska Native. These services may be provided directly by the CCBHC or through formal arrangements with tribal providers. (See also HRM.01.05.01, EP 15)	
33.	For Certified Community Behavioral Health Clinics (CCBHCs): The plan for care, treatment, or services is comprehensive, addressing all services required, including recovery supports, with provision for monitoring of progress towards goals. The treatment plan is built upon a shared decision-making approach.	
34.	For Certified Community Behavioral Health Clinics (CCBHCs): Where appropriate, the CCBHC seeks consultation during treatment planning as needed (for example, consultation for eating disorders, traumatic brain injuries, intellectual and developmental disabilities, interpersonal violence, and human trafficking).	
CTS.03.01.07		
	en individuals served need additional care, treatment, or services not offered by the organization, referral	s are
ma	de and documented in the clinical/case record. (For more information, refer to Standard CTS.04.01.01.) Element(s) of Performance for CTS.03.01.07	
	Element(a) of Ferrormance for Clastastar	
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12.	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC assists individuals served and families of children and youth who have been referred to external providers or resources in obtaining an appointment and tracks the individual's participation in services to ensure coordination and receipt of supports.	
CT	S.03.02.05	
	Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC plans for care, treatment, ovices for veterans.	or
	Element(s) of Performance for CTS.03.02.05	
1.	For Certified Community Behavioral Health Clinics (CCBHCs): The plan for care, treatment, or services is recovery oriented, attentive to the veteran's values and preferences, and evidence based and is developed with input from the veteran and, when appropriate, the family.	
2.	For Certified Community Behavioral Health Clinics (CCBHCs): For all veterans receiving behavioral health services, the plan for care, treatment, or services includes the following: - The veteran's diagnosis(es) and the evidence-based intervention(s) for each diagnosis - Methods for monitoring the outcomes of care (therapeutic benefits and adverse effects) - Milestones for reevaluation of interventions and of the plan itself - Interventions intended to reduce or manage symptoms, improve functioning, and prevent relapses or recurrences of episodes of illness	
3.	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC obtains the veteran's verbal consent to the plan for care, treatment, or services.	
CT	S.04.01.03	
car	e individual served receives education and training specific to the individual's needs and abilities consisten e, treatment, or services provided. e: This standard does not apply to academic education.	t with the
	Element(s) of Performance for CTS.04.01.03	
29.	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC provides individuals served with education on crisis planning, psychiatric advanced directives, and how to access crisis services, including the 988 Suicide and Crisis Lifeline, other area hotlines and warmlines, and overdose prevention services.	
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December 20, 2023

CTS.04.03.39

For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC has policies and procedures for providing a continuum of crisis prevention, response, and postvention services.

Element(s) of Performance for CTS.04.03.39

management services that are available 24 hours a day, 7 days a week. Note: The method for providing these services is described in the CCBHC's policies and procedures that are available to the public. 2. For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC directly provides robust and timely crisis behavioral health services or provides these services through a designated collaborating organization (DCO) agreement with an existing state-sanctioned, certified, or licensed system or network for the provision of crisis behavioral health services. Whether provided by the CCBHC or by the state-sanctioned alternative, available services include the following: - 24-hour mobile crisis teams - Emergency crisis intervention services - Crisis stabilization In addition, the crisis services address suicide prevention and intervention and crises related to substance use, including drug and alcohol related overdose, and support following a nonfatal overdose after the individual is medically stable. Note: If a CCBHC would like to have a DCO relationship with a state-sanctioned crisis system that operates under less stringent standards, they must request approval from the US Department of Health and Human Services (HHS) to do so. Certifying states must request approval from HHS to certify CCBHCs in their states that have or seek to have a DCO relationship with a state-sanctioned crisis system with less stringent standards than those included in these criteria.		
robust and timely crisis behavioral health services or provides these services through a designated collaborating organization (DCO) agreement with an existing state-sanctioned, certified, or licensed system or network for the provision of crisis behavioral health services. Whether provided by the CCBHC or by the state-sanctioned alternative, available services include the following: - 24-hour mobile crisis teams - Emergency crisis intervention services - Crisis stabilization In addition, the crisis services address suicide prevention and intervention and crises related to substance use, including drug and alcohol related overdose, and support following a nonfatal overdose after the individual is medically stable. Note: If a CCBHC would like to have a DCO relationship with a state-sanctioned crisis system that operates under less stringent standards, they must request approval from the US Department of Health and Human Services (HHS) to do so. Certifying states must request approval from HHS to certify CCBHCs in their states that have or seek to have a DCO relationship with a state-sanctioned crisis system with less stringent standards than those included in these criteria.	1.	management services that are available 24 hours a day, 7 days a week. Note: The method for providing these services is described in the CCBHC's policies and
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with an emergency or crisis need, the CCBHC takes immediate action including any necessary outpatient follow-up. If an individual served presents with an urgent need, the CCBHC provides care, treatment, or services within one business day of the time the request is made or at a later		substance use, including drug and alcohol related overdose, and support following a nonfatal overdose after the individual is medically stable. Note: If a CCBHC would like to have a DCO relationship with a state-sanctioned crisis system that operates under less stringent standards, they must request approval from the US Department of Health and Human Services (HHS) to do so. Certifying states must request approval from HHS to certify CCBHCs in their states that have or seek to have a DCO relationship with a state-sanctioned crisis system with less stringent standards than those
	3.	with an emergency or crisis need, the CCBHC takes immediate action including any necessary outpatient follow-up. If an individual served presents with an urgent need, the CCBHC provides care, treatment, or services within one business day of the time the request is made or at a later
4. For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC maintains a working relationship with local emergency departments (EDs) and establishes protocols for CCBHC staff to assist the EDs in addressing the needs of individuals served in psychiatric crisis.	4.	relationship with local emergency departments (EDs) and establishes protocols for CCBHC staff

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December 20, 2023

5.	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC follows policies and procedures that reduce delays for initiating services during and following a psychiatric crisis, including the role of law enforcement during the provision of crisis services. The policies and procedures are designed to maximize the delivery of recovery-oriented treatment and services and minimize contact with law enforcement and the criminal justice system, while promoting individual and public safety in accordance with applicable state and local laws and regulations.	
6.	For Certified Community Behavioral Health Clinics (CCBHCs): To identify the preferences of the individual served in the event of psychiatric or substance use crisis, the CCBHC develops a crisis plan with the individual served, and when appropriate includes the family. At minimum, the CCBHC informs the individual served about using National Suicide and Crisis Lifeline, local hotlines, warmlines, mobile crisis services, and stabilization services should a crisis arise outside of regular office hours. For individuals served who have had a psychiatric emergency or crisis, the CCBHC creates, maintains, and follows a crisis plan to prevent and de-escalate future crisis situations. Note: Crisis plans may include the development of a psychiatric advanced directive, if desired by the individual served. Psychiatric advance directives, if developed, are entered in the electronic health record of the individual served so that the information is available to providers in emergency care settings where those electronic health records are accessible.	
7.	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC provides or coordinates with telephonic, text, and chat crisis intervention call centers that meet 988 Suicide and Crisis Lifeline standards for risk assessment and engagement of individuals at imminent risk of suicide.	
8.	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC provides community-based behavioral health crisis intervention services using mobile crisis teams twenty-four hours per day, seven days per week to adults, children, youth, and families anywhere within the service area including at home, work, or anywhere else where the crisis is experienced. The CCBHC sets a goal of mobile crisis teams arriving within one hour (two hours in rural and frontier settings) from the time that they are dispatched, with response time not to exceed three hours. Note: Telehealth may be used to connect individuals in crisis to qualified mental health providers during the interim travel time. Technologies also may be used to provide crisis care to individuals when travel distances make the two-hour response time unachievable, but the ability to provide an in-person response must be available when it is necessary to assure safety.	

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December 20, 2023

9.	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC provides crisis receiving/stabilization services that include, at a minimum, urgent care/walk-in mental health and substance use disorder services for voluntary individuals that identify the immediate needs of the individual served, de-escalate the crisis, and connect them to a safe and least-restrictive setting for ongoing care (including care provided by the CCBHC).	
СТ	'S.04.03.41	
	r Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC provides and/or coordinates the spectrum of health and social services.	tes care
	Element(s) of Performance for CTS.04.03.41	
1.	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC provides care, treatment, or services for individuals served within 10 business days of the requested date for service.	
2.	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC directly provides a majority (51% or more) of the total volume of encounters across the required CCBHC services (excluding crisis services). Note: See the Glossary definition for certified community behavioral health clinics for the required services.	
3.	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC coordinates care across the spectrum of health services, including physical health care (both acute and chronic) and behavioral health care, as well as social services including housing, educational, and employment support as necessary to facilitate wellness and recovery of the whole person. The CCBHC also coordinates with other systems to meet the needs of the individuals they serve, including criminal and juvenile justice and child welfare.	

Key: (D) indicates that documentation is required;



4.	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC directly, or through a designated collaborating organization (DCO), provides the following: - Outpatient behavioral health care, including psychopharmacological treatment - Evidence-based services using best practices for treating mental health and substance use disorders across the lifespan with tailored approaches for adults, children, and families - Substance use disorder treatment and services as described in the American Society for Addiction Medicine Levels 1 and 2.1, including treatment of tobacco use disorders - Traditional practices and treatments as appropriate for the cultures of the population served Note 1: In the event that specialized or more intensive services outside the expertise of the CCBHC or DCO are required for the purposes of outpatient mental health and substance use disorder treatment, the CCBHC makes the services available through referral or other formal arrangement with other providers or, where necessary and appropriate, through use of telehealth, in accordance with state and federal law and regulation. Where specialist providers are not available to provide direct care to an individual served, or specialist care is not practically available, the CCBHC staff may consult with specialized service providers. Note 2: For individuals served with potentially harmful substance use, the CCBHC is strongly encouraged to engage the individual served with motivational techniques and harm reduction strategies to promote safety and/or reduce substance use.	
5.	For Certified Community Behavioral Health Clinics (CCBHCs): If the CCBHC is certified by the state, the CCBHC complies with the minimum set of evidence-based practices established by the state.	
6.	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC is responsible for providing outpatient primary care screening and monitoring of key health indicators and health risks. The medical director establishes screening protocols for the following: - HIV and viral hepatitis - Primary care screening pursuant to the Substance Abuse and Mental Health Services Agency's Certified Community Behavioral Health Clinic Certification Criteria Program Requirement 5 Quality and Other Reporting and Appendix B - Other clinically indicated primary care key health indicators of children, adults, and older adults receiving services, as determined by the CCBHC medical director and based on environmental factors, health-related social needs, and common physical health conditions experienced by the population served. Note 1: Screening protocols align with the United States Preventive Services Task Force Recommendations with grades of A and B. Note 2: These services are provided in a timely manner and may be provided directly by the CCBHC or through formal relationships with other providers that are designated collaborating organizations. Note 3: If the individual's primary care provider conducts the necessary screening and monitoring, the CCBHC is not required to do so as long as it has a record of the screening and monitoring and the results of any tests that address the health conditions included in the CCBHCs screening and monitoring and monitoring protocols.	



7.	For Certified Community Behavioral Health Clinics (CCBHCs): The medical director develops protocols to screen for individuals served who are at risk for common physical health conditions across the lifespan, including the following: - Identifying individuals served with chronic diseases - Ensuring that individuals served are asked about physical health symptoms - Establishing systems for collection and analysis of laboratory samples Note 1: The CCBHC has the ability to collect biologic samples directly, through a designated collaborating organization, or through protocols with an independent clinical lab organization. Laboratory analyses can be done directly or through another arrangement with an organization separate from the CCBHC. Note 2: If the individual's primary care provider conducts the necessary screening and monitoring, the CCBHC is not required to do so as long as it has a record of the screening and monitoring and the results of any tests that address the health conditions included in the CCBHCs screening and monitoring protocols.	
8.	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC provides ongoing primary care monitoring of the health conditions for which it screens and as clinically indicated for the individual served. Monitoring includes the following: - Ensuring individuals have access to primary care services - Ensuring ongoing periodic laboratory testing and physical measurement of health status indicators and changes in chronic health conditions - Coordinating care with primary care and specialty health providers, including tracking attendance at needed physical health care appointments - Promoting a healthy lifestyle Note: The provision of primary care services outside of primary care screening and monitoring is not within the scope of the nine required CCBHC services.	



9.	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC provides evidence-based rehabilitation services for mental health and substance use disorder as required by the state. These include but are not limited to the following: - Supported employment programs designed to provide those receiving services with on-going support to obtain and maintain competitive, integrated employment (for example, evidence-based supported employment, customized employment programs, or employment supports run in coordination with vocational rehabilitation or Career One-Stop services) - Supported education and other educational services - Services to find and maintain safe and stable housing - Services to achieve social inclusion and community connectedness - Medication education - Self-management education - Psychoeducation for the individual served and families or caregivers Rehabilitation services, which may be provided or enhanced by peer providers, may also include the following: - Community integration services - Recovery support services - Financial management education - Dietary and wellness education - Dietary and wellness education - Training in personal care skills - Assistance for navigating health care systems Note: These services may be provided directly by the CCBHC or through formal relationships with other providers that are designated collaborating organizations.	
10.	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC is responsible for the provision of outpatient behavioral health services and peer and family supports. Note: These services may be provided directly by the CCBHC or through formal relationships with other providers that are designated collaborating organizations.	
11.	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC provides care, treatment, or services that are appropriate for the phase of life and development of the individual served, specifically considering what is appropriate for children, youth (including transition-age youth), and older adults as distinct groups for whom life stage and functioning may affect treatment. When treating children and youth, the CCBHC provides evidence-based services that are developmentally appropriate, youth-guided, and family/caregiver-driven. When treating older adults, the CCBHC considers the desires and functioning of the individual served and provides appropriate evidence-based treatments. When treating individuals with developmental or other cognitive disabilities, the CCBHC considers level of functioning of the individual served and provides appropriate evidence-based treatments.	
12.	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC provides supports for children and youth that comprehensively address family/caregiver, school, medical, mental health, substance use, psychosocial, and environmental issues.	
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3.	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC is responsible for providing peer supports, including but not limited to peer specialist and recovery coaches, peer counseling, and family and caregiver supports. Note: These services may be provided directly by the CCBHC or through formal relationships with other providers that are designated collaborating organizations.
 4.	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC assists individuals served and families to access benefits, including Medicaid.
CT	S.04.03.43
	Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC is responsible for care, treservices for members of the US Armed Forces and veterans. Element(s) of Performance for CTS.04.03.43
1.	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC is responsible for intensive, community-based behavioral health care for certain members of the US Armed Forces and veterans, particularly those Armed Forces members located 50 miles or more (or one hour's drive time) from a military treatment facility and veterans living 40 miles or more from a Department of Veterans Affairs medical facility, or as otherwise required by law and regulation.
2.	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC provides care to veterans that is consistent with the minimum clinical mental health guidelines from the Veterans Health Administration (VHA), including the clinical guidelines contained in the Uniform Mental Health Services Handbook. Note: The CCBHC also serves veterans who decline or are ineligible for VHA services consistent with minimum clinical mental health guidelines from the VHA, including the clinical guidelines contained in the Uniform Mental Health Services Handbook.
3.	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC provides recovery- oriented behavioral health services according to Veterans Health Administration recovery guidelines.
4.	For Certified Community Behavioral Health Clinics (CCBHCs): When veterans are seeing more than one behavioral health provider and when they are involved in more than one program, the identity of the principal behavioral health provider is given to the veteran, identified in the clinical/case record, and noted in records related to case management.
Ke	y: (D) indicates that documentation is required;



December 20, 2023

5.	For Certified Community Behavioral Health Clinics (CCBHCs): The principal behavioral health provider coordinates fulfillment of the following requirements: Regular contact is maintained with the veteran as clinically indicated for as long as ongoing care is required. A psychiatrist or other prescriber that satisfies the current requirements of the VHA Uniform Mental Health Services Handbook reviews and reconciles each veteran's psychiatric medications on a regular basis. Development of the veteran's treatment plan incorporates input from the veteran and, when appropriate, the family and/or surrogate decision maker in accordance with law and regulation. Implementation of the plan for care, treatment, or services is monitored and documented and is revised when necessary. This must include tracking progress in the care, treatment, or services delivered; the outcomes achieved; and the goals attained. Communication with the veteran and, when appropriate, the family and/or surrogate decision maker about the plan for care, treatment, or services and any of the veteran's problems or concerns about their care, in accordance with law and regulation. For veterans who are at high risk of losing decision making capacity, such as those with a diagnosis of schizophrenia or schizoaffective disorder, such communications need to include discussions regarding future behavioral health care treatment. The plan for care, treatment, or services reflects the veteran's goals and preferences for care and that the veteran verbally consents to plan. If the principal behavioral health provider suspects the veteran lacks decision-making capacity, the provider ensures that the veterans decision-making capacity is formally assessed and documented and that a surrogate decision-maker is identified if necessary.	
For	S.06.01.17 Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC provides care coordination ough established partnerships with other providers. Element(s) of Performance for CTS.06.01.17	ı
1.	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC's partnerships for care coordination do not limit an individual's freedom to choose their provider within the CCBHC, its designated collaborating organizations, or any other provider.	
2.	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC has a partnership establishing care coordination expectations with federally qualified health centers and, as applicable, rural health clinics to provide health care services that are not provided directly through the CCBHC. Note: For individuals served by other primary care providers, the CCBHC has established protocols to facilitate care coordination.	

Key: (D) indicates that documentation is required;



December 20, 2023

3.	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC has a partnership
	establishing care coordination expectations with programs, including programs operated by a
	tribal organization, to provide individuals served with the following services:
	- Inpatient psychiatric treatment
	Onicid trootment programs



- Opioid treatment programs
- Medically supervised withdrawal management services, including ambulatory withdrawal management
- Residential substance use disorder treatment programs
- If any exist within the CCBHC service area

Note: The CCBHC is able to track when individuals served are admitted to these facilities as well as when they are discharged, unless there is a formal transfer of care to a non CCBHC entity.

4. For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC has policies and procedures for transitioning individuals from emergency departments, inpatient psychiatric settings, medically monitored withdrawal management services, residential settings, and residential or inpatient facilities that serve children and youth, such as psychiatric residential treatment facilities, to a safe community setting. This includes transfer of clinical/case records of services received (such as prescriptions), active follow-up after discharge, and, as appropriate, a plan for suicide prevention and safety, overdose prevention, and provision of peer services.



Key: (D) indicates that documentation is required;



December 20, 2023

5.	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC has a partnership
	establishing care coordination expectations with a variety of community or regional services,
	supports, and providers that operate within the service area. Services and supports to
	coordinate with include the following:



- Schools
- Child welfare agencies
- Juvenile and criminal justice agencies and facilities (including drug, mental health, veterans, and other specialty courts)
- Indian Health Service youth regional treatment centers
- State licensed and nationally accredited child placing agencies for therapeutic foster care services
- Other social and human services
- The 988 Suicide and Crisis Lifeline call center serving the area in which the CCBHC is located Note: The CCBHC may also have partnerships with the following service providers if necessary to meet the needs of the population served or the needs and preferences of the individual served:
- Specialty providers of medications for treatment of opioid and alcohol use disorders
- Suicide and crisis hotlines and warmlines (a peer-run listening line staffed by people in mental health recovery)
- Indian Health Service or other tribal programs
- Homeless shelters
- Housing agencies
- Employment services
- Peer-operated programs
- Aging and disability resource centers
- Services for older adults, such as area agencies on aging
- State and local health departments and behavioral health and developmental disabilities agencies
- Substance use prevention and harm reduction programs
- Criminal and juvenile justice, including law enforcement, courts, jails, prisons, and detention centers
- Legal aid
- Immigrant and refugee services
- SUD recovery/transitional housing
- Programs and services for families with young children, including supplemental nutrition programs for women, infants, and children (WIC); home visiting programs; head start programs; and infant and early childhood mental health consultation programs
- Coordinated specialty care programs for first episode psychosis
- Other social and human services

6.	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC has a partnership
	establishing care coordination expectations with each type of Department of Veterans Affairs
	(VA) facility nearby, including medical centers, independent clinics, drop-in centers, or other
	facilities of the VA.



Key: (D) indicates that documentation is required;



December 20, 2023

7.	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC has a partnership for care coordination with inpatient acute-care hospitals in the CCBHC service area to transition individuals to the CCBHC. The partnership includes services or facilities associated with the inpatient acute-care hospital, such as the following: - Emergency departments - Hospital outpatient clinics - Urgent care centers - Residential crisis settings This partnership minimizes the time between discharge from these organization and the provision of care, treatment, or services by the CCBHC and includes procedures to help transition individuals served from the facility to the CCBHC, allows the CCBHC to track when the individual served is admitted to the facility, and provides for the transfer of clinical/case records and active follow-up after discharge from the facility. Note: The CCBHC documents attempts to contact all individuals served who are discharged from the facilities within 24 hours of discharge. For individuals being discharged who have been identified as at risk for suicide or overdose, the agreement includes a requirement to coordinate consent and follow-up services with the individual served within 24 hours of discharge and continues until the individual is linked to services or assessed to be no longer at risk.	
8.	For Certified Community Behavioral Health Clinics (CCBHCs): The partnerships in EPs 2-7 are supported by a formal signed agreement that details the role of each party. If the partnership cannot be supported by a formal signed agreement, the CCBHC, at a minimum, develops written protocols and documents any partnership activity to support coordinated care undertaken by the CCBHC.	0
СТ	S.06.01.19	
	Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC is responsible for high-quageted case management services.	ılity,
	Element(s) of Performance for CTS.06.01.19	
1.	For Certified Community Behavioral Health Clinics (CCBHCs): Targeted case management services assist individuals served in sustaining recovery and gaining access to needed medical, social, legal, educational, and other services and supports.	

Key: (D) indicates that documentation is required;



December 20, 2023

2.	For Certified Community Behavioral Health Clinics (CCBHCs): Targeted case management meets state requirements for scope of services to specific populations and includes supports for the following: - Individuals identified as high risk for suicide or overdose, particularly during times of transitions such as from a residential treatment facility, an emergency department, or psychiatric hospitalization - Individuals experiencing homelessness - Individuals transitioning to the community from jails or prisons - Individuals with complex or serious mental health or substance use conditions - Individuals needing short-term support during an acute episode or care transition	
Hu	uman Resources Management (HRM) Chapter	
HR	RM.01.01.03	
The	e organization determines how staff function within the organization. Element(s) of Performance for HRM.01.01.03	
6.	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC staffing plan includes specialized staff as detailed in 1.b.2 of the Substance Abuse and Mental Health Services Agency's (SAMHSA) Certified Community Behavioral Health Clinic Certification Criteria.	0
HR	RM.01.05.01	
Sta	aff participate in education and training. Element(s) of Performance for HRM.01.05.01	
15.	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC trains staff on cultural competency issues of race, ethnicity, sexual orientation, and gender identity as applies to the population served, as well as military and veterans culture. (See also CTS.03.01.03, EP 32)	

Key: (D) indicates that documentation is required;



	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC provides staff training at orientation and at intervals determined by the CCBHC thereafter that addresses the following: - Person-centered, family-centered, recovery-oriented, evidence-based, and trauma-informed care, specifically focusing on trauma-informed approaches during crises - Overdose prevention and response - The CCBHC's policies and procedures for integration and coordination with primary care - The CCBHC's policies and procedures for continuity of operations during an emergency or disaster incident - Care for cooccurring mental health and substance use disorders - The roles of families and peers in care, treatment, or services - Other trainings as required by law and regulation	
HR	RM.01.06.01	
Sta	off are competent to perform their job duties and responsibilities.	
	Element(s) of Performance for HRM.01.06.01	
8.	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC has written policies and procedures describing its method(s) for assessing competency and maintains a written account of the training provided for each staff member with direct contact with individuals served for the duration of the staff member's employment.	(D)
	Formation Management (IM) Chapter	
IM	l.02.01.01	
The	e organization protects the privacy of clinical/case information.	
	Element(s) of Performance for IM.02.01.01	
5.	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC obtains consent from the individual served for the release of information related to care coordination activity that is not already allowed under law and regulation and, if unable to obtain consent, revisits with the individual served periodically. The consent and any attempts to obtain consent are documented.	
IM	1.02.03.01	
	r Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC's health information system cludes but is not limited to electronic health records.	1
	Element(s) of Performance for IM.02.03.01	
Ke	ey: (D) indicates that documentation is required;	



Note: The p	cordance with federal and state law and regulation. lan is developed within two years of certification or submission of attestation.	
improve car using an ele - How the C transitions t - How the C clinically re CCBHC's cl - How the C	d Community Behavioral Health Clinics (CCBHCs): The CCBHC develops a plan to re coordination between the CCBHC and all designated collaborating organizations ectronic health record. The plan includes the following information: CCBHC will support electronic health information exchange to improve care to and from the CCBHC. CCBHC will work with designated collaborating organizations (DCOs) to integrate levant clinical/case records generated by the DCO and incorporate them into the linical/case records. CCBHC will make clinical/case information maintained by the CCBHC available to	
health recor improvemer protections Note: If the support the	d Community Behavioral Health Clinics (CCBHCs): The CCBHC uses its electronic rds system to conduct activities (such as population health management, quality nt, reducing health care disparities, outreach, and research) with appropriate in place. CCBHC uses federal funding to acquire, upgrade, or implement technology to se activities, the system should utilize nationally recognized, US Department of Human Services-adopted standards, where available, to enable health information	
system, or h Coordinator - Captures of preferred la - Supports of - Provides in clinical/case an applicati - Provides e - Supports of Note: The C	evidence-based clinical decision support electronic prescribing CCBHC does not need to adopt a single system that provides all these certified but can adopt either a single system or a combination of tools that provide these	



December 20, 2023

10.	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC's governance is informed by representatives of the individuals being served by the CCBHC in terms of demographics such as geographic area, race, ethnicity, sex, gender identity, disability, age, and sexual orientation and in terms of health and behavioral health needs.	
11.	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC incorporates meaningful participation from individuals with lived experience of mental and/or substance use disorders, including youth, and their families. This is demonstrated by one of the following: - The CCBHC's board includes 51% individuals with lived experience of mental illness and/or substance use disorders and family members. - The CCBHC involves people with lived experience through a committee that reports to the board. The CCBHC provides staff support to the individuals involved in the committee that is equivalent to the support given to the governing board. The governing board establishes protocols for incorporating input from individuals with lived experience and family members. Board meeting summaries are shared with those participating in a committee and recommendations from the committee are entered into the formal board record; a member(s) of the committee is invited to board meetings; and representatives of the committee have the opportunity to regularly address and share recommendations directly with the board and have their comments and recommendations recorded in the board minutes. The CCBHC provides staff support for posting an annual summary of the recommendations from the committee on the CCBHC website. Note 1: Meaningful participation means involving a substantial number of people with lived experience and family members of individuals served in developing initiatives; identifying community needs, goals, and objectives; providing input on service development and performance improvement processes; and developing budgets and making fiscal decisions. Note 2: The CCBHC's certifying state or federal grant funding agency will determine if the CCBHC's approach to meaningful participation is acceptable. For CCBHCs that choose to include representatives on the board, the CCBHC must describe how it meets this requirement, or provide a transition plan with a timeline that indicates how it will do so. Note 3: To the extent	
12.	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC chooses board members for expertise in health services, community affairs, local government, finance and accounting, legal affairs, trade unions, faith communities, commercial and industrial concerns, or social service agencies within the communities served. Note: No more than half of the board members may derive more than 10% of their annual income from the health care industry.	

LD.03.06.03

Key: (D) indicates that documentation is required;



December 20, 2023

For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC develops and maintains a community needs assessment and staffing plan.

Element(s) of Performance for LD.03.06.03 For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC develops and (D) maintains a community needs assessment by reviewing the cultural, linguistic, and treatment needs of the population served. Note: For more information, refer to the definition for community needs assessment in appendix A of the Substance Abuse and Mental Health Services Agency's Certified Community Behavioral Health Clinic Certification Criteria. For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC develops and (D) maintains a staffing plan that is informed by the community needs assessment. For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC updates the ℗ community needs assessment and staffing plan at least every three years. For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC leadership maintains a fully staffed management team as appropriate for the size and needs of the clinic, determined by the current community needs assessment and staffing plan. For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC staffing plan includes ℗ a management team with but not limited to the following roles: - A CEO or equivalent/project director - A psychiatrist as medical director (does not need to be a full-time employee) Note 1: If a CCBHC is unable, after reasonable and consistent efforts, to employ or contract with a psychiatrist as medical director, a medically trained, licensed behavioral health practitioner who can prescribe and manage medications independently according to state law serves as the medical director. Note 2: Both positions can be held by the same person. 6. For Certified Community Behavioral Health Clinics (CCBHCs): The medical director provides guidance for behavioral health clinical service delivery, the guality of the medical component of care, and the coordination of behavioral health care, including addictions, and primary care and participates in performance improvement activities. Note: If the medical director is not a psychiatrist, the CCBHC obtains psychiatric consultation on the medical component of care and the integration of behavioral health care and primary care.

Key: (D) indicates that documentation is required;



December 20, 2023

LD.04.01.01

23. For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC maintains documentation establishing that it complies with at least one of the following criteria: - It is a nonprofit organization, exempt from tax under Section 501(c)(3) of the United States Internal Revenue Code. - It is part of a local government behavioral health authority. Note: A CCBHC is considered part of a local government behavioral health authority when a locality, county, region, or state maintains authority to oversee behavioral health services at the local level and utilizes the clinic to provide those services. - It is operated under the authority of the Indian Health Service, an Indian tribe, or other tribal organization as part of a contract, grant, cooperative agreement, or compact with the Indian Health Service pursuant to the Indian Self-Determination Act (25 U.S.C. 450).
documentation establishing that it complies with at least one of the following criteria: - It is a nonprofit organization, exempt from tax under Section 501(c)(3) of the United States Internal Revenue Code. - It is part of a local government behavioral health authority. Note: A CCBHC is considered part of a local government behavioral health authority when a locality, county, region, or state maintains authority to oversee behavioral health services at the local level and utilizes the clinic to provide those services. - It is operated under the authority of the Indian Health Service, an Indian tribe, or other tribal organization as part of a contract, grant, cooperative agreement, or compact with the Indian
- It is an urban İndian organization pursuant to a grant or contract with the Índian Health Service under Title V of the Indian Health Care Improvement Act (25 U.S.C. 1601).
24. For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC has arrangements with the Indian Health Service, an Indian tribe, or urban Indian organization, if not already operated by these entities, to assist in the provision of care, treatment, or services to individuals served who are tribal members.
25. For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC participates in the Substance Abuse and Mental Health Administration (SAMHSA) Behavioral Health Treatment Locator.
26. For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC is certified by its state as a CCBHC or has submitted an attestation to Substance Abuse and Mental Health Administration (SAMHSA) as a part of participation in the SAMHSA CCBHC Expansion grant program.
LD.04.01.03
The organization develops an annual operating budget and, when needed, a long-term capital expenditure plan.
Element(s) of Performance for LD.04.01.03

Key: (D) indicates that documentation is required;



December 20, 2023

14.	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC receives an independent financial audit annually in accordance with federal audit requirements and submits a corrective action plan addressing all findings cited in the audit report.	(D)				
LD	LD.04.01.15					
	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC maintains liability or malpractice insurance adequate for the staffing and scope of services provided.					
	Element(s) of Performance for LD.04.01.15					
1.	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC maintains liability or malpractice insurance adequate for the staffing and scope of services provided.	(D)				
LD	.04.01.17					
	Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC has sliding-scale fees for catment, or services offered.	care,				
	Element(s) of Performance for LD.04.01.17					
1.	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC has a sliding-scale fee schedule(s) that includes all services offered. This fee schedule must be published on the CCBHC website, posted in the waiting room, and readily accessible to individuals served and their families. Note: The sliding-scale fee schedule is communicated in languages and formats appropriate for individuals seeking services who have limited English proficiency, literacy barriers, or disabilities.	(D)				
2.	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC has written policies and procedures describing eligibility for and implementation of the sliding-scale fee schedule (s). The policies are applied equally to all individuals seeking services.	0				
3.	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC's fee schedule(s) complies with law and regulation. If there is no applicable law and regulation, the schedule is based on locally prevailing rates or charges and includes reasonable costs of operation.					

LD.04.03.01

The organization provides services that meet needs of the individual served.

Key: (D) indicates that documentation is required;



	Element(s) of Performance for LD.04.03.01	
31.	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC provides transportation or transportation vouchers for individuals served, when possible, through relevant funding or programs.	
32.	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC utilizes telehealth, video conferencing, remote patient monitoring, asynchronous interventions, and other technologies, to the extent possible, if preferred by the individual served.	
33.	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC does not refuse services because of an individual's place of residence, homelessness, lack of a permanent address, or inability to pay for services.	
34.	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC has protocols addressing the needs of individuals served who do not live close to a CCBHC or within the CCBHC's service area. At a minimum, the protocols include the following: - Providing crisis response, evaluation, and stabilization in the CCBHC service area regardless of the individual's place of residence - Providing agreements with clinics in other localities to refer and track individuals seeking noncrisis services to the CCBHC or another clinic serving the individual's area of residence - Consideration for telehealth, video conferencing, remote patient monitoring, asynchronous interventions, and other technologies in alignment with the preferences of the individual served Note: The CCBHC is not required to provide ongoing services, including telehealth, to individuals who live outside the CCBHC service area.	
35.	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC conducts outreach, engagement, and retention activities that are informed by the community needs assessment to support inclusion and access for underserved individuals and populations.	
Me	dication Management (MM) Chapter	
MI	Л.01.01	
	e organization plans its medication management processes. e: This standard is applicable to organizations that engage in any of the medication management process Flement(s) of Performance for MM 01 01 01	ses.
	Element(s) of Performance for MM.01.01.01	
Key	y: (D) indicates that documentation is required;	



3.	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC consults the state's Prescription Drug Monitoring Program before prescribing medications, in accordance with state law.	
Pei	rformance Improvement (PI) Chapter	
PI.	01.01.01	
The	e organization collects data to monitor its performance.	
	Element(s) of Performance for Pl.01.01.01	
20.	The organization collects data to measure the performance of high-risk, high-volume, problem-prone processes, as defined by the organization. Note: Examples of such processes include the use of restraints, seclusion, suicide watch, and behavior management and treatment. (See also LD.03.07.01, EP 2)	0
43.	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC collects, reports, and tracks encounter, outcome, and quality data including but not limited to the following: - Characteristics of the individual served - Staffing - Access to services - Use of services - Screening, prevention, and treatment - Care coordination - Other processes of care - Costs - Outcomes for the individuals served Note: See appendix B of the Substance Abuse and Mental Health Services Agency Certified Community Behavioral Health Clinic Certification Criteria for full data collection requirements.	(D)
44.	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC reports data annually and reports data for all individuals served by the CCBHC. The CCBHC also reports where data constraints exist (for example, the measure is calculated from claims) for all Medicaid enrollees in the CCBHCs. Note: See 5.a.2 of the Substance Abuse and Mental Health Services Agency Certified Community Behavioral Health Clinic Certification Criteria for specific details.	(D)
45.	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC collects data and quality measures from designated collaborating organizations with appropriate consent as required by law and regulation.	(D)
Kev	y: (D) indicates that documentation is required;	



December 20, 2023

46.	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC submits data as required for CCBHC certification. Note: See 5.a.3 and 5.a.4 of the Substance Abuse and Mental Health Services Agency Certified Community Behavioral Health Clinic Certification Criteria for specific details.	0
47.	For Certified Community Behavioral Health Clinics (CCBHCs): At a minimum, data for each individual served and service-level data includes a unique identifier for the individual served, a unique clinic identifier, date of service, CCBHC-covered service(s) provided, units of services provided, and diagnosis. Note: See 5.a.3 of the Substance Abuse and Mental Health Services Agency Certified Community Behavioral Health Clinic Certification Criteria for specific details.	0
	02.01.01 e organization has a performance improvement plan. Element(s) of Performance for Pl.02.01.01	
3.	For Certified Community Behavioral Health Clinics (CCBHCs): The CCBHC has a quality improvement plan that addresses but is not limited to the following: - Suicide deaths of individuals served - Suicide attempts of individuals served - 30-day hospital readmission rates for psychiatric or substance use reasons - Fatal and nonfatal overdoses - All-cause mortality among individuals served - Reductions in emergency department use, rehospitalization, and repeated crisis episodes - Other events as defined by the state	0
Rig	ghts and Responsibilities of the Individual (RI) Chapter	
RI.	01.01.03	
	e organization respects the right of the individual served to receive information in a manner the individual lerstands.	
	Element(s) of Performance for RI.01.01.03	

Key: (D) indicates that documentation is required;



4.	For Certified Community Behavioral Health Clinics (CCBHCs): Documents or information necessary for an individual served to access CCBHC services (for example, registration forms, sliding-scale fee schedule, after-hours coverage, signage) are available online and in paper format in languages commonly spoken within the community served, taking into account differing literacy levels and the need for alternative formats. Such materials are provided in a timely manner at intake and throughout the time an individual is served by the CCBHC. The community needs assessment informs which languages require language assistance, to be updated as needed.	
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