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(Updates may be available here)

DIRECTORY

Collaborative Care Service Organizations (CSOs)

Providing CoCM Implementation Support and/or Staff to Health Systems and Primary Care Practices

M H T A R I

Mental Health Treatment
and Research Institute



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Introduction to the Directory

This Directory of Collaborative Care Model service organizations (CSOs) has been funded as a public service by the Mental Health Treatment and Research Institute LLC (MHTARI), a tax-exempt subsidiary of The Bowman Family Foundation (BFF). The intent of the Directory is to help healthcare providers identify resources and expertise that may reduce or eliminate key hurdles related to implementing the Collaborative Care Model (CoCM) for integrating behavioral health treatment into primary care (including pediatrics) and other medical settings.

Despite the compelling evidence base supporting use of CoCM, and in the face of an acute shortage of mental health and substance use (MHSUD) treatment practitioners, broadscale adoption of CoCM has not yet occurred. This is due to a number of factors, including lack of clinical/operational expertise, cost of implementation and scaling, and reluctance to modify existing medical practice workflows. To assist health systems and medical practices in addressing these barriers, a growing number of CSOs offer an array of CoCM support services—ranging from (a) implementation consultation to (b) the delivery of a comprehensive turnkey CoCM program with Behavioral Care Managers (BCMs), Psychiatric Consultants (PCs), and software provided on an ongoing basis. Despite the growth of the CSO industry, the visibility of many CSOs remains limited. Until now, there has been no objective, easily accessible repository of information available to assist providers in

identifying CSOs and reviewing relevant data regarding their various services.

Our intent is to include all CSOs that have expressed a desire to be included and that possess the experience, expertise, and capacity to provide multiple CoCM support services. It is recommended that a provider considering retention of a CSO not listed in the Directory ask such CSO for the type of data and other information included herein.

The Directory is offered for educational purposes only. MHTARI and BFF are neither endorsing the CSOs listed, nor warranting the services that any CSO offers. Medical practices and health systems considering implementation of CoCM should rely upon the complete information gathered in the course of their own due diligence, including information they receive directly from CSOs.

Please see DISCLAIMER on the last page of this Directory

Updates to the Directory

We intend to update the Directory periodically as new information becomes available. In order to assist us with maintaining our database and increasing the number of included CSOs, we encourage Directory users and CSOs to submit relevant information to CoCMDirectory@mhtari.org.

Why Implementation of the Collaborative Care Model (CoCM) Is So Important

Accessing timely, affordable care for MHSUDs is a challenge for most people. As the need for MHSUD services continues to outpace the supply of accessible MHSUD clinicians, our primary care system is uniquely positioned to help address this problem. This is because:

- Physical and behavioral illnesses are closely intertwined, and often co-occurring
- Most office-based MHSUD care is already being delivered in primary care settings
- Most psychiatric drugs are prescribed in primary care settings
- In rural/underserved areas, primary care is often the only setting where MHSUD care is available

However, broadscale screening for MHSUDs in primary care is lacking and, when these conditions are identified, PCPs rarely have adequate training and support to effectively treat them. Only a small percentage of individuals treated in primary care for MHSUDs receive effective care for these conditions, leaving many undiagnosed and untreated. Equipping primary care providers to more effectively identify and treat MHSUDs can significantly increase access to MHSUD care for millions of people every year.

CoCM is an evidence-based approach to integrating MHSUD treatment into primary care settings developed at the University of Washington's <u>AIMS Center</u>. Under CoCM, primary care providers—supported by Behavioral Care Managers (BCMs), Psychiatric Consultants (PCs) and

Measurement Based Care (MBC) standardized clinical assessment tools—maintain responsibility for a patient's MHSUD treatment. CoCM reduces reliance on the availability of in-network MHSUD specialists because PCs are able to help many more patients than would be possible under traditional "one-on-one" care models. In addition, CoCM reduces the frustration that providers and their patients experience when trying to schedule initial MHSUD visits with in-network MHSUD specialists.

In more than 90 randomized controlled trials **and** in day-to-day practice, CoCM has been shown to positively impact clinical outcomes for mild-to-moderate depression, anxiety, and suicide ideation, as well as a growing list of other non-acute MHSUDs. CoCM has also been shown to **improve health equity** and increase patient and provider satisfaction. There is mounting evidence, **from large-scale studies in day-to-day primary care practices**, of (a) its association with <u>reductions in total healthcare costs</u>, driven by reductions in <u>medical</u> costs, and (b) the efficacy of CoCM in reducing suicide risk: <u>Suicide Risk Reduction Study 1</u>; Suicide Risk Reduction Study 2.

Medicare, most commercial insurers, and more than 30 state Medicaid programs reimburse primary care providers for delivering CoCM, using payment codes developed by CMS. These codes enable primary care providers to be reimbursed for delivering CoCM services as well as for the time spent to effectively refer patients not suitable for CoCM to MHSUD specialists.

CoCM Service Organizations (CSOs): Overview

The Directory includes CSOs with varying organizational profiles with respect to size, geographic service area, healthcare organizations supported and years of experience. Most of the CSOs listed support patients of all ages and with all major types of health insurance coverage (Medicare, Medicaid, and commercial). A Summary Table on page 5 provides an overview of the services provided by each CSO, and detailed CSO profiles are provided beginning on page 6.

In the Summary Table, CSOs are grouped according to whether they offer comprehensive **Turnkey CoCM** programs or targeted support through **Technical Assistance**.

The **Turnkey CSOs** offer a comprehensive package of tools, technology, training and support needed for a medical practice/health system to implement and **deliver ongoing**, reimbursable CoCM services. Under a turnkey CoCM program, clinical program staff—Behavioral Care Managers (BCMs) and Psychiatric Consultants (PCs) can be provided by either the CSO or the client practice/health system; however, more than half of turnkey CSOs listed in this Directory use only, or predominantly, BCMs employed or contracted by the CSO.

The **Technical Assistance CSOs** offer unbundled CoCM implementation consultation and/or tools and support services that fill specific gaps (e.g., BCMs, PCs, patient registry, etc.). None of the listed CSOs providing technical assistance services offers a turnkey CoCM program.

Of the 17 CSOs described in the Directory, 9 organizations offer Turnkey CoCM programs and 8 offer CoCM Technical Assistance services. Highlights include:

Turnkey CSOs

- All offer the full complement of CoCM services included in the AIMS Center model:
 - ♦ All can provide BCMs virtually; more than half can provide BCMs onsite.
 - Most use only, or predominantly, licensed clinicians as BCMs.
 - Most of the CSOs employ their own BCMs (vs. contract).
 - More than half use only BCMs employed or contracted by the CSO.
 - All can provide PCs; more than half employ PCs (vs. contract); nearly all will also work with PCs provided by the practice/health system.
 - All offer a patient registry; most registries are proprietary to the CSO.
 - All incorporate standardized symptom checklists to support Measurement Based Care (MBC) into their technology platform.
- All provide virtual training for the client's PCPs, pediatricians, and other practitioners who refer patients to CoCM; nearly half will provide this training onsite.
- All provide training/guidance to practices/health systems on submitting CoCM billing codes.
- Only one offers CoCM implementation consultation as a standalone service.
- Nearly all price their services based on billed claims; most are based on a percentage of claims revenue.

Technical Assistance CSOs

- Most offer implementation consultation as a standalone service. Some provide an array of other online resources.
- Half provide a patient registry; others will help a practice/health system develop its own registry.
- All either incorporate standardized symptom checklists to support Measurement Based Care (MBC) into their technology platform or can identify and help practices/health systems incorporate standardized symptom checklists for MBC.
- Nearly all offer onsite and virtual support or online tools and resources for training PCPs, Pediatricians, other practitioners who refer patients into CoCM and BCMs.
 - Nearly all offer onsite and virtual billing support/guidance and/or online tools and resources to ensure appropriate CoCM claims submission.
- 2 of these CSOs employ and can provide BCMs and PCs.

Summary Table of CSOs

			CoCM SERVICES PROVIDED BY CSO					PRICING MODEL										
		se	CM			affing by (s and PCs				ning for Practi alth System St		۸	BC)	70	rees	r.	De r	
CoCM SERVICE ORGANIZATIONS (CSOs), BY SERVICE CATEGORY	Vears Providing CoCM Services Number of State in Which CoCM	Number of States in Which CoCM Services Are Provided	Number of States in Which CoCM Services Are Provided	Standalone CoCM Implementation Consultation	BCMs	BCMs Clinically Licensed	BCMs Employed or Contracted	PCs	PCs Employed or Contracted	BCMs	Primary Care Physicians and Other Referring Practitioners ²	Billing Staff	Patient Registry	Measurement Based Care (MBC)	Based on Billed Claims	Consulting and Other Service Fees	Implementation Fees	Per Enrolled CoCM Patient Per Month Fee
TURNKEY CSOs ¹		Currently																
Bend Health	3	10	N	V ³	N	Е	V 3	Е	V ³	V	V	Р	BI	Υ	N	N	Υ	
C3 Healthcare Rx/MindHealthy®	5	10+	Υ	OS+V ⁴	Υ	Е	V 6	Е	OS+V	OS+V	V	Р	BI	Υ	N	N	N	
Concert Health	8	19	N	OS+V	Υ	Е	V 6	E+C	N	V	V	Р	BI	Υ	N	N 10	N	
evolvedMD	8	5	N	OS+V	Υ	Е	V 6	Е	N	OS+V	V	NP	BI	Y 8	N	Υ	N	
Fort Health	1	2	N	OS+V	Υ	Е	V 6	Е	N	V	V	Р	BI	Υ	N	N	N	
Mindoula	9	24	N	V	Some	E	٧	С	N	OS+V	V	Р	BI	Υ	N	N	N	
Mirah	2	14	N	V ⁵	Some	C 5	V ⁵	C ⁵	V	V	V	Р	BI	N	N	N	Υ	
NeuroFlow	8	12+	N	OS+V ⁴	NR	NR	V 6	NR	OS+V	OS+V	OS+V	Р	BI	NR	NR	NR	NR	
Nudj Health	3	4	N	V	Υ	E	V 6	Е	N	V	V	Р	BI	Υ	N	N	Υ	
TECHNICAL ASSISTANCE CSOs		To Date																
AIMS Center	20+	Most States	Υ	N	N/A	N/A	N	N/A	OS+V	OS+V	OS+V	Р	BI+R/P	N	Υ	N	N	
American Psychiatric Association	9	N/A	N	N	N/A	N/A	N	N/A	N	N	N	N	R/P	N/A	N/A	N/A	N/A	
Brookline Center for Community Mental Health	1	1	Υ	OS+V ⁴	N	Е	V 6	Е	OS+V	OS+V	OS+V	NP	ВІ	Υ	Υ	N	N	
Collaborative Family Healthcare Association (CFHA)	9	10+	N	N	N/A	N/A	N	N/A	OS+V	OS+V	OS+V	N	R/P	N	Υ	N	N	
Health Management Associates (HMA)	10+	15+	Υ	N	N/A	N/A	N	N/A	OS+V	OS+V	OS+V	N ⁷	R/P ⁷	N	Υ	N	N	
North Carolina Area Health Education Centers (NC AHEC)	2	1	Υ	N	N/A	N/A	N	N/A	OS+V	OS+V	OS+V	NP	BI	N/A ⁹	N/A	N/A	N/A	
PRISM	10+	1	Υ	N	N/A	N/A	N	N/A	OS+V	OS+V	OS+V	N	R/P	N	Υ	N	N	
Sheppard Pratt Solutions (SPS)	5	2	Υ	OS+V ⁴	Υ	Е	V 6	Е	OS+V	OS+V	OS+V	Р	BI	Ν	Υ	N	N	

- ¹ Provide tools, technology, training and support needed to implement and deliver, **on an ongoing basis**, reimbursable CoCM services. Most Turnkey CSOs utilize **exclusively** their own CoCM clinical staff (BCMs, PCs); others will work with BCMs and PCs from the client practice/health system.
- ² Practice/health system PCPs, Pediatricians, other practitioners who refer patients into CoCM
- 3 Utilizes predominantly CSO-provided BCMs and PCs, but in limited circumstances will train and work with BCMs and PCs provided by client practices/health systems.
- ⁴ CSO can provide its own BCMs; however, CSO will work with BCMs provided by client practices/health systems.
- ⁵ Will work with BCMs and PCs provided by client/practices/health systems. Alternatively, contracted BCMs and PCs can be provided through other organizations arranged by Mirah.
- ⁶ CSO can provide its own PCs; however, CSO will work with PCs provided by client practices/health systems.
- ⁷ Will help practice build into its electronic health record
- ⁸ Flat rate per billed CPT code based on geographic region; practice invoice is based on completed encounters
- 9 Supported through statewide partnerships (see NC AHEC details under CoCM Service Organizations (CSOs): Detailed Profiles)
- ¹⁰ Not in states with existing CoCM clients

LEGEND

BCM = Behavioral Care Manager NR = Not reported

BI = Built Into Technology Platform OS+V = Onsite and Virtual

C = Contracted P = Proprietary to CSO

E = Employed PC = Psychiatric Consultant

N/A = Not applicable R/P = Recommended or Provided

N = No V = Virtual only

NP = Not proprietary to CSO Y = Yes

CoCM Service Organizations (CSOs): Detailed Profiles

CSOs included in this Directory are listed below in alphabetical order. For each, a description is provided of the organization, including contact information, CoCM services offered, and patient populations served (e.g., primary care adults, pediatric patients, women's health, etc.).

AIMS Center Technical Assistance

The AIMS Center (AIMS) at the University of Washington developed the Collaborative Care Model (CoCM) more than 20 years ago. As an academic institution, The AIMS Center maintains knowledge of the latest research on topics relevant to CoCM and continues to conduct research related to CoCM and contribute to an evolving understanding of the populations, settings, conditions, and interventions that promote the integration of behavioral health services into medical settings.

The AIMS Center has helped hundreds of healthcare organizations integrate behavioral health services into medical settings. The organization provides CoCM consultation and technical tools and assistance, including a patient registry; its website serves as a key source of training and information for organizations implementing CoCM.

Implementation coaching includes development of patient inclusion criteria, clinical workflows, billing and financing strategies, metrics for program monitoring, and sustainment planning. Clinical training is provided for all members of the CoCM treatment team—primary care providers, Psychiatric Consultants and Behavioral Health Care Managers—and combines didactic and live online content focused on skill building. An education team includes instructional designers who ensure that the training conforms to state-of-the-art training methods.

Specific CoCM support services offered by the AIMS Center are outlined below. Additional information regarding the organization and its services can be found at: https://aims.uw.edu/collaborative-care/

Organization Type	Academic/Training and Technical Assistance Center
Contact	Diane Powers
Headquarters	Seattle, WA
Years providing CoCM services	20+
Geographic service capability	National/International
States in which CoCM services have been provided	The AIMS Center has provided CoCM support services for organizations in most states.
Patient Populations Supported (CoCM)	
Adult	YES
Pediatric	YES
Geriatric	YES
Other	Not Reported
Healthcare Organizations Supported	
State/local health systems (CHCs, FQHCs, RHCs)	YES
Private/commercial ACOs	YES

Independent non-facility-based medical practices	YES
Facility-based medical centers	YES
Private healthcare systems	YES
nsurer/Payer Experience	
Managed Medicaid Plans	YES
Managed Medicare Plans	YES
Commercial health plans	YES
Employers	Not Reported
Other organizations	Not Reported
Typical Implementation Timeframe	16 months
CoCM Services Provided	
CoCM implementation consultation only (standalone/unbundled)	YES
Turnkey CoCM Program (all core CoCM component services OTHER THAN CoCM staffing by CSO)	NO
CoCM Staffing by CSO	
Behavioral Care Managers (BCMs)	NO
Percent clinically licensed	N/A
Percent employed (vs. contracted)	N/A
Psychiatric Consultants (PCs)	NO
Percent employed (vs. contracted)	N/A
Training for Practice/Health System Staff	
BCMs	YES – onsite and virtual
Primary Care Providers and Other Practitioners referring patients into CoCM	YES – onsite and virtual
Billing staff	YES – onsite and virtual
Other Training	Online resources for staff skills training, workflows, billing, etc.
Patient Registry	YES
Is registry proprietary to organization?	YES. The AIMS Center licenses two different registries—one for us in research and one in regular clinical practice.
Measurement Based Care (MBC) Technology/Platform	YES. The AIMS Center has incorporated MBC tools for adult and pediatric settings into its registry and provides recommendations regarding specific tools that are validated for outcomes measurement.
Other Technology/tools	Not Reported
Other CoCM Services Offered	Client Organization Leadership training More on website: https://aims.uw.edu
Pricing Model(s)	
Based on billed claims	NO
Consulting and other service fees	Consulting and technical assistance services are priced on an hourly project consulting rate basis. AIMS also offers topic/audience-specific training fees (per trainee, per group, per session, per hour).
Implementation fees	NO
Per Enrolled (in CoCM) Patient Per Month	NO
Other	Not Reported

American Psychiatric Association

Technical Assistance

The American Psychiatric Association (APA) is the premier psychiatric organization advancing mental health as part of general health and well-being, focusing on promoting the rights and best interests of patients and those actually or potentially making use of psychiatric services for mental health and substance use disorders (MHSUDs). Following its mission of promoting universal and equitable access to the highest quality care for all people affected by MHSUDs, APA offers medical practices and health systems nationally

a wide range of online tools and support to assist in the implementation of the collaborative care model (CoCM).

Specific CoCM support services offered by APA are outlined below. Additional information regarding the organization and its services can be found at: https://www.psychiatry.org/psychiatrists/practice/professional-interests/integrated-care/implement

Organization Type	Professional Association
Contact	Becky Yowell
Headquarters	Washington, DC
Years providing CoCM Services	9
Geographic service capability	National
States in which CoCM services have been provided	N/A
Patient Populations Supported (CoCM)	
Adult	YES
Pediatric	YES
Geriatric	YES
Other	Perinatal and SUD populations
Healthcare Organizations Supported	
State/local health systems (CHCs, FQHCs, RHCs)	YES
Private/commercial ACOs	YES
Independent non-facility-based medical practices	YES
Facility-based medical centers	YES
Private healthcare systems	YES
Insurer/Payer Experience	
Managed Medicaid Plans	YES
Managed Medicare Plans	YES
Commercial health plans	YES
Employers	YES
Other organizations	Academic institutions – Psychiatric Residency Programs
Typical Implementation Timeframe	N/A

CoCM implementation consultation only (standalone/unbundled)	NO (online tools and resources)
Turnkey CoCM Program (all core CoCM component services OTHER THAN CoCM staffing by CSO)	NO
CoCM Staffing by CSO	
Behavioral Care Managers (BCMs)	NO
Percent clinically licensed	N/A
Percent employed (vs. contracted)	N/A
Psychiatric Consultants (PCs)	NO
Percent employed (vs. contracted)	N/A
Training for Practice/Health System Staff	
BCMs	Online tools and resources available
Primary Care Providers and Other Practitioners referring patients into CoCM	Online tools and resources available
Billing staff	Online tools and resources available
Other Training	Not Reported
Patient Registry	NO
Is registry proprietary to organization?	N/A
Measurement Based Care (MBC) Technology/Platform	General online education and resources
Other Technology/tools	Not Reported
Other CoCM Services Offered	Assistance in locating qualified Psychiatric Consultants via: qualityandpayment@psych.org
	Provide online educational, training, other technical assistance https://www.psychiatry.org/psychiatrists/practice/professional-interests/integrated-care/implement
ricing Model(s)	
Based on billed claims	N/A
Consulting and other service fees	N/A
Implementation fees	N/A
Per Enrolled (in CoCM) Patient Per Month	N/A
Other	N/A

Bend Health

Turnkey CoCM Services

Bend Health (Bend) partners with pediatric practices and health systems to provide turnkey collaborative care services for individuals up to the age of 25. CoCM is a core component of their national virtual pediatric mental health service offerings, designed to improve access to and reduce the cost of high-quality mental health care for children and families.

Bend's turnkey CoCM services are built on a data-driven technology platform that provides an efficient and highly-scalable integrated care solution in the mental health sector. The

technology is combined with coaching and access to pediatric mental health professionals and Psychiatric Consultants for pediatricians. Bend services are available through partnerships with leading insurers, employers, health systems and self-pay patients.

Specific CoCM support services offered by Bend are outlined below. Additional information regarding the organization and its services can be found at: https://www.bendhealth.com/

Organization Type	Private
Contact	Kurt Roots
Headquarters	Madison, WI
Years providing CoCM Services	3
Geographic service capability	National
States in which CoCM services are currently provided	CA, CT, IL, MA, MN, NH, RI, TX, WA, WI
Patient Populations Supported (CoCM)	
Adult	YES – up to age 25
Pediatric	YES
Geriatric	YES
Other	Not Reported
Healthcare Organizations Supported	
State/local health systems (CHCs, FQHCs, RHCs)	NO
Private/commercial ACOs	NO
Independent non-facility-based medical practices	YES
Facility-based medical centers	YES
Private healthcare systems	YES
Insurer/Payer Experience	
Managed Medicaid Plans	YES
Managed Medicare Plans	NO
Commercial health plans	YES
Employers	YES
Other organizations	Not Reported
Typical Implementation Timeframe	Variable, depending on site-specific needs

CoCM implementation consultation only (standalone/unbundled)	NO
Turnkey CoCM Program (all core CoCM component services OTHER THAN CoCM staffing by CSO)	YES
CoCM Staffing by CSO	
Behavioral Care Managers (BCMs)	YES – virtual (Predominantly use ONLY Bend BCMs)
Percent clinically licensed	o% (BCMs are not licensed)
Percent employed (vs. contracted)	100% employed
Psychiatric Consultants (PCs)	YES – virtual (Predominantly use ONLY Bend PCs)
Percent employed (vs. contracted)	100% employed
Training for Practice/Health System Staff	
BCMs	YES – virtual
Primary Care Providers and Other Practitioners referring patients into CoCM	YES – virtual
Billing staff	YES – virtual
	Bend supports practices in submitting bills for CoCM services and provides support for denial/appeals processes.
Other Training	Not Reported
Patient Registry	YES
Is registry proprietary to organization?	YES
Measurement Based Care (MBC) Technology/Platform	YES
Other Technology/tools	Not Reported
Other CoCM Services Offered	Not Reported
ricing Model(s)	
Based on billed claims	YES
Consulting and other service fees	NO
Implementation fees	NO
Per Enrolled (in CoCM) Patient Per Month	YES
Other	NO

Brookline Center for Community Mental Health

Technical Assistance

The Brookline Center (Brookline) provides initial and ongoing implementation support and program evaluation to practices including training and consultation on the Collaborative Care Model as well as other relevant behavioral health topics for primary care providers.

Brookline partners with primary care practices to provide Collaborative Care services to their patients. Patients are referred by their PCP to work with a full-time, trained care manager who is embedded on-site at the practice and can assist with assessment, identification of patient goals, and connection to specialty care and/or community resources. In addition to a Psychiatric Consultant (for adults as well as children and adolescents) to provide weekly consultation

to the medical providers for diagnostic clarification, treatment goals, and medication management, the CoCM team includes a licensed behavioral health clinician to assist with patient screening and risk assessments, provide clinical consultation, and to receive referrals for short-term, evidence-based treatment. Brookline provides participating practices with access to a patient registry to track individual and practice-wide outcomes and care management time—per patient, per month—for billing purposes.

Specific CoCM support services offered by Brookline are outlined below. Additional information regarding the organization and its services can be found at: https://www.brooklinecenter.org/

Organization Type	Private, Non-Profit
Contact	lan Lang
	Brookline, MA
Years providing CoCM Services	1
Geographic service capability	Massachusetts
States in which CoCM services have been provided	Massachusetts
Patient Populations Supported (CoCM)	
Adult	YES
Pediatric	YES
Geriatric	YES
Other	Families
Healthcare Organizations Supported	
State/local health systems (CHCs, FQHCs, RHCs)	NO
Private/commercial ACOs	NO
Independent non-facility-based medical practices	YES
Facility-based medical centers	NO
Private healthcare systems	NO
Insurer/Payer Experience	
Managed Medicaid Plans	NO
Managed Medicare Plans	NO
Commercial health plans	YES
Employers	NO
Other organizations	Not Reported
Typical Implementation Timeframe	6–8 weeks

CoCM implementation consultation only (standalone/ unbundled)	YES
Turnkey CoCM Program (all core CoCM component services OTHER THAN CoCM staffing by CSO)	NO
CoCM Staffing by CSO	
Behavioral Care Managers (BCMs)	YES – onsite and virtual
Percent clinically licensed	o% (BCMs are not licensed)
Percent employed (vs. contracted)	100% employed
Psychiatric Consultants (PCs)	YES – virtual
Percent employed (vs. contracted)	100% employed
Training for Practice/Health System Staff	
BCMs	YES – onsite and virtual
Primary Care Providers and Other Practitioners referring patients into CoCM	YES – onsite and virtual
Billing staff	YES – onsite and virtual
Other Training	Not Reported
Patient Registry	YES
Is registry proprietary to organization?	NO
Measurement Based Care (MBC) Technology/Platform	YES
Other Technology/tools	Not Reported
Other CoCM Services Offered	Not Reported
ricing Model(s)	
Based on billed claims	YES
Consulting and other service fees	YES
Implementation fees	NO
Per Enrolled (in CoCM) Patient Per Month	NO
Other	NO

C3 Healthcare Rx/MindHealthy®

Turnkey CoCM Services

C3 Healthcare Rx (C3) is a leading value-based care organization that offers turnkey CoCM services through its affiliate MindHealthy®. CoCM is part of the organization's broader service array designed to support providers and improve patient chronic disease outcomes. These include turnkey services in Chronic Care Management, Pharmacy and Medication Management as well as CoCM.

MindHealthy's® CoCM offering incorporates a proprietary software solution that drives ease of patient referrals, seamless provider workflow, enhanced patient engagement, clinical outcomes and administrative documentation

to support CoCM billing and audits, regardless of the electronic health record system used by a practice. Their clinical support team is led by a psychiatrist and includes licensed Psychiatric Nurse Practitioners, MSWs, LCSWs and LCASs—who are matched with the clinical needs of CoCM patients served.

Specific CoCM support services offered by C3/MindHealthy® are outlined below. Additional information regarding the organization and its services can be found at: https://www.c3healthcarerx.com/mindhealthy

Organization Type	Private
Contact	Brooke Gans
Headquarters	Morrisville, NC
Years providing CoCM Services	5
Geographic service capability	National
States in which CoCM services are currently provided	CT, FL, IL, NC, NY, PA, SC, TN, TX, VA
Patient Populations Supported (CoCM)	
Adult	YES
Pediatric	YES
Geriatric	YES
Other	Support all medical specialties, including Addiction, Pain, OB-GYN
Healthcare Organizations Supported	
State/local health systems (CHCs, FQHCs, RHCs)	YES
Private/commercial ACOs	YES
Independent non-facility-based medical practices	YES
Facility-based medical centers	YES
Private healthcare systems	YES
nsurer/Payer Experience	
Managed Medicaid Plans	YES
Managed Medicare Plans	YES
Commercial health plans	YES
Employers	YES
Other organizations	Nonprofit organizations, Concierge Medicine, anywhere with virtual mental health needs
Typical Implementation Timeframe	<2 months

CoCM Services Provided	
CoCM implementation consultation only (standalone/unbundled)	YES
Turnkey CoCM Program (all core CoCM component services OTHER THAN CoCM staffing by CSO)	YES
CoCM Staffing by CSO	
Behavioral Care Managers (BCMs)	YES – onsite and virtual
Percent clinically licensed	100% licensed
Percent employed (vs. contracted)	100% employed
Psychiatric Consultants (PCs)	YES – virtual
Percent employed (vs. contracted)	100% employed
Training for Practice/Health System Staff	
BCMs	YES – onsite and virtual
Primary Care Providers and Other Practitioners referring patients into CoCM	YES – onsite and virtual
Billing staff	YES – virtual
	Internal billing team can provide turnkey billing services for a fee or will work closely with a health system partner for the firs 90 days to train, support reconciliations, prior authorizations, denials, etc. Ongoing support provided as needed with quarter audits of reimbursement activity.
Other Training	Not Reported
Patient Registry	YES
Is registry proprietary to organization?	YES
Measurement Based Care (MBC) Technology/Platform	MBC is built into proprietary software to automatically track reduction in screening-based scores and is applied to the patient registry. This is coupled with oversight of care plans by Psychiatric Consultants in collaboration with providers.
Other Technology/tools	Proprietary (EMR-agnostic) CM tool to time sessions and suppobilling documentation and patient registry
Other CoCM Services Offered	Not Reported
Pricing Model(s)	
Based on billed claims	YES
	MindHealthy's® fee structure is aligned to CoCM codes and the first invoice is not due for 60 days, to allow time for the practice to receive the first month's reimbursement.
Consulting and other service fees	NO – unless unusually complex consultation is requested
Implementation fees	NO
Per Enrolled (in CoCM) Patient Per Month	NO
Other	Not Reported

Technical Assistance

Collaborative Family Healthcare Association (CFHA)

The Collaborative Family Healthcare Association (CFHA) provides resources and support to healthcare organizations across the country to help them integrate MHSUD services, including through CoCM, into primary care. Its mission is to empower healthcare professionals to integrate services, enhancing the overall patient care experience by providing patients and their families with a fully integrated care journey aimed at comprehensive health and healing.

CFHA offers CoCM implementation consultation and technical assistance, sharing of healthcare organizations'

best practices in integrated care, educational and training resources including a peer-reviewed journal, extensive online content and a podcast series.

Specific CoCM support services offered by CFHA are outlined below. Additional information regarding the organization and its services can be found at https://www.cfha.net/

Organization Type	Non-Profit multi-disciplinary member association
Contact	Martha Saucedo
leadquarters	Chapel Hill, NC
ears providing CoCM Services	9
ieographic service capability	National
tates in which CoCM services have been provided	10+, including AR, CA and WI
atient Populations Supported (CoCM)	
Adult	YES
Pediatric	YES
Geriatric	YES
Other	Perinatal and SUD populations
lealthcare Organizations Supported	
State/local health systems (CHCs, FQHCs, RHCs)	YES
Private/commercial ACOs	YES
Independent non-facility-based medical practices	YES
Facility-based medical centers	YES
Private healthcare systems	YES
nsurer/Payer Experience	
Managed Medicaid Plans	YES
Managed Medicare Plans	YES
Commercial health plans	YES
Employers	Not Reported
Other organizations	Not Reported
Typical Implementation Timeframe	Variable, depending on site-specific needs

CoCM implementation consultation only (standalone/unbundled)	NO (CFHA offers online training tools/resources)
Turnkey CoCM Program (all core CoCM component services OTHER THAN CoCM staffing by CSO)	NO
CoCM Staffing by CSO	
Behavioral Care Managers (BCMs)	NO
Percent clinically licensed	N/A
Percent employed (vs. contracted)	N/A
Psychiatric Consultants (PCs)	NO
Percent employed (vs. contracted)	N/A
Training for Practice/Health System Staff	
BCMs	YES – onsite and virtual
Primary Care Providers and Other Practitioners referring patients into CoCM	YES – onsite and virtual
Billing staff	YES – onsite and virtual
Other Training	Onsite BCM shadowing upon request
Patient Registry	NO
Is registry proprietary to organization?	N/A
Measurement Based Care (MBC) Technology/Platform	Online training tools/resources
Other Technology/tools	Not Reported
Other CoCM Services Offered	Integrated Care Map, CFHA Learns, Learning Experiences (can be found at the CFHA website), Conferences, SIG CoCM ListServ
	Available through CFHA website
ricing Model(s)	
Based on billed claims	NO
Consulting and other service fees	YES - hourly
Implementation fees	NO
Per Enrolled (in CoCM) Patient Per Month	NO
Other	NO

Concert Health (Concert) partners with leading health systems, independent medical groups, Federally-Qualified Health Centers, and Rural Health Clinics to offer turnkey CoCM services in states across the country, in settings such as primary care, women's health, and pediatrics. They provide seamless integration of MHSUD services into the electronic health records of practitioners referring patients into CoCM, to ensure continuity of care and facilitate efficient tracking and management of clinical outcomes. Concert also provides guidance and training on revenue cycle management, financial reporting, and clinical metric dashboards.

The organization collaborates closely with clients to keep them at the forefront of advancements in CoCM and in the MHSUD field more broadly, disseminating research findings through various channels, including reports, blogs, papers, and peer-reviewed publications. Concert also undergoes an external review process and engages with experts in the field to ensure the quality and credibility of their work.

Specific CoCM support services offered by Concert are outlined below. Additional information regarding the organization and its services can be found at: https://concerthealth.com/

Organization Type	Private
Contact	<u>Virna Little</u>
Headquarters	San Diego, CA
Years providing CoCM Services	8
Geographic service capability	National
States in which CoCM services are currently provided	AR, AZ, CA, CT, FL, GA, IL, MA, MD, MO, MT, NC, NY, OK, PA, SC, TX, WA, WI
Patient Populations Supported (CoCM)	
Adult	YES
Pediatric	YES
Geriatric	YES
Other	OB-GYN (women's health)
Healthcare Organizations Supported	
State/local health systems (CHCs, FQHCs, RHCs)	YES
Private/commercial ACOs	YES
Independent non-facility-based medical practices	YES
Facility-based medical centers	YES
Private healthcare systems	YES
Insurer/Payer Experience	
Managed Medicaid Plans	YES
Managed Medicare Plans	YES
Commercial health plans	YES
Employers	NO
Other organizations	Not Reported
Typical Implementation Timeframe	9 weeks

CoCM implementation consultation only (standalone/unbundled)	NO
Turnkey CoCM Program (all core CoCM component services OTHER THAN CoCM staffing by CSO)	YES
CoCM Staffing by CSO	
Behavioral Care Managers (BCMs)	YES – onsite and virtual (Use ONLY Concert BCMs)
Percent clinically licensed	90% licensed (10% pending)
Percent employed (vs. contracted)	100% employed
Psychiatric Consultants (PCs)	YES – virtual
Percent employed (vs. contracted)	Most are employed
Training for Practice/Health System Staff	
BCMs	NO
Primary Care Providers and Other Practitioners referring patients into CoCM	YES – virtual
Billing staff	YES – virtual
	Concert works with organizations on specific needs and workflows based on organizational processes and electronic health record system used, and is familiar with all electronic health records.
Other Training	Not Reported
Patient Registry	YES
Is registry proprietary to organization?	YES
Measurement Based Care (MBC) Technology/Platform	YES
Other Technology/tools	Not Reported
Other CoCM Services Offered	Not Reported
ricing Model(s)	
Based on billed claims	YES – fixed rates according to payer type
Consulting and other service fees	NO
Implementation fees	Not in states with existing CoCM clients
Per Enrolled (in CoCM) Patient Per Month	NO
Other	NO

evolvedMD provides turnkey CoCM and related services to advance the integration of behavioral healthcare in modern primary care. The organization's approach places behavioral health specialists on site and in-person at more than 140 clinics across Arizona, Utah, Colorado, and New Mexico. These professionals, along with care coordinators and Psychiatric Consultants, become part of the primary care team treating the whole patient, from pediatrics to geriatrics.

This support team also includes a Clinical Supervisor in order to provide practice support and access to community resources to remove patient and provider obstacles to care.

The Psychiatric Consultant works closely with the therapist and primary care provider to assist with prescription medications and provide additional support as needed. evolvedMD recently launched a first-of-its-kind training program for integrated care clinicians, with costs fully covered by evolvedMD and additional financial incentives available to those completing the program.

Specific CoCM support services offered by evolvedMD are outlined below. Additional information regarding the organization and its services can be found at: https://www.evolvedmd.com/our-model

Organization Type	Private
Contact	Courtney Nelson
Headquarters	Scottsdale, AZ
Years providing CoCM Services	8
Geographic service capability	National
States in which CoCM services are currently provided	AZ, CO, FL, NM, UT
Patient Populations Supported (CoCM)	
Adult	YES
Pediatric	YES
Geriatric	YES
Other	Women's Health
Healthcare Organizations Supported	
State/local health systems (CHCs, FQHCs, RHCs)	NO
Private/commercial ACOs	NO
Independent non-facility-based medical practices	YES
Facility-based medical centers	YES
Private healthcare systems	YES
Insurer/Payer Experience	
Managed Medicaid Plans	YES
Managed Medicare Plans	YES
Commercial health plans	YES
Employers	NO
Other organizations	Not Reported
Typical Implementation Timeframe	90 days

CoCM implementation consultation only (standalone/unbundled)	NO
Turnkey CoCM Program (all core CoCM component services OTHER THAN CoCM staffing by CSO)	YES
CoCM Staffing by CSO	
Behavioral Care Managers (BCMs)	YES – onsite and virtual (Use ONLY evolvedMD BCMs)
Percent clinically licensed	100% – master's degree in social work, counseling or therapy
Percent employed (vs. contracted)	100% employed
Psychiatric Consultants (PCs)	YES – virtual
Percent employed (vs. contracted)	100% employed
Training for Practice/Health System Staff	
BCMs	NO
Primary Care Providers and Other Practitioners referring patients into CoCM	YES – onsite and virtual
Billing staff	YES – virtual
Other Training	Review of best practices in CoCM documentation
Patient Registry	YES
Is registry proprietary to organization?	NO
Measurement Based Care (MBC) Technology/Platform	YES
Other Technology/tools	Not Reported
Other CoCM Services Offered	Implementation, Program Design, Billing, Ongoing support
ricing Model(s)	
Based on billed claims	YES – Flat rate per billed CPT code based on geographic region practice invoice is based on completed encounters.
Consulting and other service fees	NO
Implementation fees	YES – one-time, up-front fee per FTE placed
Per Enrolled (in CoCM) Patient Per Month	Future option
Other	Not Reported

Fort Health is an early-stage child & adolescent mental health services company that provides turnkey CoCM services for medical practices serving children & adolescents (ages 4-24) and their families. In addition to CoCM services, Fort Health also offers virtual therapy and psychiatry services.

Affiliated with the Child Mind Institute, Fort Health is an independent organization dedicated to transforming the lives of children and families struggling with mental health. This partnership increases access to evidence-based mental healthcare for families who need it.

Fort Health serves a multi-specialty group practice that includes the largest number of pediatric providers in New Jersey, offering access to collaborative care services for their pediatric patients in New Jersey and Pennsylvania.

The specific CoCM support services offered by Fort Health are outlined below. Additional information regarding the organization and its services can be found at: https://www.FortHealth.com/

Organization Type	Private
Organization Type	
Contact	hello@forthealth.com
Headquarters	New York, NY
Years providing CoCM Services	1
Geographic service capability	National
States in which CoCM services are currently provided	NJ, PA
Patient Populations Supported (CoCM)	
Adult	YES – up to age 24
Pediatric	YES
Geriatric	NO
Other	NO
Healthcare Organizations Supported	
State/local health systems (CHCs, FQHCs, RHCs)	NO
Private/commercial ACOs	NO
Independent non-facility-based medical practices	YES
Facility-based medical centers	YES
Private healthcare systems	YES
Insurer/Payer Experience	
Managed Medicaid Plans	NO
Managed Medicare Plans	NO
Commercial health plans	YES
Employers	NO
Other organizations	NO
Typical Implementation Timeframe	60-90 days

CoCM implementation consultation only (standalone/unbundled)	NO
Turnkey CoCM Program (all core CoCM component services OTHER THAN CoCM staffing by CSO)	YES
CoCM Staffing by CSO	
Behavioral Care Managers (BCMs)	YES – onsite and virtual (Use ONLY Fort Health BCMs)
Percent clinically licensed	100% licensed
Percent employed (vs. contracted)	100% employed
Psychiatric Consultants (PCs)	YES – virtual
Percent employed (vs. contracted)	100% employed
Training for Practice/Health System Staff	Fort Health provides training only to referring practitioners and office managers in practices they support through their turnkey CoCM implementation. The company does not offer independent training services to other practices.
BCMs	NO
Primary Care Providers and Other Practitioners referring patients into CoCM	YES – virtual
Billing staff	YES – virtual
Other Training	Not Reported
Patient Registry	YES
Is registry proprietary to organization?	YES
Measurement Based Care (MBC) Technology/Platform	YES
Other Technology/tools	Not Reported
Other CoCM Services Offered	Not Reported
ricing Model(s)	
Based on billed claims	YES
Consulting and other service fees	NO
Implementation fees	NO
Per Enrolled (in CoCM) Patient Per Month	NO
Other	Not Reported

Health Management Associates is a national consulting firm with offices in over 30 states and has more than 700 consultants. HMA's team provides hands-on experience in the effective implementation of collaborative care based on the IMPACT model. HMA works with states, health plans, health systems, Federally-Qualified Health Centers and private primary care clinics as well as behavioral health providers on the design and implementation of collaborative care.

HMA's multi-disciplinary team comprises more than 85 dedicated experts who are physicians, nurses, psychiatric and addiction medicine providers and behavioral health clinicians. HMA is approaching 40 years in operation and the collaborative care team has existed for more than 15 years within HMA.

HMA helps organizations implement the clinical work-flow and operational considerations required for CoCM to succeed, based on experience gained in working with providers across the country. HMA has supported many organizations in tailoring the model to specific populations including pediatrics, geriatrics, OB-GYN practices and others, helping determine where flexibility can be leveraged and where model fidelity is important to long-term outcomes. HMA works closely with clients to ensure implementation is tailored to the organizational culture, clinic design, and populations served.

The specific CoCM support services offered by HMA are outlined below. Additional information regarding the organization and its services can be found at: https://www.healthmanagement.com/mass-health-acocp/care-coordination-integration/

Organization Type	Private
Contact	Gina Lasky Nancy Kamp
Headquarters	Okemos, MI
Years providing CoCM Services	10+
Geographic service capability	National
States in which CoCM services have been provided	15+, including AK, CA, CO, CT, DC, ID, MA, NC, NY, OH, WA
Patient Populations Supported (CoCM)	
Adult	YES
Pediatric	YES
Geriatric	YES
Other	Not Reported
Healthcare Organizations Supported	
State/local health systems (CHCs, FQHCs, RHCs)	YES
Private/commercial ACOs	YES
Independent non-facility-based medical practices	YES
Facility-based medical centers	YES
Private healthcare systems	YES
Insurer/Payer Experience	
Managed Medicaid Plans	YES
Managed Medicare Plans	YES
Commercial health plans	YES
Employers	YES
Other organizations	Behavioral health providers implementing integrated primary care practices and digital health vendors

Typical Implementation Timeframe	6–9 months
CoCM Services Provided	
CoCM implementation consultation only (standalone/unbundled)	YES
Turnkey CoCM Program (all core CoCM component services OTHER THAN CoCM staffing by CSO)	NO
CoCM Staffing by CSO	
Behavioral Care Managers (BCMs)	NO
Percent clinically licensed	N/A
Percent employed (vs. contracted)	N/A
Psychiatric Consultants (PCs)	NO
Percent employed (vs. contracted)	N/A
Training for Practice/Health System Staff	
BCMs	YES – onsite and virtual
Primary Care Providers and Other Practitioners referring patients into CoCM	YES – onsite and virtual
Billing staff	YES – onsite and virtual
Other Training	Care coordination for patients with both physical health and behavioral health needs; Electronic Health Record and operations teams' development and training; RN care manager Community Health Workers; practice managers; Medication Assisted Treatment for Addiction as part of CoCM; process and outcome evaluation and data collection; evidence-based brief interventions; team-based care and culture change; change management; billing and coding of behavioral health outside o CoCM and specific to state policy
Patient Registry	Support in building the registry into client EHR; provide sample EHR in Excel to leverage for piloting, initial implementation
Is registry proprietary to organization?	NO
Measurement Based Care (MBC) Technology/Platform	HMA has provided extensive training on measurement-based car for primary and behavioral health providers and payors. Support practices with measurement tool selection, measurement protocol, registry development and use, and using measurement to engage individuals seeking services. This is part of the HMA training on CoCM. HMA has also helped practices consider how use MBC data within their overarching data and evaluation plant well as sharing this data with payors for negotiating rates. HMA has also helped systems and providers build the MBC tools and registry into their electronic health record for better
	technology integration.
Other Technology/tools	Not Reported
Other CoCM Services Offered	Not Reported
Pricing Model(s)	
Based on billed claims	NO
Consulting and other service fees	Hourly rates, time and materials, fixed, or retainer
Implementation fees	NO
Per Enrolled (in CoCM) Patient Per Month	NO
Other	NO

Mindoula is one of the largest virtual providers of collaborative care across the country. The company is currently providing CoCM services in 24 states, working with healthcare organizations ranging from health systems, independent primary care practices, accountable care organizations and care transformation organizations. Mindoula continues to pilot new applications of collaborative care, working with specialties including women's health, integrated kidney care, chronic care management providers, and CHF clinics.

Mindoula was created to address the need to improve access to care for those grappling with mental illness, either directly or through a loved one, and considers CoCM to be an integral model that can alleviate the growing access challenges seen across the behavioral health spectrum.

The specific CoCM support services offered by Mindoula are outlined below. Additional information regarding the organization and its services can be found at: https://www.mindoula.com/for-providers/

Organization Type	Private
Contact	Sara deCarvalho
Headquarters	Silver Spring, MD
Years providing CoCM Services	9
Geographic service capability	National
States in which CoCM services are currently provided	AL, AR, AZ, CA, DE, FL, GA, ID, IN, MD, MS, MT, NC, NJ, NY, OH, OK PA, SC, TN, TX, VA, WA, WV
Patient Populations Supported (CoCM)	
Adult	YES
Pediatric	YES
Geriatric	YES
Other	Women's health
Healthcare Organizations Supported	
State/local health systems (CHCs, FQHCs, RHCs)	YES
Private/commercial ACOs	YES
Independent non-facility-based medical practices	YES
Facility-based medical centers	YES
Private healthcare systems	YES
Insurer/Payer Experience	
Managed Medicaid Plans	YES
Managed Medicare Plans	YES
Commercial health plans	YES
Employers	YES
Other organizations	Not Reported
Typical Implementation Timeframe	4-8 weeks

CoCM implementation consultation only (standalone/unbundled)	NO
Turnkey CoCM Program (all core CoCM component services OTHER THAN CoCM staffing by CSO)	YES
CoCM Staffing by CSO	
Behavioral Care Managers (BCMs)	YES – virtual (Use ONLY Mindoula BCMs)
Percent clinically licensed	All are master's-level; not all are licensed
Percent employed (vs. contracted)	100% employed
Psychiatric Consultants (PCs)	YES – virtual (Use ONLY Mindoula PCs)
Percent employed (vs. contracted)	100% contracted
Training for Practice/Health System Staff	
BCMs	NO
Primary Care Providers and Other Practitioners referring patients into CoCM	YES – onsite and virtual
Billing staff	YES – virtual
	Mindoula provides support for appeals/denials (with practices maintaining ultimate responsibility) and in some cases can support practices by submitting claims using an API or manual entry.
Other Training	Review standard MBC tools and frequency of measurement, as well as suicide screening and intervention completed by Mindoula staff. Best practices education and recommendations for screening – notably universal use of PHQ and GAD at least 1 per year.
Patient Registry	YES
Is registry proprietary to organization?	YES
Measurement Based Care (MBC) Technology/Platform	YES
Other Technology/tools	Google Suite, Power BI, Mindoula APP
Other CoCM Services Offered	Not Reported
ricing Model(s)	
Based on billed claims	YES
Consulting and other service fees	NO
Implementation fees	NO
Per Enrolled (in CoCM) Patient Per Month	NO
Other	NO

Mirah's collaborative care solution is designed to focus on key challenges of integrated behavioral health—supporting communication, care coordination, and caseload management for multi-disciplinary care teams. The organization simplifies the process so that its clients' providers and care managers can focus on patients. Mirah's CoCM solution comes with the tools necessary to implement the collaborative care model at scale, including:

- An easy-to-manage patient registry
- Integrated task list for managing in-meeting
- Time tracker on the individual patient level
- Reporting & analytics
- Training and implementation support

Mirah pairs this enterprise-level technology with an expert clinical support team for effective, sustainable implementation of data-informed behavioral healthcare at scale. Offering a turnkey software solution, Mirah is able to provide Behavioral Care Manager and Psychiatric Consultant resources through partner organizations. Its library of 450+ assessments supports a wide range of behavioral health conditions.

The specific CoCM support services offered by Mirah are outlined below. Additional information regarding the organization and its services can be found at: https://www.mirah.com/collaborative-care

Organization Type	Private
Contact	Patrick Luizzo
- Headquarters	Boston, MA
Years providing CoCM Services	2
Geographic service capability	National
States in which CoCM services are currently provided	CA, CO, FL, MA, ME, MT, NE, NH, NJ, NY, PA, TX, UT, WA
Patient Populations Supported (CoCM)	
Adult	YES
Pediatric	YES
Geriatric	YES
Other	OB-GYN/Women's Health, Oncology, Substance Use
Healthcare Organizations Supported	
State/local health systems (CHCs, FQHCs, RHCs)	YES
Private/commercial ACOs	YES
Independent non-facility-based medical practices	YES
Facility-based medical centers	YES
Private healthcare systems	YES
nsurer/Payer Experience	
Managed Medicaid Plans	YES
Managed Medicare Plans	YES
Commercial health plans	YES
Employers	YES
Other organizations	Not Reported

ypical Implementation Timeframe	6 weeks
CoCM Services Provided	
CoCM implementation consultation only (standalone/unbundled)	NO
Turnkey CoCM Program (all core CoCM component services OTHER THAN CoCM staffing by CSO)	YES
CoCM Staffing by CSO	
Behavioral Care Managers (BCMs)	YES – virtual (through other organizations arranged by Mirah)
Percent clinically licensed	Some
Percent employed (vs. contracted)	100% contracted
Psychiatric Consultants (PCs)	YES – virtual (through other organizations arranged by Mirah)
Percent employed (vs. contracted)	100% contracted
Training for Practice/Health System Staff	
BCMs	YES – virtual
Primary Care Providers and Other Practitioners referring patients into CoCM	YES – virtual
Billing staff	YES – virtual
Other Training	Not Reported
Patient Registry	YES
Is registry proprietary to organization?	YES
Measurement Based Care (MBC) Technology/Platform	YES
Other Technology/tools	Not Reported
Other CoCM Services Offered	Not Reported
Pricing Model(s)	
Based on billed claims	NO
Consulting and other service fees	NO
Implementation fees	NO
Per Enrolled (in CoCM) Patient Per Month	YES
Other	NO

NeuroFlow offers a suite of tools and services to manage behavioral health conditions, including support for integrated care models, such as Psychiatric Collaborative Care (CoCM). The company's comprehensive approach to CoCM includes population-wide screenings and digital support, a purpose-built patient registry and Electronic Health Record integrations, suicide prevention capabilities, and supplemental clinical staffing. NeuroFlow supports dozens of organizations nationally in providing higher quality behavioral health care.

The company has experience in launching and scaling integrated care models, focusing on establishing sustainable programs, credibility with providers and patients, and efficient scaling to achieve financial sustainability. This includes offering scalable technology and analytics capabilities paired with expertise in whole-person care.

The specific CoCM support services offered by NeuroFlow are outlined below. Additional information regarding the organization and its services can be found at: https://www.neuroflow.com/integrated-care-cocm/

Organization Type	Private
Contact	Sara Cohen
	Philadelphia, PA
Years providing CoCM Services	8
Geographic service capability	National
States in which CoCM services are currently provided	12+
Patient Populations Supported (CoCM)	
Adult	YES
Pediatric	YES
Geriatric	YES
Other	Not Reported
Healthcare Organizations Supported	
State/local health systems (CHCs, FQHCs, RHCs)	YES
Private/commercial ACOs	YES
Independent non-facility-based medical practices	YES
Facility-based medical centers	YES
Private healthcare systems	YES
Insurer/Payer Experience	
Managed Medicaid Plans	YES
Managed Medicare Plans	YES
Commercial health plans	YES
Employers	YES
Other organizations	Not Reported
Typical Implementation Timeframe	12 weeks

CoCM implementation consultation only (standalone/unbundled)	NO
Turnkey CoCM Program (all core CoCM component services OTHER THAN CoCM staffing by CSO)	YES
CoCM Staffing by CSO	
Behavioral Care Managers (BCMs)	YES – onsite and virtual
Percent clinically licensed	Not Reported
Percent employed (vs. contracted)	Not Reported
Psychiatric Consultants (PCs)	YES – virtual
Percent employed (vs. contracted)	Not Reported
Training for Practice/Health System Staff	
BCMs	YES – onsite and virtual
Primary Care Providers and Other Practitioners referring patients into CoCM	YES – onsite and virtual
Billing staff	YES – onsite and virtual
Other Training	Not Reported
Patient Registry	YES
Is registry proprietary to organization?	YES
Measurement Based Care (MBC) Technology/Platform	YES
Other Technology/tools	Not Reported
Other CoCM Services Offered	Not Reported
ricing Model(s)	
Based on billed claims	Not Reported
Consulting and other service fees	Not Reported
Implementation fees	Not Reported
Per Enrolled (in CoCM) Patient Per Month	Not Reported
Other	Not Reported

Technical Assistance

North Carolina Area Health Education Centers (NC AHEC)

North Carolina Area Health Education Centers (NC AHEC) provides CoCM implementation training and coaching via practice support coaches and subject matter experts to healthcare practices throughout the state of North Carolina. NC AHEC is part of the state of North Carolina and the UNC School of Medicine. The mission is to recruit, train and retain the state's health workforce. The organization comprises 9 regional AHEC centers and was established in 1972. For 17 years, NC AHEC has helped practices survive and thrive with value-based care. The Practice Support service line has, for two years, helped practices provide

holistic healthcare with value-based care programs, including CoCM. This effort is performed in partnership with NC Medicaid, CCNC, NC Psychiatry Association, NC-PAL, CCNC, NC Academy of Family Physicians, NC Pediatric Society and NC Community Health Center Association.

The specific CoCM support services offered by NC AHEC are outlined below. Additional information regarding the organization and its services can be found at: https://www.ncahec.net/practice-support/collaborative-care-2/

Organization Type	State/academic partnership serving North Carolina health system
Contact	Chris Weathington
Headquarters	Chapel Hill, NC
Years providing CoCM Services	2
Geographic service capability	North Carolina
States in which CoCM services have been provided	North Carolina
Patient Populations Supported (CoCM)	
Adult	YES
Pediatric	YES
Geriatric	YES
Other	Not Reported
Healthcare Organizations Supported	
State/local health systems (CHCs, FQHCs, RHCs)	YES
Private/commercial ACOs	YES
Independent non-facility-based medical practices	YES
Facility-based medical centers	YES
Private healthcare systems	YES
Insurer/Payer Experience	
Managed Medicaid Plans	YES
Managed Medicare Plans	YES
Commercial health plans	YES
Employers	NO
Other organizations	Not Reported
Typical Implementation Timeframe	6–12 months

CoCM implementation consultation only (standalone/unbundled)	YES
Turnkey CoCM Program (all core CoCM component services OTHER THAN CoCM staffing by CSO)	NO
CoCM Staffing by CSO	
Behavioral Care Managers (BCMs)	NO
Percent clinically licensed	N/A
Percent employed (vs. contracted)	N/A
Psychiatric Consultants (PCs)	NO
Percent employed (vs. contracted)	N/A
Training for Practice/Health System Staff	
BCMs	YES – onsite and virtual
Primary Care Providers and Other Practitioners referring patients into CoCM	YES – onsite and virtual
Billing staff	YES – onsite and virtual
Other Training	NO
Patient Registry	YES
Is registry proprietary to organization?	NO – provided by Community Care of NC via NC DHHS & AIMS, mostly at no cost; some practices have developed their own spreadsheet for registry
Measurement Based Care (MBC) Technology/Platform	Incorporated into registry
Other Technology/tools	Not Reported
Other CoCM Services Offered	1:1 coaching, virtual learning collaboratives, on-demand and liv courses with educational credits, statewide in-person summit for BCMs
Pricing Model(s)	NC AHEC does not charge for its CoCM support services; services are supported through its statewide partnerships.
Based on billed claims	N/A
Consulting and other service fees	N/A
Implementation fees	N/A
Per Enrolled (in CoCM) Patient Per Month	N/A
Other	N/A

Nudj Health provides the infrastructure to integrate evidence-based behavioral healthcare into overall medical care, providing CoCM as an extension of healthcare providers, clinics, and health systems. The company provides the care team (e.g., social workers and psychiatrists) and patient registry to provide and document services delivered under CoCM.

Nudj Health initially focused on cardiology, integrating behavioral health into cardiology practice, improving outcomes, enhancing patient and provider satisfaction, and reducing acute care and outpatient utilization. The company has expanded its service model to address all areas of lifestyle medicine, including coaching patients on diet, exercise, sleep, social connection, and risky behaviors (e.g., medication nonadherence, smoking). The company's technology platform enables physical, behavioral, mental, and social health monitoring for patients and extended capability to providers.

The specific CoCM support services offered by Nudj are outlined below. Additional information regarding the organization and its services can be found at: https://www.nudjhealth.com/

Organization Type	Private
Contact	Tom Stewart
Headquarters	Pasadena, CA
Years providing CoCM Services	3
Geographic service capability	National
States in which CoCM services are currently provided	CA, FL, ID, TX
Patient Populations Supported (CoCM)	
Adult	YES
Pediatric	YES
Geriatric	YES
Other	Not Reported
Healthcare Organizations Supported	
State/local health systems (CHCs, FQHCs, RHCs)	NO
Private/commercial ACOs	NO
Independent non-facility-based medical practices	YES
Facility-based medical centers	YES
Private healthcare systems	YES
Insurer/Payer Experience	
Managed Medicaid Plans	YES
Managed Medicare Plans	YES
Commercial health plans	YES
Employers	NO
Other organizations	Not Reported
Typical Implementation Timeframe	6 weeks

CoCM implementation consultation only (standalone/unbundled)	NO
Turnkey CoCM Program (all core CoCM component services OTHER THAN CoCM staffing by CSO)	YES
CoCM Staffing by CSO	
Behavioral Care Managers (BCMs)	YES – virtual (Use ONLY Nudj BCMs)
Percent clinically licensed	100% licensed
Percent employed (vs. contracted)	100% employed
Psychiatric Consultants (PCs)	YES – virtual
Percent employed (vs. contracted)	100% employed
Training for Practice/Health System Staff	
BCMs	NO
Primary Care Providers and Other Practitioners referring patients into CoCM	YES – virtual
Billing staff	YES – virtual
Other Training	Not Reported
Patient Registry	YES
Is registry proprietary to organization?	YES
Measurement Based Care (MBC) Technology/Platform	YES
Other Technology/tools	Remote patient monitoring, virtual intensive cardiac rehab
Other CoCM Services Offered	Not Reported
ricing Model(s)	
Based on billed claims	YES
Consulting and other service fees	NO
Implementation fees	NO
Per Enrolled (in CoCM) Patient Per Month	YES
Other	Not Reported

PRISM Technical Assistance

PRISM is housed within the Department of Psychiatry at Michigan Medicine and provides individualized consultation, training, and implementation support on the Collaborative Care Model (CoCM) to health systems, provider organizations, and payors. Over the past 10 years, PRISM has assisted more than 340 organizations, ensuring the Collaborative Care model is implemented with fidelity.

Implementation support includes workflow modification, adoption of population-health approaches, sustainability

planning, evaluation support, and fidelity monitoring. Team and role-specific clinical training is provided for primary care providers, psychiatric consultants, and behavioral health care managers.

The specific CoCM support services offered by PRISM are outlined below. Additional information regarding the organization and its services can be found at: https://prismbh.org/

Organization Type	Academic/Training and Technical Assistance Center
Contact	Sarah Bernes
	Ann Arbor, MI
Years providing CoCM Services	10+
Geographic service capability	National/International
States in which CoCM services have been provided	PRISM has historically focused on providing CoCM support services in Michigan and is currently expanding to other states
Patient Populations Supported (CoCM)	
Adult	YES
Pediatric	YES
Geriatric	YES
Other	Perinatal patients
Healthcare Organizations Supported	
State/local health systems (CHCs, FQHCs, RHCs)	YES
Private/commercial ACOs	YES
Independent non-facility-based medical practices	YES
Facility-based medical centers	YES
Private healthcare systems	YES
Insurer/Payer Experience	
Managed Medicaid Plans	YES
Managed Medicare Plans	YES
Commercial health plans	YES
Employers	Not Reported
Other organizations	Not Reported
Typical Implementation Timeframe	18 months

CoCM implementation consultation only (standalone/unbundled)	YES
Turnkey CoCM Program (all core CoCM component services OTHER THAN CoCM staffing by CSO)	NO
CoCM Staffing by CSO	
Behavioral Care Managers (BCMs)	NO
Percent clinically licensed	N/A
Percent employed (vs. contracted)	N/A
Psychiatric Consultants (PCs)	NO
Percent employed (vs. contracted)	N/A
Training for Practice/Health System Staff	
BCMs	YES – onsite and virtual
Primary Care Providers and Other Practitioners referring patients into CoCM	YES – onsite and virtual
Billing staff	YES – onsite and virtual
Other Training	Online resources
Patient Registry	NO. PRISM will provide technical assistance regarding choosin a patient registry or building one in the organization's electroni health record.
Is registry proprietary to organization?	N/A
Measurement Based Care (MBC) Technology/Platform	NO. PRISM will provide technical assistance regarding specific tools that are validated for outcomes measurement in adult, pediatric, and reproductive health settings.
Other Technology/tools	Not Reported
Other CoCM Services Offered	Not Reported
ricing Model(s)	
Based on billed claims	NO
Consulting and other service fees	Consulting and technical assistance services are priced on a project basis.
Implementation fees	NO
Per Enrolled (in CoCM) Patient Per Month	NO
Other	Topic/audience-specific training fees

Sheppard Pratt Solutions (SPS)

Technical Assistance

Sheppard Pratt Solutions (SPS) is a division of the nation's largest private, nonprofit provider of mental health and substance use services. SPS can assess and deploy CoCM approaches in a variety of settings to improve access and reduce frustration for patients and providers alike. SPS helps health systems ensure that patients receive behavioral health screening and intervention services without disrupting their relationship with their primary care providers. This ensures that patients receive timely and effective behavioral healthcare appropriate to their clinical needs while reducing appointment wait times and increasing the likelihood of treatment compliance.

SPS offers consulting services under project-based relationships, strategic consulting and long-term planning for behavioral healthcare organizations, healthcare systems, and community agencies.

The specific CoCM support services offered by SPS are outlined below. Additional information regarding the organization and its services can be found at: https://www.sheppardpratt.org/solutions/areas-expertise/collaborative-care/

Organization Type	Private, Non-Profit
Contact	Stephen Merz
leadquarters	Towson, MD
ears providing CoCM Services	5
Geographic service capability	National
tates in which CoCM services have been provided	MD, PA
atient Populations Supported (CoCM)	
Adult	YES
Pediatric	YES
Geriatric	YES
Other	Specialty medical practices, including Oncology, Cardiology, OBGYN
lealthcare Organizations Supported	
State/local health systems (CHCs, FQHCs, RHCs)	NO
Private/commercial ACOs	NO
Independent non-facility-based medical practices	YES
Facility-based medical centers	YES
Private healthcare systems	YES
nsurer/Payer Experience	
Managed Medicaid Plans	YES
Managed Medicare Plans	YES
Commercial health plans	YES
Employers	NO
Other organizations	Multi-specialty medical groups
ypical Implementation Timeframe	4 months

CoCM implementation consultation only (standalone/unbundled)	YES
Turnkey CoCM Program (all core CoCM component services OTHER THAN CoCM staffing by CSO)	NO
CoCM Staffing by CSO	
Behavioral Care Managers (BCMs)	YES – onsite and virtual
Percent clinically licensed	90%+ are licensed
Percent employed (vs. contracted)	100% employed
Psychiatric Consultants (PCs)	YES – virtual
Percent employed (vs. contracted)	100% employed
Training for Practice/Health System Staff	
BCMs	YES – onsite and virtual
Primary Care Providers and Other Practitioners referring patients into CoCM	YES – onsite and virtual
Billing staff	YES – onsite and virtual
Other Training	Not Reported
Patient Registry	YES
Is registry proprietary to organization?	YES
Measurement Based Care (MBC) Technology/Platform	YES
Other Technology/tools	Schedule template, intervention tools, financial model, outcomes reporting
Other CoCM Services Offered	Not Reported
ricing Model(s)	
Based on billed claims	NO
Consulting and other service fees	YES – hourly rates; Direct cost-plus, and a management/oversight fee
Implementation fees	NO
Per Enrolled (in CoCM) Patient Per Month	NO
Other	Not Reported

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