
CHAPTER 11: CERTIFIED COMMUNITY BEHAVIORAL HEALTH CLINICS

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PROVIDER REQUIREMENTS**Provider Qualifications****Clinic**

The Certified Community Behavioral Health Clinic (CCBHC) must meet all provider qualifications outlined in this section and comply with federal and state laws and regulations. Clinics are required to maintain documentation and verification of compliance. Documentation must be readily accessible, and available for review upon request by the Louisiana Department of Health (LDH) or its designees.

Accreditation Requirements

The CCBHC shall obtain and maintain accreditation as a CCBHC by the Commission on Accreditation of Rehabilitation Facilities (CARF), the Council on Accreditation (COA) or The Joint Commission (TJC), or submit verifiable documentation confirming that an application for accreditation has been submitted to one of these approved accrediting bodies, including proof of payment. Providers who submit documentation of a pending application must obtain full accreditation within 18 months from the date of initial application submission.

Any denial, loss of, or any negative change in accreditation status must be reported in writing immediately upon notification to and each Managed Care Entity (MCE).

Certification

To operate as a CCBHC, a provider must be certified by LDH HSS as a CCBHC. Providers should refer to the Louisiana CCBHC Certification Guide for detailed instructions, timelines, and required documentation.

Provider Enrollment

CCBHCs shall be enrolled in Louisiana Medicaid as a CCBHC provider when enrollment is available and have a written contract with each MCE.

Criminal Background Checks

The CCBHC must arrange for and maintain documentation that persons prior to employment (or contracting, volunteering, or as required by law) undergo and pass criminal background checks, including sexual offender registry checks.

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Criminal background checks must be conducted by an agency authorized by the Office of State Police, in accordance with the following:

1. Behavioral Health Services Provider (BHSP) licensing regulations established by the Louisiana Administrative Code (LAC) Title 48, Part I, Subpart 3, Chapter 56, which includes those for owners, managers, and administrators; any individual treating children and/or adolescents; and any non-licensed direct care staff;
2. La. R.S. 40:1203.1 et seq. associated with criminal background checks of un-licensed workers providing patient care;
3. La. R.S. 15:587, as applicable; and
4. Any other applicable state or federal law.

Background checks performed more than 90 days prior to the employment start date are not valid. The CCBHC shall not hire individuals failing to meet criminal background check requirements and regulations. Individuals who fail to meet criminal background check requirements shall not be hired, contracted, or utilized in any capacity. Documentation of completed background checks must be maintained in the individual's personnel file.

Exclusion Screening

CCBHCs must review the Office of Inspector General (OIG) List of Excluded Individuals and Entities (LEIE) and the LDH State Adverse Actions website before hiring or contracting with any individual who will perform services compensated by Medicaid or Medicare funds—including licensed and non-licensed staff, interns, and contractors. Once employed, CCBHCs must conduct monthly checks to ensure that no employee or contractor has been excluded from Medicaid or Medicare participation or has findings of abuse, neglect, or exploitation. CCBHCs are strictly prohibited from knowingly employing or contracting with individuals listed on either exclusion registry.

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Community Needs Assessment and Staffing Plan

As part of the process leading to certification and recertification, a community needs assessment and a staffing plan that is responsive to the community needs assessment must be completed and documented.

CCBHCs are required to complete a community needs assessment to identify the needs of the community served. The community needs assessment ensures that clinic operations, staffing, and services are aligned with documented community needs.

The community needs assessment must be:

1. Completed prior to the submission of the CCBHC certification application;
2. Documented and maintained on file and made available upon request for recertification or program monitoring;
3. Updated at least once every three years, or more frequently if there are significant changes in population needs or the clinic's scope of services; and
4. Used to inform of the clinic's following:
 - a. Service hours;
 - b. Location(s);
 - c. Plans to ensure services are culturally and linguistically appropriate for the populations served;
 - d. Staffing plan;
 - e. Services provided directly by the CCBHC and through Designated Collaborating Organizations (DCOs);
 - f. Community partnerships; and
 - g. Outreach, engagement, and retention activities necessary to support inclusion and access for underserved individuals and populations.

The staffing plan must reflect the community needs assessment findings and demonstrate how the CCBHC will maintain adequate capacity, appropriate staffing, and cultural and linguistic

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competence to meet the identified community needs. The staffing plan shall be reviewed and updated in conjunction with the community needs assessment.

The CCBHC's service area shall align with the geographic service area of their BHSP license in which the clinic is located and establishes the authorized service area the CCBHC is required to serve. The CCBHC must ensure access to services for all individuals residing within this region, regardless of ability to pay, diagnosis, or insurance status.

Drug Free Workplace

Each CCBHC must establish and maintain written policies and procedures to ensure an alcohol- and drug-free workplace. These policies must include staff drug testing protocols and procedures for addressing violations related to substance use. (See Appendix E).

Provider Responsibilities

The CCBHC must comply with the following responsibilities:

1. The CCBHC must comply with all responsibilities as outlined in the licensing regulations, including LAC Title 48, Part I, Subpart 3, Chapter 56;
2. All services shall be delivered in accordance with federal and state laws and regulations, the Medicaid Provider Services Manual and other notices or directives issued by LDH;
3. The CCBHC shall have the capacity and resources to deliver the full array of required CCBHC services either directly or through Designated Collaborating Organizations (DCOs);
4. The CCBHC must abide by all staffing and training requirements and ensure that all staff possess the minimum requisite education, skills, qualifications, training, supervision, and coverage as set forth by their respective licensing authorities and in accordance with all applicable laws, rules and Medicaid policies;
5. The CCBHC shall provide services regardless of ability to pay, place of residence or diagnosis;

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6. The CCBHC has protocols that address management of the individual's on-going treatment needs beyond crisis services. Protocols may provide for agreements with clinics in other localities, allowing the CCBHC to refer and track individuals seeking non-crisis services to the CCBHC or other clinics serving the individual's area of residence;
7. All outreach efforts, collaborative agreements, and joint service activities must be documented and retained as part of the CCBHC's records;
8. The CCBHC shall maintain standard operating hours that include evening and weekend availability, as informed by the community needs assessment;
9. The CCBHC has published sliding fee discount schedule(s) on the CCBHC website, posted in the CCBHC waiting room and that are readily accessible to clients and their families. The sliding fee discount schedule is communicated in languages/formats appropriate for individuals seeking services who have Limited English Proficiency (LEP), literacy barriers, or disabilities;
10. The fee schedule(s) conform to state statutory or administrative requirements or to federal statutory or administrative requirements that may be applicable. Absent applicable state or federal requirements, the schedule is based on locally prevailing rates or charges and includes reasonable costs of operation;
11. The CCBHC has written policies and procedures describing eligibility for and implementation of the sliding fee discount schedule and are applied equally to all individuals seeking services;
12. The CCBHC must develop and maintain a comprehensive continuity of operations and disaster plan, ensuring the CCBHC is able to effectively notify staff, clients, and healthcare and community partners when a disaster/emergency occurs or services are disrupted;
13. The CCBHC has identified alternative locations and methods to sustain service delivery and access to behavioral health medications during emergencies and disasters. The plan also addresses health information technology (IT) systems security/ransomware protection and backup and access to these IT systems, including health records, in case of disaster;
14. The CCBHC participates in the Substance Abuse and Mental Health Services Administration (SAMHSA) Behavioral Health Treatment Locator. (See Appendix A);

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- 15. The CCBHC must monitor the effectiveness of language access services through client feedback and quality improvement processes; and
- 16. The CCBHC shall create and maintain documents to substantiate that all requirements are met.