



# Improve Your CCBHC Earning Through Participation in a ONEcare Clinically Integrated Network

## CCBHC

- **CCBHCs** are charged with improving health outcomes and minimizing unnecessary high-cost care

## CIN

- ONEcare CINs earn performance-based incentives for improving health outcomes and managing total cost of care

### Value-based incentives are not deducted from the PPS rate

- **CCBHC** success requires change, especially in support, accountability, care coordination, and collaborative community-based care.

- **ONEcare members** access powerful analytics that turn raw data into actionable plans, helping target high-impact members and eliminate guesswork.

- **CCBHCs** are accountable for outcomes through data and quality reporting tied to evidence-based care, reduced system use, and better chronic disease management.

- **CINs** improve patient care by meeting shared metrics, with the CQI Committee regularly sharing effective, evidence-based practices.

- **CCBHCs** advance care coordination by providing comprehensive, one-stop behavioral health services beyond basic integration.

- **CINs** support integrated care, addressing behavioral and physical health needs in one place to improve outcomes.

- **CCBHCs** offer expanded services via Designated Collaboration Organizations, including peer support, psych rehab, case management, health screening, and veteran services.

- **ONEcare** connects you with partner services, enabling seamless referrals to meet patient needs and benefit all network members.

**CINs complement CCBHCs** — so you stay focused on delivering care while the CIN:

Manages value-based contracts • Leads data analysis & outcomes tracking • Coordinates infrastructure & shared support



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**Q-** Can I participate in a Clinically Integrated if I am a CCBHC?

**A-** Yes! In addition to the Prospective Payment System (PPS) rates your organization will be eligible for incentives achieved through value-based contracting within a CIN.

2

**Q-** Will the metrics align with those of my CCBHC requirements?

**A-** All **ONEcare** CINs are provider-governed, meaning your network's leadership helps determine which metrics to prioritize, guided by state and payor objectives.

3

**Q-** How much effort is involved in joining a CIN if I am a CCBHC?

**A-** For organizations with or pursuing CCBHC status, joining a CIN is a relatively light lift—you can lean on network partners and collaborate with like-minded providers to share innovative ideas- while the CIN handles the heavy lifting such as legal, population health analytics and payor contracting on your behalf.

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**Q-** Will joining a CIN impact our PPS rate or other funding streams (e.g., grants)?

**A-** Joining a CIN allows you to earn additional performance-based incentives on top of your PPS rate. Maximize your earning for your population health activities!

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**Q-** What role can a CIN play in sustaining service levels or funding if CCBHC demonstration funding ends?

**A-** The future of enhanced PPS rates may be uncertain, but value-based contracting and CINs are established and will continue.

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**Q-** What are the expectations for staffing, data sharing, and participation in network initiatives or meetings?

**A-** A **ONEcare** CIN requires participation in shared governance which includes the development and implementation of shared best practice. Depending on the organization, this may require data sharing and/or participation in quality improvement activities.

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**Q-** How does participation in a **ONEcare** Network enhance our ability to meet CCBHC criteria and reporting requirements?

**A-** **ONEcare** Networks use a **Care Optimization Suite (COS)** that integrates with CCBHCs to support seamless data sharing and care coordination. Supervisors and care teams can access real-time alerts, tasks, and ADT notifications to enhance member care for high-risk SMI/SUD patients.

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**Q-** How are payments and shared savings distributed within the network?

**A-** As a provider-governed network, the local **ONEcare** board will have the authority to develop a Distribution & Settlement policy that outlines how shared funds are allocated across the network.

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**Q-** What technology platforms do I need if I am using my EHR data already?

**A-** **ONEcare** networks leverage the Care Optimization System (COS) which provides analytics, reporting, e-referral, and care coordination tools which are supplemental to your EHR. **ONEcare** analyzes multi-provider data at a regional and national level, providing broader insights into your patient's behavioral health AND medical needs/risks.