



CCBHC Quality Data Reporting

New York State collects encounter, clinical outcome, and other quality improvement data from the CCBHCs for annual reporting to SAMHSA. The data includes: 1) access to community-based behavioral health services; 2) quality of services provided by CCBHCs compared to non-CCBHC providers; and 3) federal and state costs of a full range of behavioral health services including inpatient, emergency, and ambulatory services (PAMA § 223(d)(7)(A)).

Each CCBHC should have a quality management program in place that demonstrates understanding of both New York State's Medicaid Managed Care Quality Strategy and Behavioral Health Quality Strategy, in addition to the national [Quality Measures](#) CCBHCs collect for annual reporting to SAMHSA. These measures include monitoring access to and utilization of care, and quality of service delivery based on NCQA standards. In addition, the results of the adult consumer assessment of care (CACS) and family assessment of care (FACS) surveys that are administered annually at the CCBHCs are also reported. The CACS and FACS assess recipient and family satisfaction with services received and their input regarding the design and delivery of clinic services. CCBHCs also develop performance improvement projects specific to their population's health needs.

For additional information on CCBHC quality data reporting requirements please see the [CCBHC Provider Manual](#).