

CCBHC Rate Development  
Population Assignment Question Grid

Population	Application	Criteria	Additional Specification Required	Initial Cost Reporting Considerations				Rating Year Assignment Considerations	
				What data source is anticipated to be used to identify whether members meet the criteria?	What specific element from the data source will be used, what values from this element meet the criteria, and what time frame will be reviewed for these values?	Do the CCBHCs have access to this information for their members in SFY 2022?	Does EOHHS have access to this or similar information for Medicaid members in SFY 2022? If a similar source, then what differences may be expected relative to the CCBHC source?	What data source is anticipated to be used to identify whether members meet the criteria?	Will the CCBHC have access to the necessary data (at the time of population assignment) to determine whether the member meets the criteria?
High Acuity Adult	All years	Eligible for RI's I/DD Waiver		Medicaid Management Information System (MMIS) Reports	I/DD Waiver Eligibility	No	Yes	I/DD Waiver Eligibility	Unknown - TBD
		BH diagnosis (coupled with I/DD Waiver)	Define ICD-10 codes qualifying as "BH diagnosis"	BHOLD (or MMIS)	Any F code (excluding F10-F19, and F70 - F89)	Yes	Yes	Portal (modifications needed to capture Dx); providers will have access via provider assessment	Yes
		Other diagnosis (list on [HA-A] tab) – Current IHH/ACT Dx	Define ICD-10 codes qualifying as each listed diagnosis	BHOLD (or MMIS)	Codes corresponding to any of the listed diagnoses	Yes	Yes	Portal (modifications needed to capture Dx); providers will have access via provider assessment	Yes
		DLA score of 4 or less		BHOLD	DLA score of 4 or less	Yes	Yes	Portal	Yes
		They have been discharged from an inpatient psychiatric unit in past 30 days		BHOLD	CSP Program Enrollment; Community Support Program (CSP), Mobile Treatment Team (MTT), Mental Health Psychiatric Rehabilitative Residences (MHPRR)	CMHCs have access; CCBHCs won't have anyone who meets the criteria for cost reporting (don't provide CSP)	Yes	Exception request	Yes - CCBHC will make the exception request, dependent on BHDDH approval
		They have been released from incarceration within the past 30 days		BHOLD	CSP Program Enrollment	CMHCs have access; CCBHCs won't have anyone who meets the criteria for cost reporting (don't provide CSP)	Yes	Exception request	Yes - CCBHC will make the exception request, dependent on BHDDH approval
		They are homeless		BHOLD	CSP Program Enrollment	CMHCs have access; CCBHCs won't have anyone who meets the criteria for cost reporting (don't provide CSP)	Yes	Exception request	Yes - CCBHC will make the exception request, dependent on BHDDH approval
		They have been homeless within the last 30 days		BHOLD	CSP Program Enrollment	CMHCs have access; CCBHCs won't have anyone who meets the criteria for cost reporting (don't provide CSP)	Yes	Exception request	Yes - CCBHC will make the exception request, dependent on BHDDH approval
		They had a severe or moderate substance use disorder (SUD) for the past six months		BHOLD	CSP Program Enrollment	CMHCs have access; CCBHCs won't have anyone who meets the criteria for cost reporting (don't provide CSP)	Yes	Exception request	Yes - CCBHC will make the exception request, dependent on BHDDH approval
		They have utilized crisis services at least three times in a 30-day period in the past six months		BHOLD	CSP Program Enrollment	CMHCs have access; CCBHCs won't have anyone who meets the criteria for cost reporting (don't provide CSP)	Yes	Exception request	Yes - CCBHC will make the exception request, dependent on BHDDH approval
		They had a mild SUD for the last six months		BHOLD	CSP Program Enrollment	CMHCs have access; CCBHCs won't have anyone who meets the criteria for cost reporting (don't provide CSP)	Yes	Exception request	Yes - CCBHC will make the exception request, dependent on BHDDH approval
		They have been homeless in the past six months		BHOLD	CSP Program Enrollment	CMHCs have access; CCBHCs won't have anyone who meets the criteria for cost reporting (don't provide CSP)	Yes	Exception request	Yes - CCBHC will make the exception request, dependent on BHDDH approval
		They are at risk of homelessness (unstable housed)		BHOLD	CSP Program Enrollment	CMHCs have access; CCBHCs won't have anyone who meets the criteria for cost reporting (don't provide CSP)	Yes	Exception request	Yes - CCBHC will make the exception request, dependent on BHDDH approval
		They have been charged with a crime in the past six months		BHOLD	CSP Program Enrollment	CMHCs have access; CCBHCs won't have anyone who meets the criteria for cost reporting (don't provide CSP)	Yes	Exception request	Yes - CCBHC will make the exception request, dependent on BHDDH approval
		They are at risk of becoming involved in the criminal justice system		BHOLD	CSP Program Enrollment	CMHCs have access; CCBHCs won't have anyone who meets the criteria for cost reporting (don't provide CSP)	Yes	Exception request	Yes - CCBHC will make the exception request, dependent on BHDDH approval
		They live in a supported environment and could move to a less restrictive setting if provided with intensive services		BHOLD	CSP Program Enrollment	CMHCs have access; CCBHCs won't have anyone who meets the criteria for cost reporting (don't provide CSP)	Yes	Exception request	Yes - CCBHC will make the exception request, dependent on BHDDH approval
		They are consistently unable to engage and benefit from other community-based mental health services		BHOLD	CSP Program Enrollment	CMHCs have access; CCBHCs won't have anyone who meets the criteria for cost reporting (don't provide CSP)	Yes	Exception request	Yes - CCBHC will make the exception request, dependent on BHDDH approval
		They are unable to perform practical daily tasks required for adult functioning		BHOLD	CSP Program Enrollment	CMHCs have access; CCBHCs won't have anyone who meets the criteria for cost reporting (don't provide CSP)	Yes	Exception request	Yes - CCBHC will make the exception request, dependent on BHDDH approval
		They have intractable severe major symptoms (i.e. affective, psychotic, suicidality)		BHOLD	CSP Program Enrollment	CMHCs have access; CCBHCs won't have anyone who meets the criteria for cost reporting (don't provide CSP)	Yes	Exception request	Yes - CCBHC will make the exception request, dependent on BHDDH approval

High Acuity Children and Youth	Year 1-2	Enhanced Outpatient Service (EOS) eligibility		BHOLD	EOS Program Enrollment	Yes	Yes	Portal (modifications needed)	Yes
		Must have Child and Adolescent Needs and Strengths (CANS) assessment completed in year 1.		Not available for initial cost report - must be completed in Year 1 to support phased attribution				Portal (modifications needed)	Yes
	Year 3+	Inpatient psychiatric admission in past year		Provider Intake Assessment (to be developed for implementation in Year 1, including assessment/ documentation of each eligibility criteria)	Fulfillment of criteria listed	No	Yes (MMIS)	Portal (modifications needed)	Yes
		Diagnosis (list on [HA-CY] tab)	Define ICD-10 codes qualifying as each listed diagnosis	Provider Intake Assessment	Fulfillment of criteria listed	Yes (Provider Assessment/ EHR)	Yes (MMIS)	Portal (modifications needed)	Yes
		A singular diagnosis or condition that adversely impacts the child or youth's daily functioning	Define ICD-10 codes qualifying	Provider Intake Assessment	Fulfillment of criteria listed	Yes (Provider Assessment/ EHR)	Yes (MMIS)	Portal (modifications needed)	Yes
		Sexual exploitation related V or Z codes that may correspond to a history of personal childhood abuse	Define ICD-10 codes qualifying	Provider Intake Assessment	Fulfillment of criteria listed	Possibly, for some (based on current DCYF checklist)	Possibly, for some (based on current DCYF checklist)	Portal (modifications needed)	Yes
		Family history of childhood abuse		Provider Intake Assessment	Fulfillment of criteria listed	Possibly, for some (based on current DCYF checklist)	Possibly, for some (based on current DCYF checklist)	Portal (modifications needed)	Yes
		Forced labor or sexual exploitation in childhood		Provider Intake Assessment	Fulfillment of criteria listed	Possibly, for some (based on current DCYF checklist)	Possibly, for some (based on current DCYF checklist)	Portal (modifications needed)	Yes
		Forced labor or sexual exploitation		Provider Intake Assessment	Fulfillment of criteria listed	Possibly, for some (based on current DCYF checklist)	Possibly, for some (based on current DCYF checklist)	Portal (modifications needed)	Yes
		Other V or Z code that may reflect sexual exploitation	Define ICD-10 codes qualifying	Provider Intake Assessment	Fulfillment of criteria listed	Possibly, for some (based on current DCYF checklist)	Possibly, for some (based on current DCYF checklist)	Portal (modifications needed)	Yes
		CANS score of 3, or two scores of 2 (risk behavior screen)		Provider Intake Assessment	Fulfillment of criteria listed	No	No	Portal (modifications needed)	Yes
		CANS score of 3 or two scores of 2 (needs screen)		Provider Intake Assessment	Fulfillment of criteria listed	No	No	Portal (modifications needed)	Yes
High Acuity Substance Use Disorder	Year 1-2	Primary diagnosis of substance use disorder, regardless of severity or complexity		BHOLD (or MMIS)	Dx (F10-F19)	Yes	Yes	Portal	Yes
		Must have ASAM assessment completed in year 1		Not available for initial cost report - must be completed in Year 1 to support phased attribution				Portal (modifications needed)	Yes
	Year 3+	Opioid use							
		Marijuana use							
		Stimulant use							
		Sedative use							
		Hallucinogen use							
		Alcohol use							
		Score of 2.1+ by ASAM criteria assessment interview or ASAM continuum software							
General Population	All Years	Not included in the above	Define general CCBHC program entry criteria in a manner that can be identified from available data.	Provider billing/ MMIS	Any CCBHC required service in the cost report period for any individual who does not meet other population eligibility criteria	Yes	Yes	Portal	Yes

**Rhode Island Medicaid  
CCBHC Rate Development  
High Acuity Adult Diagnosis List**

**Diagnosis**

Schizophrenia  
Schizoaffective  
Delusional Disorders  
Psychosis  
Bipolar  
Major Depression  
Severe OCD  
Post-Traumatic Stress Disorder  
Borderline Personality Disorder  
Sever panic disorder with DLA of 4 or less

**Rhode Island Medicaid  
CCBHC Rate Development  
High Acuity Children and Youth Diagnosis List**

**Diagnosis**

Adjustment Disorder  
Anxiety Disorder  
Any Feeding and Eating Disorders  
Bipolar Disorder  
Borderline Personality Disorder  
Delusional Disorder and/or Psychotic Disorder  
Disruptive Mood Dysregulation Disorder Disruptive  
Impulse-Control and Conduct Disorder  
Gender Dysphoria  
Major Depressive Disorder, Recurrent  
Obsessive-Compulsive Disorder  
Oppositional Defiance Disorder  
Panic Disorders  
Personality Disorder  
Phobic Disorders  
Pica  
Post-Traumatic Stress Disorder  
Psychosis/dx w/psychotic features or episode  
Pyromania  
Reactive Attachment Disorder  
Schizoaffective Disorder  
Schizoid Personality Disorder  
Schizophrenia  
Selective Mutism  
Somatic Symptom and Related Disorders