Report on Certified Community Behavioral Health Clinics (CCBHC)

Implementation of Certified Community Behavioral Health Clinics

Quarter Ending June 30, 2026

DEPARTMENT OF
PUBLIC HEALTH &
HUMAN SERVICES

TABLE OF CONTENTS

EXECUTIVE SUMMARY

Certified Community Behavioral Health Clinics (CCBHCs) are a new model of care designed to expand access to a comprehensive range of mental health and substance use services. Established by the Excellence in Mental Health and Addiction Act, enacted on April 1, 2014, as part of the Protecting Access to Medicare Act of 2014, CCBHCs are required to provide a defined set of services, including crisis mental health services, targeted case management (TCM), and peer support. CCBHCs serve individuals regardless of diagnosis or insurance status and are supported through an enhanced Medicaid prospective payment system to ensure financial stability.

The Montana Department of Public Health and Human Services (DPHHS) secured a Substance Abuse and Mental Health Services Administration (SAMHSA) planning grant for calendar year 2025 to support the development and implementation of a CCBHC program in Montana. The purpose of the planning grant is to prepare an application for the CCBHC demonstration grant, which was submitted on April 1, 2026.

In May, DPHHS onboarded a CCBHC Program Specialist to support ongoing program development and implementation activities.

On May 28, 2026, Montana was officially awarded the CCBHC Demonstration Grant, with plans to launch Demonstration implementation with provisionally certified cohort 1 providers beginning October 1, 2026.

Through the planning grant, DPHHS engaged multiple Technical Assistance (TA) providers, including the Montana Public Health Institute (MTPHI), JG Research, and Health Management Associates (HMA), to support planning and implementation activities.

MTPHI and JG Research are responsible for reviewing existing needs assessment data and data infrastructure, identifying infrastructure gaps, and developing a comprehensive plan to meet grant reporting and evaluation requirements. Their scope of work also includes auditing current community-level evidence-based practices, assisting in developing dynamic quality improvement plans, and helping communities identify and collaborate with Designated Collaborating Organizations (DCOs). Additionally, they support the implementation of crisis response services that meet the requirements set by the Centers for Medicare and Medicaid Services (CMS).

HMA's primary role is to develop the Prospective Payment System (PPS) rate and the necessary Administrative Rules for certification, payment, and policy.

LEGISLATIVE FOUNDATION

The foundation for Montana's CCBHC initiative is rooted in two key legislative actions:

HB 574:

This policy bill, enacted in 2025, authorizes implementation of the CCBHC model in Montana. It requires DPHHS to establish a CCBHC program by October 1, 2026, and sets criteria for program implementation. The bill further requires DPHHS to monitor and evaluate CCBHC services, outcomes, and impacts, and to provide quarterly updates to legislative committees. Additionally, HB 574 directs DPHHS to develop an incentive program for clinics that demonstrate exceptional outcomes.

BEHAVIORAL HEALTH SYSTEM FOR FUTURE GENERATIONS

This state special revenue fund was created by HB 872, providing a $300 million generational investment to reform Montana's behavioral health and developmental disabilities service systems. The fund is managed by a commission that held 14 public meetings across the state to gather feedback and make recommendations. One of the 22 long-term recommendations from the commission is to "Expand and Sustain Certified Community Behavioral Health Clinics," demonstrating that the CCBHC program is a core component of this broader state initiative.

IMPLEMENTATION TIMELINE

- SAMHSA CCBHC Planning Grant Period: January 1, 2025, through December 31, 2025 (Grant Amount: $1 million)
- Provisional Certification of CCBHC Facilities: March 1, 2026
- CCBHC Demonstration Grant Submission Date: April 1, 2026
- CCBHC Demonstration Grant Award announced May 28, 2026
- Projected CCBHC Launch Date: October 1, 2026

PROCESS ON PLANNING GRANT TASKS

HHS continues to make significant progress in several areas of the planning grant to support the implementation of the demonstration grant beginning October 1st, 2026.

SERVICE REQUIREMENTS

The nine core CCBHC service requirements are reviewed on an ongoing basis to ensure integration into service delivery and cost reporting frameworks. The core CCBHC

services include crisis services; outpatient mental health and substance use services; person- and family-centered treatment planning; outpatient primary care screening and monitoring; TCM; psychiatric rehabilitation; peer and family support; and community-based mental health care for veterans.

CRISIS SYSTEM DEVELOPMENT

DPHHS and its TA providers have continued collaborative efforts with all the prospective CCBHC providers to design the structure for mobile crisis response (MCR) and crisis receiving services. Work this quarter focused on developing a tiered, population-based crisis model to ensure coverage across all 56 counties, while integrating existing crisis providers into planned CCBHC catchment areas. These efforts include coordination with current MCR teams and other key stakeholders throughout the state's crisis system. Recent discussions have shifted from exploring centralized versus decentralized approaches to finalizing a decentralized, tiered system that aligns crisis-response expectations with the needs and resources of Montana's diverse communities.

As the model has progressed, this quarter's efforts have focused on decision-making and on preparing providers for the implementation of the tiered crisis response and crisis receiving structures. This includes aligning staffing expectations, clarifying minimum service levels by county population, and outlining how crisis drop-in and crisis receiving sites will support access across both CCBHC and non-CCBHC regions. While some operational details are still being finalized, the overall framework now provides a clear, scalable approach that fits Montana's geography and various community needs.

PROVIDER MANAGEMENT

DPHHS has continued to facilitate bi-weekly meetings with all the prospective CCBHC providers and contracted TA providers. These meetings support prospective providers in real-time throughout the planning grant process, ensuring that all aspects of service provision and reporting requirements are addressed. Discussion topics to date have included, but are not limited to, data tracking and submission requirements; themes and findings from CCBHC-focused interviews with peer states; PPS rate development; MCR services; TCM services; person- and family-centered treatment planning; and peer and family support services.

PROVIDER MANUAL

DPHHS has been working with the contracted provider (HMA) to develop a CCBHC Provider Manual. The Provider Manual is designed to serve as the operational guide for

CCBHCs in Montana, providing a clear understanding of and guidance on implementing all required service components. The manual will include requirements specific to the nine core CCBHC services, as well as those related to needed infrastructure/capacity, such as staffing, staff training, and health information technology. The Provider Manual will be aligned with HB 574 and the SAMHSA CCBHC criteria.

PPS RATE DEVELOPMENT

As part of the Montana DPHHS application to participate in the Section 223 CCBHC Demonstration Program, the PPS-1 methodology has been selected for implementation. This methodology establishes a fixed, daily cost-based rate intended to reflect total allowable CCBHC service costs per allowable daily visit for each CCBHC. DPHHS has elected to use the CMS CCBHC cost report as the template for determining each PPS-1 rate and has separately included a sample completed version demonstrating one of the draft rates for DY1 within the application.

PLANNED ACTIVITIES AND NEXT STEPS

- Publish provider manual – Projected date September 15, 2026
- CCBHC website development
- MMIS system updated to provide payment for CCBHCs
- Provider Site Visits
- Develop an incentive program per HB 574
- Ongoing technical assistance to providers to reach certification compliance standards.