

# Crosswalk of SAMHSA's Certified Community Behavioral Health Clinic (CCBHC) Criteria Requirements with NCQA's CCBHC Criteria Crosswalk



Note: The CCBHC criteria below are paraphrased. For the complete language, please visit this site: [https://www.samhsa.gov/sites/default/files/programs\\_campaigns\\_ccbhc\\_criteria.pdf](https://www.samhsa.gov/sites/default/files/programs_campaigns_ccbhc_criteria.pdf)

Key: **Shared evidence**, **Site-Specific evidence**, Criteria included in previous requirement

Note: DP = Documented Process and EOI = Evidence of Implementation

SAMHSA Requirements	NCQA CCBHC Criteria	DP	EOI	Report	Front Matter
<b>Requirement 1: Staff</b>					
1.a.1: State needs assessment on population and staffing (pre-certification)	ST 01: Community Needs Assessment.	X	X		
1.a.2: The staff is appropriate for the CCHBC	ST 02: Staffing Plan		X		
1.a.3: There is an appropriate management team at the CCBHC	ST 03: Management Team		X		
1.a.4: Malpractice insurance	ST 04: Liability/Malpractice Insurance				X
1.b.1: Licensure/Credentialization	ST 05: Licensure/Credentialing				X
1.b.2: Licensure/Credentialed extended staff	ST 06: Appropriate Staff		X		
1.c.1: Cultural competency training of staff	ST 07: Staff Training	X	X		
1.c.2: Assess competency of skills of staff					
1.c.3: Documents staff training					
1.c.4: Qualified staff trainers					
1.d.1: Access for patients with language disabilities	ST 08: Cultural and Linguistic Training	X	X		
1.d.2: Translation services					
1.d.3: ADA compliant for language needs					
1.d.4: Documents in needed languages	ST 09: Information Available	X	X		
1.d.5: HIPAA	ST 10: Privacy Requirements				X
SAMHSA Requirements	NCQA CCBHC Criteria	DP	EOI	Report	Front Matter
<b>Requirement 2: Availability and Accessibility of Services</b>					
2.a.1: Safe comfortable environment	AAS 01: Safe Access to Care	X	X		
2.a.2: After-hours appointments					
2.a.3: Locations that are accessible to patients					
2.a.4: Provides transportation or vouchers					
2.a.5: Alternative appointments					
2.a.6: Outreach for benefits					
2.a.7: State standards					
2.a.8: Disaster plan in place					
2.b.1: Timely access	AAS 02: Timely Access	X	X		
2.b.2: Updated treatment plan	AAS 03: Person-Centered Treatment Plan		X		
2.b.3: Timely access	AAS 02: Timely Access				
2.c.1: Crisis management 24/7	AAS 04: Crisis Management	X	X		
2.c.2: Policy and procedures on services					
2.c.3: How to access services					
2.c.4: Relationships with local EDs					

2.c.5: Protocol for during and after a psychiatric crisis					
2.c.6: Plan for avoiding future crises					
2.d.1: No denials if inability to pay	AAS 05: No Refusal of Services	X	X		
2.d.2: Sliding fee schedule					
2.d.4: Policy on fee schedules					
2.d.3: Fee schedules are legal	AAS 06: Fee Schedule				X
2.e.1: No denials if homeless	AAS 07: Access to Services	X			
2.e.2: Telehealth possible					
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<b>Requirement 3: Care Coordination</b>					
3.a.1: Coordinates care with physical and social services	CC 01: Care Coordination	X	X		
3.a.2: HIPAA					
3.a.3: Confirms appointments were kept					
3.a.4: Crisis plans for patients	CC 03: Crisis Plan Development		X		
3.a.5: PDMP	CC 04: Prescription Drug Monitoring Program Consultation		X		
3.a.6: Patient chooses their provider	CC 01: Coordination of Care				
3.a.7: Assist in accessing benefits and enroll in programs					
3.b.1: Electronic medical record	CC 11: Health IT Systems		X		
3.b.2: QI					
3.b.3: Collect certain information in structured fields	CC 12: Certified Health IT Systems		X		
3.b.4: HIPAA	CC 05: Privacy and Confidentiality				X
3.b.5: Health information exchange	CC 13: Health IT Plan	X			
3.c.1: Care coordination with FQHCs and RHCs	CC 06: Partnerships With FQHCs and RHCs		X		
3.c.2: Care coordination with other settings (in patient, detox, etc)	CC 07: Partnerships With Behavioral Health Providers	X	X		
3.c.3: Care coordination with community settings	CC 08: Partnerships With Community Organizations		X		
3.c.4: Care coordination with Veteran's Affairs	CC 09: Partnerships With the DVA		X		
3.c.5: Care coordination with acute inpatient, EDs, urgent care	CC 10: Partnerships With Hospitals	X	X		
3.d.1: Treatment Team	CC 02: Interdisciplinary Treatment Tea	X	X		
3.d.2: Interdisciplinary team					
3.d.3: DCO coordination					
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<b>Requirement 4: Scope of Services</b>					
4.a.1: General services	SCS 01: CCBHC Provided Services		X		
4.a.2: Services not provided by the CCBHC are provided by a DCO	SCS 09: Freedom of Provider Choice	X			
4.a.3: Grievance procedures	SCS 10: Grievance Procedures	X			
4.a.4: DCO has same quality as CCBHC	SCS 09: Freedom of Provider Choice				
4.b.1: Services aligned with ACA	SCS 08: Addressing Patient Needs		X		
4.b.2: Recognition of cultural needs					
4.c.1: Provides timely crisis BH services	SCS 03: Coordination of Crisis Services		X		
4.d.1: Screening, assessment and diagnosis of BH	SCS 11: Patient Information Management		X		
4.d.2: Screening and dx of BH is done in a timely manner					
4.d.3: Documentation of meds, reason for referral, etc.	SCS 02: Initial Evaluation		X		

4.d.4: Diagnosing and treatment planning within 60 days	SCS 04: Comprehensive Evaluation		X		
4.d.5: Extent of evaluation					
4.d.6: Treatment even if not included in cqms	SCS 05: Person-Centered Treatment Planning		X		
4.d.7: Validated screening tools					
4.d.8: Substance Use Disorder Intervention	SCS 12: Substance Use Disorder Intervention	X			
4.e.1: Directly provides treatment planning	SCS 06: Treatment Planning				X
4.e.2: Individualized patient plan	SCS 07: Individualized Treatment Plan		X		
4.e.3: Use of consumer assessments					
4.e.4: Personalized treatment plan					
4.e.5: Treatment plan on shared decision approach					
4.e.6: Consultation for special emphasis conditions					
4.e.7: Treatment plan contains advanced wishes					
4.f.1: Provides outside referrals when necessary	SCS 13: Outpatient Behavioral Healthcare Services	X			
4.f.2: States provide a minimum number of evidence-based practices					
4.f.3: Age-appropriate treatment plans					
4.g.1: Primary care screening	SCS 14: Primary Care Services	X	X		
4.g.2: Screening tools for physical health					
4.g.3: Ongoing primary care monitoring					
4.h.1: Case management	SCS 15: Targeted Case Management	X			
4.i.1: Psychiatric rehab services	SCS 16: Psychiatric Rehabilitation Services	X	X		
4.j.1: Peer-support and coaches	SCS 17: Peer Support Services		X		
4.k.1: Care for Armed Forces and veterans	SCS 18: Care for Veterans	X	X		
4.k.2: Ask if served in Armed Forces					
4.k.3: Coordination of SUD and MH services for veterans					
4.k.4: Principal MH provider for veterans					
4.k.5: Recovery-oriented services for veterans					
4.k.6: Military cultural competence					
4.k.7: BH treatment plan for veterans					
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<b>Requirement 5: Quality and Other Reporting</b>					
5.a.1: Ability to collect, report, and track data	QI 01: Data Reporting, Collection and Tracking			X	
5.a.2: Annual reporting					
5.a.3: Access data from DCO					
5.a.4: Data accessed through Medicaid claims and encounter data					
5.b.1: CQI	QI 02: Continuous Quality Improvement Plan			X	
5.b.2: Report suicide attempts, hospital admissions					
5.b.3: Data-driven CQI plan					
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<b>Requirement 6: Organizational Authority, Governance, and Accreditation</b>					
6.a.1: Statutory criteria	OGA 01: Organizational Authority				X
6.a.2: Indian health	OGA 02: Arrangements With Indian Health Service		X		
6.a.3: Financial audit	OGA 03: Annual Financial Audit				X
6.b.1: Board of directors	OGA 04: Governance	X	X		
6.b.2: Governing board size					
6.b.3: Justify if can't meet criteria					
6.b.4: Responsive to needs of consumers					

CCBHC Requirements to NCQA CCBHC Criteria Crosswalk

6.c.1: Adhere to state's accreditation standards	OGA 05: Accreditation				X
6.c.2: States encourage accreditation	OGA 06: Expansion Grant Program				X
6.c.3: Independent Accrediting body	OGA 07: Independent Accrediting body				X