

## COVID-19 UPDATES

### CBC RECEIVES ROBIN HOOD FOUNDATION GRANT

As CBC continues to seek funding to enhance COVID-19 testing and medical linkages for low-income New Yorkers with behavioral health conditions, it was recently the recipient of a \$150K award from the [Robin Hood Foundation](#). These funds and programming will align with CBC's recent [Substance Abuse and Mental Health Services Administration](#) (SAMHSA) COVID Emergency Award by bolstering efforts to comprehensively screen for COVID-19 and ensure a link to primary care.

Under the grant, CBC will partner with [Project Hospitality](#) and [Association to Benefit Children](#) to provide COVID-19 screenings for clients and community members. Following the screening process, clients and community members will be linked to concrete services addressing the social determinant of health-focused needs identified from the COVID-19 screening tool. The Robin Hood grant will cover Staten Island, East Harlem and the South Bronx—all hard hit, hot-spot areas impacted by COVID-19 due to ongoing social inequities that limit access to care.

## NEW HIRES

### CBC WELCOMES NEW STAFF

As CBC staff continues to work remotely, its virtual office continues to expand. Since this spring, CBC has made four new hires—including three in the past month—each of whom brings a depth of experience and advocacy for behavioral health to their new role.

- **Mohammad Usman**, PhD, joined CBC in April as its new Director of Technology & Data Analytics. Dr. Usman's previous work has centered on using data and research to demonstrate the positive impact of community-based organizations on improving social determinants of health. While in graduate school, he co-founded a U.K.-based charity that served homeless adults in the area.
- **Bianca Nguyen**, MD, MPH, has joined CBC as part of the [Columbia Public Psychiatry Fellowship Program](#). Dr. Nguyen recently completed her psychiatry residency training at [New York Presbyterian](#) (Columbia Campus) / [New York State Psychiatric Institute](#), where she served as Chief Resident. During residency, she continued her interests in teaching and medical education, focusing research and writing on psychiatry training, especially as it pertains to integrated care and improving the physical health of patients with severe mental illness.
- **Suzie Jean-Baptiste**, MHA, CPC, has joined CBC as its new Revenue Cycle Management Director. Ms. Jean-Baptiste has fifteen years' experience

in reimbursement/revenue cycle management in medical, dental, behavioral health, claims analysis, billing audit, project management, staff training and development.

- **Ramon (Ray) Arrendell**, CPA, MST, has joined CBC as its new Controller. Mr. Arrendell has over 30 years of public and private accounting experience. He has provided audit, tax and consulting services for non-profits, small and mid-size companies and individuals.

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## IN THE NEWS...

### HEALTH PRIVACY RULE 42 CFR PART 2 REVISED

On July 13<sup>th</sup>, [SAMHSA](#) announced the adoption of the revised Confidentiality of Substance Use Disorder Patient Records regulation, 42 CFR Part 2.

The new rule advances the integration of healthcare for individuals with substance use disorders while maintaining critical privacy and confidentiality protections. Under Part 2, a federally assisted substance use disorder program may only disclose patient-identifying information with the individual's written consent as part of a court order (or under a few limited exceptions).

With the patient's consent, health care providers will more easily conduct quality improvement, claims management, patient safety, training and program integrity activities. The ease of sharing information

among providers will enable better, higher-quality care for those with substance use disorders. The final rule is available via the [Federal Register](#), while [SAMHSA's Fact Sheet](#) outlines what has and hasn't changed.

## BEHAVIORAL HEALTH & SUBSTANCE ABUSE PARITY COMPLIANCE

CBC's colleagues at [Sachs Policy Group](#) have provided the following update and analysis of proposed regulations from the [New York State Department of Financial Services](#) (DFS) and the [New York State Department of Health](#) (DOH) that would require covered insurance plans to establish a compliance program for behavioral health parity requirements. Insurers are obligated under the federal Mental Health Parity and Addiction Equity Act of 2008 (MHPAEA) as well as state law to provide comparable coverage to their members for benefits that treat mental health and substance use disorders. These regulations apply to Article 42 accident and health insurers (as regulated under Article 32 of the Insurance Law), Article 43 not-for-profit insurers, and Article 44 health maintenance organizations.

Under the proposed rule, each insurer's compliance program would establish corporate governance for parity compliance, identify discrepancies in coverage of services for the treatment of mental health conditions and substance use disorder and ensure appropriate identification and remediation of improper practices.

Insurers would be required to establish written policies and procedures for the compliance program's management, monitoring and operations, including identification and remediation of improper practices, training and education for employees and directors and methods for reporting parity compliance issues, among other requirements. Prohibited practices that must be remediated within 60 days of discovery include:

- Utilization review policies that use different standards to determine the level of documentation for mental health or substance use disorder benefits versus medical or surgical benefits;
- Requirements for preauthorization, concurrent, or retrospective utilization review for a higher percentage of mental health or substance use disorder benefits in the absence of defined clinical or quality triggers;
- Implementation of a methodology for developing and applying provider reimbursement rates for mental health or substance use disorder benefits that is not comparable or is applied more stringently than the methodology for developing and applying provider reimbursement rates for medical or surgical benefits;
- Implementation of claim edits or system configuration that provide for higher rates of approval through auto-adjudication for claims for inpatient medical or surgical benefits than for inpatient mental health or substance use disorder benefits.

Governor Cuomo issued a [press release](#) that outlines the components of the proposed regulations and highlights his support, and that of several other State leaders, for ensuring that New Yorkers have access to comprehensive services and supports to address substance use and mental health needs.

Public comments will be accepted until September 7<sup>th</sup> for both the proposed [DFS regulations](#) and [DOH regulations](#).

## CHILDREN'S HCBS WAIVER AMENDMENT

NYS DOH has published the text of a draft amendment to the 1915(c) Children's Home and Community Based Services (HCBS) Waiver. If approved by the [Centers for Medicare and Medicaid Services](#) (CMS), the changes would take effect September 1st. In keeping with across-the-board Medicaid payment reductions enacted by the New York State 2020-21 budget, the draft amendment includes a 1.5 percent payment reduction for Children's HCBS delivered under this waiver.

Additional proposed changes to the HCBS program include:

- Expanding the definition of Licensed Practitioner of the Health Arts for the purposes of determining risk factors for eligibility.
- Adjusting the eligibility process to remove duplicate documentation of risk factors after initial eligibility determination.

- Updating the Adaptive and Assistive Technology service description to remove references to services animals that are not consistent with the ADA.
- Adding additional qualified practitioners who are authorized to deliver Palliative Care services, including Massage Therapy and Pain & Symptom Management.

NYS DOH is submitting requests to CMS to amend this waiver. Details on these proposed changes can be found in the [July 15<sup>th</sup> publication of the State's Public Notice](#). The draft amendment proposal is available for review [here](#).

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## CARE COORDINATION SERVICES

### HEALTH HOME NETWORK SURVEY

On July 27<sup>th</sup>, CBC sent all care management agencies (CMAs) a network survey, requesting information about respective specialty areas and language coverage by borough, apparent training needs and any other relevant feedback. The survey's goal has been to collect and share provider services that may help facilitate referrals and transfers within CBC's network, to address information gaps and training needs and to better understand how CBC can extend support to CMAs and overall membership.

### CANS-NY SUMMER 2020 INTRODUCTORY & SUPERVISORY TRAININGS

Due to public health considerations regarding the ongoing pandemic, [Child Adolescent Needs and Strengths](#)' (CANS-NY) summer trainings will be offered in webinar format this year. This format will still meet the NYS DOH's in-person training requirement. NYS DOH will work with lead Health Homes to determine a new completion target date for all new Health Home staff to comply.

The CANS-NY Introductory Training will be offered as a course that encompasses three distinct webinars. Each webinar will last no more than two hours. Trainees may select the date/time that works best for each of the three webinars. Registration and further information can be found [here](#).

### LIFTING OF MEMBER DISENROLLMENT RESTRICTIONS

Effective July 24<sup>th</sup>, NYS DOH has lifted the waiver for disenrollment restrictions for members that have been disengaged during the pandemic. Any members that were pending during the pandemic and have not been re-engaged should be un-pending in Relevant, CBC's HIT platform, and disenrolled by selecting Reason Code 14. Instructions of how to un-pend a member can be found [here](#).

## HCBS INFRASTRUCTURE

### CBC SUBMITS COMMENTS TO NEW YORK STATE ON PROPOSED CHANGES TO HCBS

On July 17<sup>th</sup>, CBC submitted comments to NYS DOH regarding its Public Notice of proposed changes to Health and Recovery Plans (HARP) away from the existing Behavioral Health (BH) Home and Community Based Services (HCBS) to BH Adult Rehabilitation Services (ARS).

While CBC serves approximately 4,000 HARP members in its Health Home, thousands more across its Independent Practice Association (IPA) and has been pivotal to efforts to support HCBS long-term sustainability via its infrastructure contracts with three managed care organizations. Nevertheless, few who would benefit from HCBS services have been able to do so—the mandated bureaucratic steps necessary to connect would-be participants to services have proved burdensome and kept conversion rates of those assessed for eligibility low.

Therefore, **CBC supported DOH's proposed changes to BH ARS**. The shift would substantially simplify services accessibility and enable greater flexibility between providers and HARP members as they develop care plans that account for clients' complex and evolving needs.

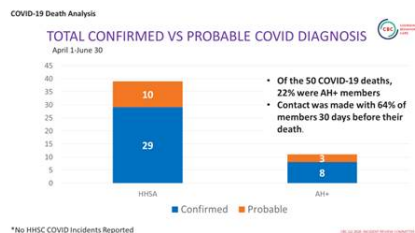
Furthermore, CBC recommended that DOH considers several further changes to BH HCBS:

- Eliminate the requirement for HARP pre-authorization
- Strengthen HCBS rates to ensure ongoing sustainability
- Provide bridge funding for HCBS providers
- Aid Health Home CMAs that have increased staffing to deliver BH HCBS services
- Consider expanding BH ARS eligibility to include HARP look-alikes

CBC will host two additional webinars to review the DABI Implementation Packet. For further information on the packet and webinars, see [DABI Platform Updates](#). Please contact [Elise Kohl-Grant](#) with any questions.

## Q2 2020 INCIDENT REVIEW COMMITTEE—COVID-19 DATA ANALYSIS

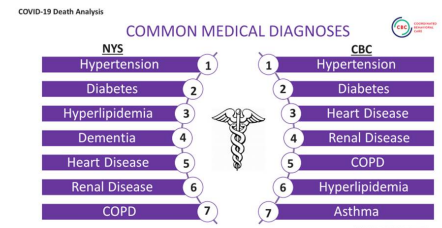
On July 29<sup>th</sup>, the Incident Review Committee (IRC) reviewed a total of 97 DOH reportable incidents in Q2 (April-June) from the Health Home Serving Adults (HNSA), Health Home Serving Children (HNSC) and Adult Home Plus (AH+) programs. Of those, 50 incidents (52%) were deaths related to COVID-19. (see Graph 1, below).



Graph 1

The IRC compared CBC’s 50 COVID-19-related deaths to NYS/NYC data, specifically looking at age, borough of residence and co-occurring physical health conditions. The data were relatively congruent across these three data points, with slight differences in the age of members that passed away. Of note, six of the seven most common co-occurring medical diagnoses of members that passed

away due to COVID-19 were consistent with what is reported by NYS (see Graph 2, below).



Graph 2

Additional data collection and analysis is underway to determine if other factors, such as BH/SUD diagnoses, race, socio-economic status and other social determinants of health also contribute to members’ overall increase risk of COVID-19 onset and symptoms. These data can help inform targeted service interventions that CBC and its network provider agencies can implement to help mitigate risk factors and severity of symptoms if COVID-19 is contracted.

As a general reminder on incident reporting, please submit all incident reports by email to [CBC’s Quality Performance Management](#) department. For AH+ Incident Reports, please also copy Teresa Hill ([thill@cbc.org](mailto:thill@cbc.org)). In order to protect member PHI, please password-protect the report or ensure the email is encrypted.

To read CBC’s comments in full, click [here](#).

## HCBS INFRASTRUCTURE PROJECT EXTENSION

CBC IPA’s HCBS Infrastructure project has now been in effect for fifteen months, as the end of July marks the completion of five performance quarters and what would have been the original contract end date. However, the pandemic has afforded CBC IPA an extension to continue work until October 31<sup>st</sup>. This extension represents a final opportunity to increase metric activities.

## QUALITY PERFORMANCE MANAGEMENT (QPM) & COMPLIANCE

### CBC IPA QO/CIC MEETING

In July, the Quality Oversight/Clinical Integration Committee (QO/CIC) held a meeting which focused on status updates to the Data Analytic Business Intelligence (DABI) platform implementation process.

## TECHNOLOGY & DATA ANALYTICS

### DABI PLATFORM UPDATES

CBC hosted two senior leadership webinars in July that presented a high-level overview of the centralized Data Analytic Business Intelligence (DABI) platform and what will be needed from IPA network provider agencies for a successful DABI implementation, as it relates to technical, clinical/quality, legal and data preparedness measures.

DABI is a key component of the IPA's clinical integration and quality performance initiatives and enables a core framework for obtaining meaningful contracts with managed care organizations (MCOs), whether they be alternative payment models or true VBP contracts. Over the last few months, CBC has taken a deep dive into agencies' electronic health records (EHR) data and aligned it to the IPA High Priority Healthcare Effectiveness Data and Information Set (HEDIS) measures. CBC has developed a process that marries information technology and clinical/quality dimensions to ensure IPA network provider agencies are prepared to connect to DABI.

Currently, CBC is working on a strategy to connect to various data sources (i.e. Netsmart, AWARDS, EHR, [HealtheConnections](#) (HeC)). HeC is the first data source to be connected, and test files went live on July 7<sup>th</sup>. The test will run for a few months to enable data to be built

into [Arcadia's](#) system. [Coordinated Behavioral Health Services](#) (CBHS)—in collaboration with CBC—presented use-case scenarios using 837i claims files to highlight the value of ingesting data into DABI to inform clinical, quality and financial data-driven insights that will ultimately translate to downstream savings and increased quality of care provided to members. CBC is also working with IPA network provider agencies to standardize clinical and data workflows. This work will include individual agency review of how and where data is collected in EHRs and other disparate data sources, as well as network-wide learning collaboratives regarding optimizing EHR utilization for Arcadia connections and quality performance opportunities to highlight best practices across the network.

As a reminder, CBC's ability to provide actionable and meaningful insights using data through DABI is contingent on pulling standardized and clean data from multiple data sources, inclusive of your agency's EHRs, and cannot be successful without commitment from all IPA network agencies to join in this implementation process.

In the coming weeks, CBC will be distributing a DABI Implementation Packet, intended for use as a central resource to IPA network provider agencies data consolidation efforts. This packet identifies steps to ensure data is clean and meaningful to the reports we need to develop on behalf of our network.

CBC will host two additional implementation webinars in August for key agency staff involved in the day-to-day EHR and clinical/quality processes to review the packet and identify next steps. Click the corresponding link to register for this webinar on one of the corresponding dates:

- [Wednesday, August 26<sup>th</sup>](#) (10am-11am)
- [Thursday, August 27<sup>th</sup>](#) (10am-11am)

### NETWORK PROGRAM SERVICES (NPS) GEOMAP UPDATES

CBC continues to actively update its NPS GeoMap. Special thanks to [Hudson Guild](#), [Project Hospitality](#), [Saint Joseph's Medical Center](#), [The Jewish Board](#), [Interborough Developmental & Consultation Center](#) and [Union Settlement](#) for submitting their program and site information.

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## INNOVATIVE PROGRAMS

### PATHWAY HOME™ PARTNERS WITH COMMUNITY ACCESS FOR NOVEL MTA TEAM

CBC is excited to announce a partnership with [Community Access](#) on its new [Metropolitan Transportation Authority](#) (MTA) Pathway Home™ team. For the past year, Community Access has been operating a successful community-based Pathway Home™ team. Their person-centered harm reduction mission aligns well with the Pathway Home™ (PH) model, as does their willingness to work with and support the most challenging and complex behavioral health cases within our system.

Community Access also has a long history of providing services to the homeless; one-third of its current PH team roster are people being discharged from [Bellevue Hospital](#) to [New York City Department of Homeless Services](#) (DHS) Assessment Shelters. The team is beginning to recruit for all positions including clinicians, care managers, peers, and nurse.

## TRAINING INSTITUTE

### PROJECT ECHO FOR OPIOID USE DISORDERS

On July 22<sup>nd</sup>, the CBC Training Institute held its monthly Medication-Assisted Treatment (MAT) community learning opportunity via [Project ECHO](#). 48 individuals from 13 behavioral health agencies attended CBC's third instalment in this ECHO series. This time, Dr. Bruce Trigg's didactic highlighted buprenorphine use and efficacy in MAT for Opioid Use Disorders (OUD).

This call (and the two that came before it) have been extremely well-received. Survey response data from attendees show that most respondents are finding the calls educational and collaborative. Furthermore, nearly all respondents indicate they feel increasingly comfortable not only discussing substance use disorder with clients but promoting MAT as part of a treatment plan.

The next Project ECHO teleconference in this series will take place on August 24<sup>th</sup> and focus on methadone use and efficacy

## LETTER FROM A PARTICIPANT

To Whom it may Concern,

*I was having some issues with my housing provider and retained [WellLife Network](#) last fall. I was introduced to Mrs. Natasha Persaud, LMSW, CASAC-t, Senior Mental Health Clinician, who promptly visited me at home.*

*Mrs. Persaud immediately began to help me navigate through the challenging material and emotional adversities I was experiencing at the time, always doing as she promised, with positive results.*

*I call her my "miracle worker." Her utmost professionalism, caring and warmth have resolved all the trifling challenges I had been enduring. I now reside in a lovely one-bedroom apartment, where I have more independence.*

*She's not only a consummate professional, but a guiding light and a friend. Perhaps I may face future challenges, but I'll practice the life skills she taught me.*

*It's hard to put into words how my life changed in so many positive ways since Mrs. Persaud helped me navigate the challenging times in my life... It's sad that she may only continue to work with me for just a few more months due to her company policy. I wish I could be a client forever. Perhaps I may face future adversities, but I'll remember her advice. She's like the sister I never had.*

*Thank you!!!*

*Hector A. Acosta*

in MAT. Please contact CBC Training Institute Director [Emily Grossman](#) for a link to register.

### HEALTH HOME VALUE-ADD TRAININGS

CBC Health Home (HH) value-add trainings have continued to reach wide audiences across the CMA network. On July 24<sup>th</sup>, [JCCA](#) facilitated a "Good Practice with AWOL Youth" training, which drew 53 participants across 20 CMAs. Meanwhile, CBC's standard weekly HH Virtual Office Hour (VOH) continues to average around 55 participants per weekly session.

### AUGUST TRAINING CALENDAR

[CBC Training Institute's August 2020 Calendar](#) once again provides invaluable opportunities to assist network providers during the ongoing pandemic. A new training, "The ABCs for Managing Team Morale in COVID-19," has been added to the roster, along with trainings on benefits, trauma-informed care and self-care. The Training Institute will also welcome [Millin Associates](#) for a billing training for network providers.

### SERVING 2,411... & COUNTING!

As of August 1<sup>st</sup>, the CBC Training Institute has served 2,411 trainees since its establishment in Q3 2019. Below, see a breakdown of each quarter's trainings by total number of participants per training subcategory (Health Home, Network Agency, OMH, Pathway Home, etc.).

## RELEVANT TRAININGS

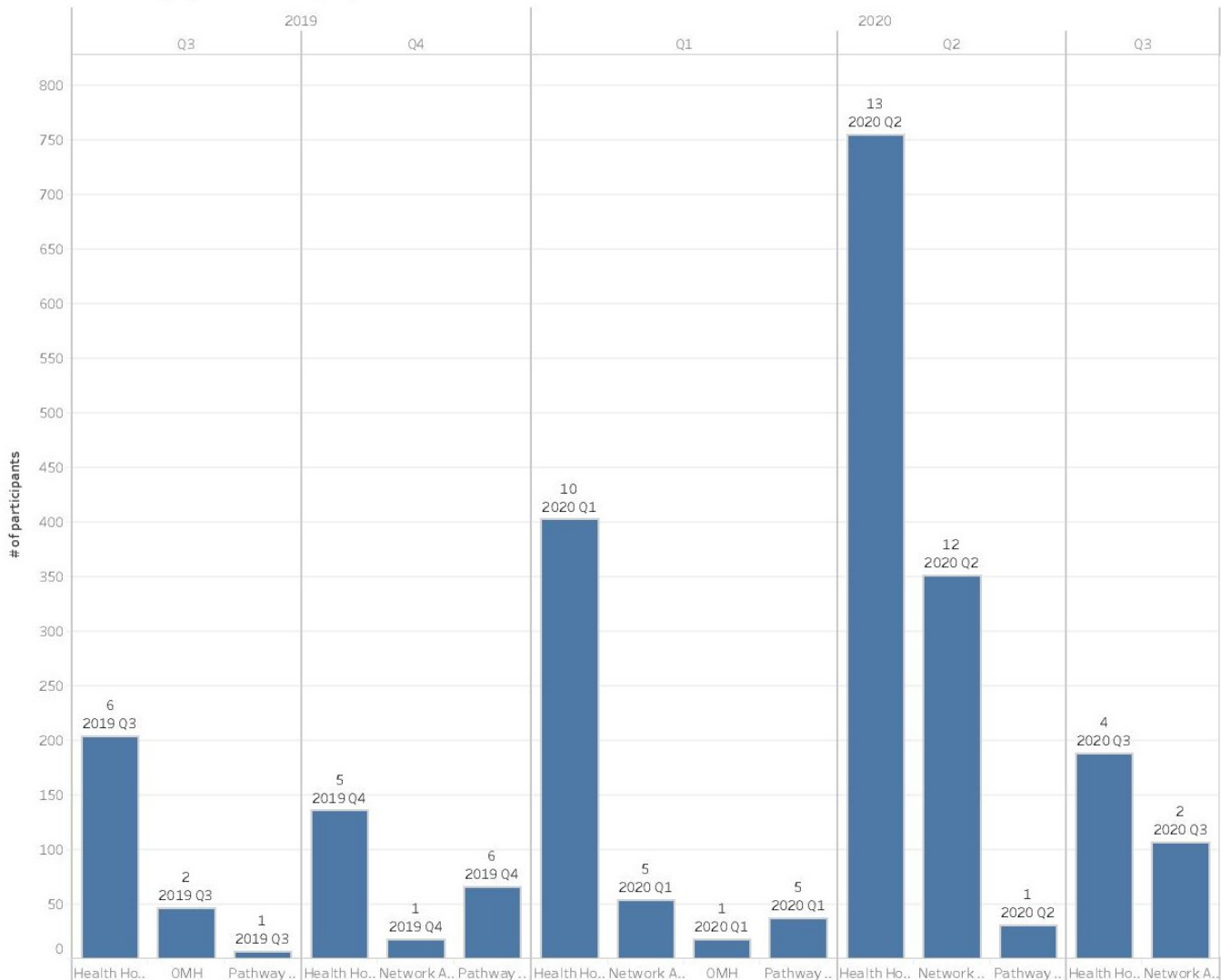
On June 29<sup>th</sup>, CBC successfully migrated its Health Information Technology (HIT) platform to [Relevant Health Homes](#) for the Health Home, Pathway Home™ Adult Home and Recovery Coordination Agency (RCA) programs. Leading up to and



directly after go-live, Relevant and CBC partnered to provide fifteen trainings for the CBC network, attended by hundreds of unique users. Weekly trainings are ongoing for all Relevant users, and held on Tuesday mornings at 10:30am. Registration and other information on scheduled trainings can be found [here](#).

### Total # of Participants 2019 Q3 + Q4 and 2020 Q1 + Q2 + Q3 Trainings = 2,411

Type of trainings executed 2019 Q3 + Q4 and 2020 Q1  
n = # of trainings per subcategory



## AGENCY SPOTLIGHT: CATHOLIC CHARITIES EAST FLATBUSH CLINIC

Catholic Charities Brooklyn & Queens celebrated opening its new Behavioral Health Center in East Flatbush with a ribbon-cutting ceremony on July 30<sup>th</sup>.

The Catholic Charities Behavioral Health Center provides neighbors in need with mental health, addiction, primary care, on-site pharmacy, housing and residential services, care coordination, trauma-informed care, case management and veteran support services.

Catholic Charities staff members follow an approach to health care that emphasizes wellness, recovery, trauma-informed care and physical-behavioral health integration to help stabilize and treat in the most clinically appropriate and cost-effective settings, while also offering the least restrictive and traumatizing environment. Patients are provided an immediate screening and risk assessment for mental health, addictions and basic primary care needs. The new center offers easy access to care with reduced wait times, regardless of ability to pay or location of residence.

The new Behavioral Health Center will serve the Flatlands, Midwood, Kensington, Flatbush, East Flatbush, Ditmas Park and Crown Heights neighborhoods in Brooklyn. For access to the center, call 718-722-6001.



Above, CCBQ senior management cuts the ribbon.

## AGENCY SPOTLIGHT: COMMUNITY ACCESS HUNTS POINT RESIDENCE

Community Access has opened a 215-unit residential building on Bruckner Boulevard in the Bronx.

The \$87 million project will house low-income families and those experiencing chronic homelessness as well as individuals living with mental health concerns.

The building is Community Access's largest to date, and dozens of people have already moved in. The development also marks the nonprofit's first project with the Empire State Supportive Housing Initiative.

Support services will help residents—many of whom have never had their own

apartment or have transitioned from shelters and psychiatric facilities—acclimate to their new neighborhood. They'll also assist people determine what they'd like to do next in their lives.

Community Access's [fact sheet](#) has more information on this new development.



Above, a glimpse of Community Access's newest and largest residential building, to date.