

## CCBHC Caucus Newsletter | January 2026

### 1. Executive Snapshot

#### What Matters This Month

- Michigan is one of only three states selected for a Ballmer-funded initiative to strengthen CCBHC sustainability, with CMHA serving as the hub for coordinated, high-impact technical assistance statewide.
- Michigan is also one of only three states participating in the federal Innovation in Behavioral Health (IBH) model, a major opportunity to shape future payment and integration models.
- Budget and legislative dynamics create near-term risk to CCBHC stability, increasing the importance of ROI-focused advocacy.
- Momentum is building toward a statewide CCBHC data warehouse, with rebasing and Rural Health Transformation creating a timely window.

### 2. Technical Assistance Spotlight

#### Michigan Multi-Stakeholder CCBHC Transformation Project and CMHA CCBHC Technical Assistance Hub

Michigan is one of only three states selected to participate in [a national initiative funded by the Ballmer Group](#) to help states scale, sustain, and strengthen the CCBHC model through targeted technical assistance and collaboration among public agencies, providers, and national partners. The National Council for Mental Wellbeing, in partnership with the National Association of State Mental Health Program Directors (NASMHPD), was awarded a grant to provide robust technical assistance and capacity-building to strengthen CCBHC services, invest in the behavioral health workforce, and support sustainable, high-quality care for people with complex needs.

Concurrently, CMHA is standing up a coordinated Technical Assistance (TA) hub for Michigan CCBHCs to bring greater clarity, alignment, and accessibility to CCBHC-related support statewide. The TA hub will serve as a central organizing and communication function, helping CCBHCs understand what TA is available, how it connects to key initiatives, and how to efficiently access support as system demands increase.

The goals of the CMHA TA hub are to:

- Strengthen state-level CCBHC coordination
- Improve access to high-quality, role-specific technical assistance
- Support complex transitions such as IBH implementation, direct payment, cost reporting, data strategy, and policy alignment
- Reduce duplication, fragmentation, and confusion across multiple TA sources

CMHA is partnering with the National Council and MDHHS to implement the Ballmer-funded initiative in Michigan by:

## Community Mental Health Association (CMHA) of Michigan

- Helping sequence and organize TA so it reflects what CCBHCs need most right now
- Ensuring alignment of Ballmer-funded National Council TA with Michigan CCBHC priorities
- Using consistent, centralized communications to translate TA into clear implications and actions for CCBHC leaders and staff

Through this initiative and partnership:

- Michigan receives dedicated funding for targeted, high-impact CCBHC technical assistance
- The National Council is supporting states to build stronger, more coordinated TA infrastructure
- TA is designed to be strategic, needs-driven, and aligned with both national best practices and state-specific priorities, rather than episodic or reactive

Over time, CCBHCs should expect clearer visibility into available TA and upcoming opportunities, better alignment between TA, caucus priorities, and advocacy efforts, and fewer disconnected requests with more coordinated, proactive support.

To support this effort, the CMHA CCBHC Caucus intends to form a TA advisory committee and TA workgroup, comprised of Caucus members, to help inform priorities, elevate emerging needs, and ensure TA remains practical, timely, and responsive. More information will be shared as this structure is finalized.

### **Request for Technical Assistance Subject Matter Experts**

The National Council is currently soliciting applications from qualified contractors to design, develop, and deliver Technical Assistance (TA) modules to support Certified Community Behavioral Health Clinic (CCBHC) readiness and operational excellence. These modules will be used to deliver structured TA to clinics at varying stages of CCBHC implementation.

Michigan CCBHC leaders and subject matter experts with Michigan-specific experience are especially encouraged to apply.

- Applications open: January 12, 2026
- Applications due: February 2, 2026

The full RFA and application instructions are available through the National Council's AwardForce platform at: <https://nationalcouncil.awardsplatform.com/>. Additional materials include the [RFA](#), [Application Template](#), and [accompanying FAQ](#) for additional guidance.

### 3. Policy, System & Operations Updates

#### **Mental Health Framework**

Recent PIHP procurement discussions reinforced known structural barriers within the [Mental Health framework](#), particularly those that affect financing, accountability, and alignment with the CCBHC model. These challenges are related to how the framework is designed rather than how it is implemented and remain outside the direct control of the CCBHC framework.

As a result, these issues continue to shape the broader policy and funding environment in which CCBHCs operate and will be an important consideration as procurement decisions, payment models, and system redesign efforts move forward. Ongoing caucus alignment and shared messaging will be critical to ensuring CCBHC priorities are clearly understood and reflected in future discussions.

#### **Rural Health Transformation (RHT) Program**

Michigan was [awarded more than \\$173 million](#) in federal funding to strengthen rural health. The [Rural Health Transformation \(RHT\) program](#) represents a meaningful opportunity to sustain and expand CCBHCs, particularly in rural and underserved communities. RHT is part of the state's long-term strategy to strengthen access, integration, and financial stability across Michigan's behavioral health system.

Key elements relevant to CCBHCs include:

- Alignment with the state's broader CCBHC expansion strategy
- Potential technology and infrastructure funding that may support data, integration, and system modernization efforts
- Opportunities to better connect CCBHCs with other rural health and safety-net initiatives

CCBHCs are encouraged to review [Michigan's full RHT project narrative](#).

### 4. Active Initiatives

#### **Innovation in Behavioral Health (IBH)**

Michigan is in Year 1 of an eight-year federal Innovation in Behavioral Health (IBH) cooperative agreement, positioning the state as an early participant in shaping national behavioral health integration efforts.

Seven CCBHCs are currently serving as practice participants, supported through a convening structure that includes other practice participants and partners including health homes, FQHCs, health plans, MDHHS staff across multiple departments, and an external

facilitator, TBD Solutions. IBH continues to receive strong bipartisan federal support, alongside the CCBHC model.

IBH is focused on advancing:

- Alternative payment methodologies
- Integrated care delivery
- Stronger alignment between behavioral and physical health systems

Michigan has early influence over IBH design and implementation. Alignment with IBH strengthens the case for integrated data, payment reform, and infrastructure investments that support long-term CCBHC sustainability.

## 5. Field Intelligence & Emerging Issues

### **Building a Statewide CCBHC Data Warehouse**

CMHA is exploring the development of a Michigan CCBHC data warehouse, informed by successful association-led models in states like Kansas and Missouri. Experience from these states shows that data warehouses are most effective when they:

- Are association-led and used to support advocacy and policy engagement
- Embed costs largely within PPS and cost reporting
- Are built through strong partnerships with state agencies

Key design priorities under discussion include:

- Inclusion of both CCBHCs and Health Homes
- An initial focus on SAMHSA quality measures
- Direct data flow from EHRs, avoiding double entry
- Maintaining provider control over how data is used for advocacy
- Leveraging existing funding opportunities like rebasing and RHT-related technology funding

Rebasing creates a timely window to advance this work, as data gaps are becoming increasingly visible at the state level. Alignment with IBH further strengthens the case for investing in shared data infrastructure that supports integration, accountability, and long-term sustainability.

## 6. What's Coming Next

### **CMHA Advocacy & Data Timeline**

CMHA is collecting data for the FY25 “Outcomes from Michigan Demonstration Sites” infographic, which will be used to support CCBHC advocacy during the upcoming state budget cycle. This is the third year CMHA has produced this report, and the goal this year is to include data from all Michigan Demonstration CCBHCs to strengthen the collective advocacy story.

- Data submission deadline: February 13, 2026

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- Newer CCBHCs will be asked to submit baseline data from the year prior to certification
- Returning participants only need to submit FY25 data
- The data request has been intentionally designed to minimize staff burden:
  - Part A: 6 core data elements
  - Part B: Yes/no checklist
  - Part C: Optional narrative highlights (program enhancements, collaborations, or outcomes)
- CMHA has also requested supplemental data from MDHHS and CHRT to enhance the final report.

This data will be used to support legislative and budget advocacy, aligning with the Governor's budget release in early February, The State of the State address in late February, and Budget Committee deliberations in late February / early March. Individual legislative meetings can also be scheduled using this information.

Completed forms were emailed to all CCBHCs on January 21 and should be returned to Julia Rupp at [juliar@wmcchs.org](mailto:juliar@wmcchs.org).

### Upcoming Deadlines and Dates

- **January 30, 2026** - IBH HIT Assessments due (IBH Practice Participants only)
- **January 31, 2026** – Clinic Reported Measures Due to MDHHS
- **February 2, 2026** – CCBHC-T Clinic RFA Applications for SMEs Due to National Council (*see above*)
- **February 13, 2026** – FY26 Q1 Claims Reconciliation Template Due to MDHHS
- **February 13, 2026** - FY25 data to inform CMHA's "Outcomes from Michigan Demonstration Sites" infographic Due to Julia Rupp (*see above*)
- **February 15, 2026** – Medicaid and Non-Medicaid Grievance, Appeals, Service Denials due to MDHHS
- **February 28, 2026** – CCBHC Cost Report, Supplemental Cost Report, and Audited Financial Statements (non-CMHSPs) Due to MDHHS
- **February 28, 2026** – MDHHS Stakeholder Survey due to MDHHS
- **March 15, 2026** – Behavioral Health Provider Staffing and Expense Survey Due to MDHHS