

WEST VIRGINIA LEGISLATURE

2022 REGULAR SESSION

ENROLLED

Committee Substitute

for

Committee Substitute

for

Senate Bill 247

BY SENATORS WELD, SYPOLT, GRADY, SMITH,

STOLLINGS, MARONEY, BALDWIN, ROMANO, LINDSAY,

WOELFEL, TAKUBO, PLYMALE, AND JEFFRIES

[Passed March 12, 2022; in effect 90 days from passage]

FILED

2022 MAR 28 P 12:54

OFFICE OF WEST VIRGINIA
SECRETARY OF STATE

SB247

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1 AN ACT to amend the Code of West Virginia, 1931, as amended, by adding thereto a new section,
2 designated §9-5-29, relating to certified community behavioral health clinics; providing that
3 the state Medicaid agency shall develop, seek approval of, and implement a Medicaid
4 state plan amendment as necessary and appropriate to effectuate a system of Certified
5 Community Behavioral Health Clinics; providing that a state certification system for
6 Certified Community Behavioral Health Clinics shall be developed; setting forth state
7 certification requirements; providing parties eligible to apply for certification as a Certified
8 Community Behavioral Health Clinic; and providing that participation in the Certified
9 Community Behavioral Health Clinic program is voluntary.

Be it enacted by the Legislature of West Virginia:

ARTICLE 5. MISCELLANEOUS PROVISIONS.

§9-5-29. Certified community behavioral health clinics.

1 (a) The Bureau for Medical Services shall develop, seek approval of, and implement a
2 Medicaid state plan amendment as necessary and appropriate to effectuate a system of certified
3 community behavioral health clinics (CCBHCs).

4 (b) The Bureau for Medical Services, in partnership with the Department of Health and
5 Human Resources' Bureau for Behavioral Health, shall establish a state certification system for
6 CCBHCs in accordance with the following requirements:

7 (1) To the fullest extent practicable, the CCBHC system shall be consistent with the
8 demonstration program established by Section 223 of the Protecting Access to Medicare Act of
9 2014 (P.L. 113-93, 42 U.S.C. 1396a note), as amended.

10 (2) Standards and methodologies for a prospective payment system shall be established
11 to reimburse each CCBHC under the state Medicaid program on a predetermined, fixed amount
12 per day for covered services rendered to each Medicaid beneficiary.

13 (3) A quality incentive payment system shall be established for those CCBHCs which
14 achieve specific thresholds on performance metrics identified by the Bureau for Medical Services.
15 Such quality incentive payments shall be in addition to the bundled prospective daily rate.

16 (4) The prospective payment rate for each CCBHC shall be adjusted tri-annually by the
17 Medicare Economic Index as defined in Section 223 of Protecting Access to Medicare Act of
18 2014. In addition, the prospective payment rate shall allow for modifications based upon a change
19 in scope for an individual CCBHC. Rate adjustments can be made upon request by the provider.

20 (5) Criteria shall be established to certify a facility as a CCBHC which, at a minimum, shall
21 require each CCBHC to offer directly, or indirectly through formal referral relationships with other
22 providers, the following services:

23 (A) Crisis mental health services, including 24-hour mobile crisis teams, emergency crisis
24 intervention services, and crisis stabilization;

25 (B) Screening, assessment, and diagnosis, including risk assessment;

26 (C) Patient-centered treatment planning or similar processes, including risk assessment
27 and crisis planning;

28 (D) Outpatient clinic primary care screening and monitoring of key health indicators and
29 health risk;

30 (E) Targeted case management;

31 (F) Psychiatric rehabilitation services;

32 (G) Peer support and counselor services;

33 (H) Family support services; and

34 (I) Community-based mental health services, including mental health services for
35 members of the armed forces and veterans.

36 (c) All nonprofit comprehensive community mental health centers, comprehensive
37 intellectual disability facilities, as established by §27-2A-1 of this code, and all other providers set
38 forth in the Medicaid state plan amendment shall be eligible to apply for certification as a CCBHC.

39 (d) The Bureau for Medical Services, in partnership with the Department of Health and
40 Human Resources' Bureau for Behavioral Health, shall establish any other procedures and
41 standards as may be necessary for an eligible facility to apply for certification, become certified,
42 and remain certified as a CCBHC, as set forth in the legislative rule developed pursuant to this
43 section.

44 (e) The participation of any eligible facility in the CCBHC system shall be strictly voluntary.
45 Nothing in this section shall require a facility that is eligible for certification as a CCBHC to apply
46 for such certification.

The Joint Committee on Enrolled Bills hereby certifies that the foregoing bill is correctly enrolled.

Mark Hayward
.....
Chairman, Senate Committee

Dean Jeffrey
.....
Chairman, House Committee

Originated in the Senate.

In effect 90 days from passage.

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SECRETARY OF STATE

FILED

Jabini
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Clerk of the Senate

Steve Morris
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Clerk of the House of Delegates

C.P. Br...
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President of the Senate

Don Hancock
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Speaker of the House of Delegates

The within *is approved* this the *28th*
Day of *March* 2022.

James Justice
.....
Governor

PRESENTED TO THE GOVERNOR

MAR 17 2022

Time 1:50 pm