
CHAPTER 11: CERTIFIED COMMUNITY BEHAVIORAL HEALTH CLINICS

SECTION 11.7: DESIGNATED COLLABORATING ORGANIZATIONS

PAGE(S) 1

DESIGNATED COLLABORATING ORGANIZATIONS**Designated Collaborating Organization Requirements**

A Designated Collaborating Organization (DCO) is an external entity that is not under the direct supervision of the Certified Community Behavioral Health Clinic (CCBHC), but has a formal, written contract with the CCBHC to deliver one or more (or elements of) of the required core services. The CCBHC provides oversight of the DCO to ensure that the CCBHC services delivered through a DCO conform to the relevant applicable CCBHC criteria and other quality and reporting standards. The formal relationship is evidenced by a contract, Memorandum of Agreement (MOA), Memorandum of Understanding (MOU), or such other formal, legal arrangements describing the parties' mutual expectations and establishing accountability for services to be provided and funding to be sought and utilized. The formal relationship between CCBHCs and DCOs creates the platform for seamlessly integrated services delivered across providers under the umbrella of a CCBHC. DCO agreements shall include provisions that assure that the required CCBHC services that DCOs provide under the CCBHC umbrella are delivered in a manner that meets the standards set in the CCBHC certification criteria. To this end, DCOs are more than care coordination or referral partners, and there is an expectation that relationships with DCOs will include more regular, intensive collaboration across organizations than would take place with other types of care coordination partners.

From the perspective of the client and their family members, services received through a DCO should be part of a coordinated package with other CCBHC services and not simply accessing services through another provider organization. To this end, the DCO agreement shall take active steps to reduce administrative burden on clients and their family members when accessing DCO services through measures such as coordinating intake process, coordinated treatment planning, information sharing, and direct communication between the CCBHC and DCO to prevent the client or their family from having to relay information between the CCBHC and DCO. The CCBHC and their DCOs are further directed to work towards inclusion of additional integrated care elements (e.g., including DCO providers on CCBHC treatment teams, collocating services). Regardless of DCO relationships entered into, the CCBHC maintains responsibility for assuring that clients from the CCBHC receive all nine services as needed in a manner that meets the requirements of the CCBHC certification criteria.