

EVALUATION YEAR THREE TELEPHONE INTERVIEW QUESTIONS – STATE OFFICIALS

In each evaluation year, we will conduct semi-structured telephone interviews with state Medicaid and behavioral health officials in each demonstration state to gather information on demonstration progress at different stages of implementation. The focus of interviews will be adapted based on which evaluation questions will be answered during that evaluation year, and questions will vary between new and original demonstration states. We will tailor the interview protocol in advance of each interview to reflect information about the demonstration in that state. We have identified by name and color-coded questions or parts of questions below that are specific to new states (**blue text**) and original states (**red text**). The interviewer will transfer the information gathered from the interviews into an Excel template that organizes data by PAMA topic and corresponding research questions. The general protocol for telephone interviews with state officials is presented below.

A. Introduction

1. Interviewer introduction
 - a. Obtain verbal consent to record
2. Please describe your current role(s)/position(s) and responsibilities.

B. Demonstration Oversight

1. Could you please briefly share how implementation has been going for your state and CCBHCs since we last spoke in early 2023?
 - a. Does the state still have [number] CCBHCs participating in the demonstration? [If no] Why has the number changed?
 - b. What have been the key challenges and successes for the state in the last year? What about for the CCBHCs?
2. Has the state's role in demonstration implementation evolved since we last spoke with you? Please describe if so.
3. Do you have any updates to share since we last spoke regarding expansion of the CCBHC model through other funding mechanisms (or any new plans to do so)? (e.g., State Plan Amendments, 1115 waivers, CCBHC Expansion grants, other state legislative efforts/initiatives) What is the status/timing of these?
 - a. [For new SPAs/1115 waivers/other state-level initiatives]: Have you made any changes to the requirements of the CCBHC model? Are you retaining all of the required services and types of staff? Why?
 - b. [For new SPAs/1115 waivers/other state-level initiatives]: How will CCBHC financing and payment work under [initiative]? How will this compare to the current PPS?

C. Access to Care

1. Could you please update us on state and CCBHC activities to increase access to care since we last spoke with you in early 2023?
 - a. What kinds of technical assistance or guidance have the state or other groups provided this past year (if any)?
 - b. Has the state changed any requirements related to access since we last spoke?
 - c. How, if at all, has access changed?
2. Could you please reflect on how the CCBHC model affects consumers' use of behavioral health services? What about their use of physical health care?
 - a. Have utilization patterns changed? Do you think consumers are using behavioral and physical health services more or less than or in a different way than they would have if they were receiving care from a non-CCBHC behavioral health organization? Why?
 - b. Have referral patterns changed?
3. How are CCBHCs reaching and meeting the needs of children, adolescents, and families?

D. Scope of Services

1. Has the state established any new requirements or changed any existing requirements related to the scope of CCBHC services since we last spoke in early 2023? Why?
2. Have there been any major changes in the scope of services provided by CCBHCs? For example, have CCBHCs struggled to maintain any of the required services? Please describe if so.
3. Has the state provided any new guidance or support or made any new investments to help CCBHCs provide the required services since we last spoke with you?
 - a. [If yes]: What prompted those actions?
4. How does the scope of services provided by CCBHCs in your state compare with non-CCBHC behavioral health clinics in the same regions that are served by CCBHCs? What about those in other regions of the state? Do other non-CCBHC behavioral health organizations in the state provide this full scope of services?
 - a. How does this vary, if at all, by geographic area? (e.g., rural, urban, frontier)
 - b. Do CCBHC clients continue to receive services from other behavioral health providers in the community? What types of services are they not receiving from CCBHCs?
5. How are CCBHCs integrating crisis services with existing or new crisis service programs in their communities?
 - a. [\[Kentucky and Michigan\]](#) To what extent did CCBHCs offer crisis services themselves prior to the demonstration? Which services did CCBHCs generally need to add?

- b. Which types of crisis services are offered commonly by non-CCBHCs?
 - i. Are these mostly DCOs?
 - ii. What have been the successes and challenges of coordinating crisis services?
- c. How do CCBHCs support or interact with the 988 crisis line?
- d. Have CCBHCs made any major changes in the provision or coordination of crisis services [KY/MI: over time/original states: since the end of the second demonstration year]? Please describe if so.
- e. How has the CCBHC model changed the crisis service system in your state, if at all?
 - i. Have you begun to see any differences in consumer outcomes?
- f. How did the planning grants for mobile crisis intervention through the American Rescue Plan affect CCBHCs?

E. Quality of Care

- 1. What has the process been like for states and CCBHC in terms of reporting the required quality measures since we last spoke in early 2023?
 - a. What has hindered reporting?
 - b. What has facilitated reporting?
- 2. How has the state supported CCBHCs' continuous QI activities since we last spoke?
 - a. How has the state used performance on quality measures to help clinics improve quality since we last spoke?
 - b. Have the state or other groups offered any technical assistance related to quality?
- 3. Has the state used quality measure performance to change any policies since we last spoke? Please describe if so.
- 4. How have CCBHCs' EHR/HIT systems helped to deliver higher-quality care and care coordination, if at all?
 - a. Has the state provided any support to clinics in implementing new or improving existing EHR/HIT systems in the past year?
 - b. What have been the key challenges and successes with EHR/HIT since we last spoke?
 - c. What have been the lessons learned so far?
 - d. How were CCBHC's EHR/HIT systems or changes to these systems financed?

F. Payment System Changes and Costs

- 1. Did the state rebase its PPS rates or adjust them for inflation in the last year?

- a. [If yes]: What led to the decision to do so? How did you use cost reports for rebasing?
2. Has the way the state approaches the rate setting process changed in the past two years?
3. [EXCEPT Oregon] Have there been any changes to the way the state is awarding quality bonus payments in the last two years? For example, have there been any changes to measures or measure thresholds used or the extent reporting or improving on a measure factors into your approach?
4. Have there been any challenges with paying CCBHCs or managed care plans that are covering CCBHC services?
5. Did you need to make new appropriations to fund the demonstration since we last spoke? How much is currently allocated for the demonstration?
6. [Managed care states] Did the state fully incorporate PPS rates into capitation payments or elect to make wraparound payments to CCBHCs?
 - a. [States that incorporated] Did the state make any adjustments to the portion of the state's capitation rate associated with the CCBHC demonstration?
 - b. [Wraparound payment states] Did the state make wraparound payments to CCBHCs in the past year?
7. Have there been any changes in the state that would affect the way CCBHCs are submitting Medicaid claims for clients in CCBHCs?
8. If state Medicaid costs increased as a result of the demonstration, were those increases fully covered by the enhanced demonstration FMAP?
9. Have you been able to determine whether the state has seen any savings as a result of the demonstration?
 - a. Were these savings experienced in the Medicaid program? Or other service systems (behavioral health, criminal justice, etc.)?

G. Cross-cutting

1. Would you like to share any updates on how your state is integrating CCBHCs with other policy initiatives?

Probe for the following and implications for funding, overlap, and care coordination, as relevant:

 - 1115 waivers, health homes (and status/timing of these)
 - SAMHSA CCBHC grants
 - Increased funding for home and community-based services (HCBS) through the American Rescue Plan [Outcomes of these investments]
 - Individual Placement and Support services (model of supported employment for people with behavioral health needs)

H. Interviewee Feedback/Open Discussion

1. What have we missed? What else do we need to know that we haven't asked you?