Certified Community Behavioral Health Clinic (CCBHC) Services
WSA Job Aid

CCBHC WSA Recommendation

1. Start: New CCBHC client or existing CCBHC client not in the WSA
   a. Medicaid?
      i. On the beneficiary search page, click "Recommend Beneficiary" and enter beneficiary ID (Medicaid ID)
      ii. Click search
      iii. Match found?
         1. If yes, click "recommend case"
         2. If no, click "recommend non-medicaid beneficiary" and move to step b.ii
      iv. Input case start date and all other required data fields
         1. The case start date must be set to the 1st of the month of intake. It cannot go back more than 6 months in the past and cannot be set for more than 1 month in the future
         2. Note: Consumer ID is not required for Medicaid beneficiaries, however, if you have access to the consumer ID, please include it
      v. Verify the individual meets clinical criteria and select the check box attesting to that verification
      vi. Verify that you have obtained a signed and valid (within the last 12 months) MDHHS-5515 form release of information. Check the box attesting to that verification.
         1. Ensure SWMBH is listed in section 2a and there is a signature in section 4
      vii. Upload the signed MDHHS-5515 form to the WSA
      viii. Click "recommend case"
   b. Non-Medicaid?
      i. Click "Recommend Beneficiary" and select "Recommend Non-Medicaid Beneficiary"
      ii. Input PIHP person ID (aka Consumer ID) into the Consumer ID field
      iii. Input case start date and all other required data fields
         1. The case start date must be set to the 1st of the month of intake. It cannot go back more than 6 months in the past and cannot be set for more than 1 month in the future
      iv. Verify the individual meets clinical criteria and select the check box attesting to that verification
      v. Verify that you have obtained a signed and valid (within the last 12 months) MDHHS-5515 form release of information. Check the box attesting to that verification.

       1. Ensure SWMBH is listed in section 2a and there is a signature in section 4
    vi. Upload the signed MDHHS-5515 form to the WSA
    vii. Click "recommend case"

CCBHC WSA Disenrollment

1. Reasons a CCBHC would recommend disenrollment:
   a. Individual is deceased
   b. Individual moves and needs to be assigned to a new CCBHC. This is only relevant until the "transfer" function is developed.
2. Reasons a PIHP would disenroll:
   a. Individual is deceased
   b. Individual was assigned to a CCBHC in error
   c. Individual moves and needs to be assigned to a new CCBHC. This is only relevant until the "transfer" function is developed.
3. If you would like to recommend a beneficiary for disenrollment, search the beneficiary by their Medicaid ID or Consumer ID in the WSA
4. Once found, click "edit"
5. Move the client to your work queue by clicking "Move to my Work Queue" in the top right corner
6. At the top of the dashboard, click on the "disenrollment" tab
7. Enter the disenrollment date
8. Select the disenrollment reason
   a. Note- There are several disenrollment reason options. Per the current handbook, a recipient can only be disenrolled for the reasons listed in step 1. Please only select a reason from that list.
9. (Optional) Add a disenrollment comment
10. Click save and submit at the bottom of the screen

CCBHC WSA Transfer

The transfer function has yet to be developed by Optum.