

CBHC Model Assumption Summary

Executive Office of Health and Human Services

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CBHC Methodology: Summary and Rates

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Methodology for CBHC Rate Setting: Rates were set by estimating total CBHC costs, including 24/7 operation, and estimated annual volume

Non-Crisis Services

	Managed Care minimum rate per Encounter		
Adult CBHC	\$233.90		
Youth CBHC	\$241.86		

Crisis Services

Managed Care Minimum Rates					
		Site-Based	Mobile Evaluation		
	First Day Rate (includes all day 1 services)	\$632.08	\$931.49		
Adults	Post Initial Encounter Master's-Level Clinician	\$39.70	\$44.33		
Addits	Post Initial Encounter Para/Bachelor's-Level Staff	\$30.57	\$33.94		
	First Day Rate (includes all day 1 services)	\$632.08	\$978.06		
Youth	Post Initial Encounter Master's-Level Clinicia		\$44.33		
Toutil	Post Initial Encounter Para/Bachelor's-Level Staff	\$33.94	\$33.94		

CBHC Methodology: Assumptions and Inputs



Data Inputs: UFR data, RFI responses, BLS benchmarks, and clinical input from OBH and DMH were used to determine cost and volume estimates for services provided through Managed Care

CBHC Visit Assumptions:

- Adult Non-Crisis Services: 30 minutes for psychiatrist consult, 1 hour for all other services
- Children's Non-Crisis Services: 45 minutes for psychiatrist consult, 1 hour for all other services
- Adult Crisis Services: 2.4 hours for on-site encounters; 3.5 for community encounters
- Adult Crisis Post Initial Encounter: 3 days
- Youth Crisis Services: 2.52 hours for on-site encounters; 3.68 hours for community encounters
- Youth Crisis Services Post Initial Encounter: 7 days

Volume Assumptions:

- Annually, CBHC will have 36,000 adult and 10,000 youth visits, an average of 125 per day.
- 40% of psychiatry visits are delivered the same day as OP BH visit in CBHC model.
- CBHCs to perform ~4,300 crisis service interventions annually, an average 12 per day.

<u>Salary/cost</u>: Salary assumptions between 50th and 100 BLS percentile, average at 75th percentile, and non-wage costs align with BLS standards (24% payroll/fringe and 20% total admin costs)

<u>Staff levels</u>: Based on comparison of historical staffing levels to CBHC clinical model requirements (i.e., assumes clinical staff will have only 55% of their work hours available for billable services)

Additional Notes on Future Adult Site-Based Crisis Rates

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The current rate structure for ESP does not separate payment for required post-stabilization care. The new rate structure addresses this by *creating mechanisms for providers to bill for follow-up services separately*.

Current State Managed Care Billing

- The current adult ESP floor rate is an encounter rate <u>without a separate mechanism for</u> <u>stabilization/follow up billing</u>. Current state requires the ESP provide stabilization/follow-up support, as outlined in the Performance Specifications.
 - For example, in the current state in managed care: an adult ESP community-based location evaluation is paid at \$744.23, and an adult ESP mobile evaluation is paid at \$819.64.
 - Both rates include the initial evaluation and stabilization/follow-up services.

Future State Managed Care Billing

- <u>Initial (first day) encounter</u> will have the following floor rates:
 - For a site-based Adult Mobile Crisis Intervention (AMCI): \$632.08
 - For mobile AMCI: \$931.49
- Stabilization (next day and beyond) services will have the following floor rates (using 15-minute units):
 - For site-based follow up: \$39.70 for master's-level clinicians and \$30.57 for paraprofessional or bachelor's level staff
 - For mobile follow up: \$44.33 for master's-level clinicians and \$33.94 for paraprofessional or bachelor's level staff

FFS ESP Billing: The current FFS encounter rate is \$505.53 for all encounters. FFS ESP rates are currently under review, and EOHHS intends to propose a similar structure as managed care in an upcoming regulation amendment.

Note: Billing will be based on the location of the staff, not the location of the Member. Follow-up will not be based on the type of initial encounter but instead the location of the staff member billing the follow-up services.

Case Vignette: Crisis Billing for Adults in Managed Care

Site-Based (Community-based) Example: On Day 1, a 26-year-old member receives ESP services at a site-based location, where the ESP team performs an evaluation. The ESP team determines that the individual requires an IP level of care and conducts a search for an IP bed. The member is stable enough to wait at home. On Day 2, the ESP team (master's-level clinician) does a 60-min re-assessment and determines the member still meets 24-hour level of care criteria; bachelor's-level staff does a 30-min follow up visit with the individual and spends 45 minutes locating a bed. On Day 3, the ESP team (master's-level clinician) does another 60-min re-assessment and determines the member still meets 24-hour level of care, so the bachelor's-level staff spends 1 hour locating a bed, providing stabilization support, and facilitating placement to IP care.

	Day 1	Day 2	Day 3	Total Crisis Encounter
Current State	\$744.23**	\$0	\$0	\$744.23
Future State	\$632.08	\$311.65	\$281.08	\$1,224.81

Mobile Example: On Day 1, a 47-year-old member receives mobile ESP services at their home. The ESP team performs an evaluation and determines that the individual requires OP services. On Day 2, the ESP team (a peer) does a 90-min follow up visit with the member in their home and completes a warm hand off to OP services at the CBHC*.

	Day 1	Day 2	Total Crisis Encounter
Current State	\$819.64**	\$0	\$819.64
Future State	\$931.49	\$203.64	\$1,135.13

^{*}CBHC OP triggers bundle: \$233.90

^{**}Current state rates reflect relevant floor rates in managed care

CBHC Methodology: Non-Crisis Services



Staffing and administrative costs included in encounter rate

Methodology

- The methodology adopts a payroll and fringe rate of 24.24% to encourage use of benefitted employees to support staff retention.
- The methodology includes 19.84% in direct administrative expenses to account for CBHC requirements, including improvements to EHRs, additional trainings, and increased translation costs. This represents an additional 4.5% over the median administrative expenses reported in the RFI responses.
- The methodology utilizes an indirect administrative expense rate of 16.58%. This rate aligns to the median indirect administrative expense rate percentages reported in the RFI Responses.

		Adult CBHC OP Costs*	Youth CBHC OP Costs*	CBHC OP Costs*
Staffing Subtotal		\$4.8M	\$1.4M	\$6.3M
Payroll Taxes	8%	\$387K	\$115K	\$502K
Fringe Benefits	16.24%	\$786K	\$234K	\$1M
Total Staffing	24.24%	\$6M	\$1.8M	\$7.8M
Indirect Costs	19.84%	\$1.2M	\$356K	\$1.5M
Subtotal		\$7.2M	\$2.2M	\$9.3M
Portion of Organization Admin Attributed to CBHC	16.58%	\$1.2	\$356K	\$1.6M
Total Model CBHC Clinic Costs		\$8.4M	\$2.5M	\$10.9M

^{*} Numbers are rounded from original figures

CBHC Methodology: Non-Crisis Services



Encounter rate includes the staffing costs assumptions within CBHCs including: increased salaries and increased number of coordinators, clinicians, physicians, and APRNs. Each CBHC may have different staffing models, costs, or salaries, this chart is illustrative. Assumptions based on a 24/7 model that will assume staff supporting "Crisis" and "Non Crisis" may be shared in allowed circumstances.

Positions	Serving Adults	Serving Children	Salary	Adult CBHC OP Costs	Child CBHC OP Costs	Total CBHC OP Costs
Clinical Director	0.8	0.2	\$125,736.64	\$96,817.21	\$28,919.43	\$125,736.64
Medical Director	0.6	0.2	\$337,518.73	\$207,911.54	\$62,103.45	\$270,014.98
Assistant Director	1.5	0.5	\$58,654.91	\$90,328.56	\$26,981.26	\$117,309.82
Clinical Supervisors	3.5	1.0	\$84,866.36	\$294,061.95	\$87,836.69	\$381,898.64
Physicians/Psychiatrists	1.5	0.5	\$333,871.64	\$514,162.32	\$153,580.95	\$667,743.27
NPs/PAs	2.3	0.7	\$146,339.82	\$338,044.98	\$100,974.47	\$439,019.45
RNs	1.5	0.5	\$102,874.73	\$158,427.08	\$47,322.37	\$205,749.45
Psychologists	0.8	0.2	\$99,450.55	\$76,576.92	\$22,873.63	\$99,450.55
Masters-level Clinicians (Licensed & Unlicensed)	27.3	8.2	\$69,678.41	\$1,904,659.34	\$568,924.22	\$2,473,583.56
Care Coordinators/Outreach	6.9	2.1	\$50,833.64	\$352,277.10	\$105,225.63	\$457,502.73
Clerical Staff	6.9	2.1	\$40,134.09	\$278,129.25	\$83,077.57	\$361,206.82
Security	2.1	0.6	\$40,000	\$83,160.00	\$24,840.00	\$108,000.00
Medical Assistants/Phlebotomists	1.5	0.5	\$45,000	\$69,300.00	\$20,700.00	\$90,000.00
Dir. of Training/Practice Transformation	0.8	0.2	\$113,067.50	\$87,061.98	\$26,005.53	\$113,067.50
Training/Transformation Staff	0.8	0.2	\$77,500.00	\$59,675.00	\$17,825.00	\$77,500.00
QI/UM Director	0.8	0.2	\$107,250.00	\$82,582.50	\$24,667.50	\$107,250.00
QI Staff	0.4	0.1	\$75,000.00	\$28,875.00	\$8,625.00	\$37,500.00
EHR Specialist	0.4	0.1	\$100,000.00	\$38,500.00	\$11,500.00	\$50,000.00
Partnership Manager/Liaison	0.8	0.2	\$52,189.50	\$40,185.92	\$12,003.59	\$52,189.50
Milieu Manager	0.8	0.2	\$52,189.50	\$40,185.92	\$12,003.59	\$52,189.50
Staffing Subtotal	62.0	18.5	-	\$4,840,923	\$1,445,990	\$6,286,912

This staffing structure will allow for same-day access, extended hours, the provision of evidence-based practices, MAT, and enhanced care coordination, as described in Appendix A of the CBHC RFP.

CBHC Methodology: Crisis Services



Crisis encounter rate includes the staffing costs within CBHCs including: increased salaries and increased number of coordinators, clinicians, and APRNs. Each CBHC may have different staffing models, costs, or salaries; this chart is illustrative.

Note: Figures rounded to nearest dollar

Positions	FTE for AMCI/YMCI Services	Salaries	AMCI Staffing Costs
AMCI Director	1	\$125,737	\$125,737
Medical Director	0.2	\$337,519	\$67,504
Managers	3	\$95,000	\$285,000
Clinical Supervisors	2	\$84,866	\$169,733
Nurse Practitioner/PA	1	\$146,340	\$146,340
EMTs	3	\$41,105	\$123,315
Masters Level Clinicians (licensed and unlicensed)	15.5	\$69,678	\$1,080,015
Care Coordinators/Peers/Family Partners	10	\$50,000	\$500,000
Clerical Staff	1	\$40,134	\$40,134
Security	5	\$40,000	\$200,000
Staffing Subtotal			\$2,737,779
	Admin %		
Payroll Taxes	8%		\$219,022
Fringe Benefits	16.24%		\$444,615
Total Staffing	24.24%		\$3,401,416
Indirect Costs	19.84%		\$674,901
Portion of Organization Admin Attributed to CBHC	16.58%		\$675,854
Total Model CBHC Emergency Program Costs			\$4,752,171

This staffing structure will allow for same-day access, extended hours, the provision of evidence-based practices, MAT, and enhanced care coordination, as described in Appendix A of the CBHC RFP.