



CBH Compliance Forum 2025

November 6, 2025

HOSTED BY:
CBH Program Integrity

Agenda

- Welcome/CBH Program Integrity Year in Review/Look Ahead
- NPAU Reminders
- Beyond the Audit Tour: Turning Audit Findings into Provider Strategies
- Program Integrity Audit Pitfalls
- Program Integrity Updates and Reminders

Housekeeping

- Slide decks and presentation recordings will be posted to the CBH website after the Forum
- We will take short breaks/intermissions between sessions
- Please ask questions in the chat

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2025: The Year, So Far

Credentialing in 2025

DOUBLE Reminder about previous facility re-credentialing changes from 2023 & some new ones

➤ Statuses

- *Simplified to one or three years*
 - One Year = Provisional
 - Three Years = Full

➤ Provisional Status:

- *Can occur due to Provider Operations, Program Integrity, Quality concerns*
- *Automatically triggers teaming at CBH to discuss how to support agency*

➤ NIAC Changes

- *While County/PC staff continues to be involved in Committees, NIAC visits are no longer part of the Facility Re-Credentialing Process*

Program Integrity in 2025

- 89 Audits completed so far in 2025
 - 35 targeted audits; 34 self-audits; 20 probe audits and 3 investigations not resulting in audit
- Through the third quarter of 2025, 113 hotline contacts triaged (132 referrals out)
- Completion of a thorough review of Community Integrated Recovery Centers (CIRCs)
- Initiation of an audit of Applied Behavior Analysis (ABA) services provided to adolescent and long-tenured members
- Coordination with CBH Compliance to complete the 2025 ABA audits

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2026: Reading the Tea Leaves

Program Integrity in 2026

- Work Plan still in process
- Program Integrity Committee has final say on priority/focus areas
- Daily/'Routine' activities will continue
 - *Focus on Cost Avoidance*
 - *Audits (post-pay, pre-pay, and self-audit processing)*
 - *Following up on tips/referrals*
 - *Coordination, when appropriate, with BPI, OMHSAS, and OAG*
 - *Staff and Provider training and education*
- Work Plan will outline a handful of targeted/priority areas for review

Program Integrity in 2026

- Potential Work Plan areas of concentration include:
 - ✓ New Documentation Guidelines/Revisions to Existing Guidelines
 - ✓ Artificial Intelligence Guidance
 - ✓ Random audits for providers who have not had self/CBH audit in recent past
 - ✓ Continued Audits of Data Outliers
 - ✓ Per Diem Substance Abuse Treatment Follow-Up Tour
 - ✓ Compliance Plan Follow-up – Phase 3
 - ✓ Expansion of Clinical Management Retrospective Review Processing

Documentation Guidelines

- Current Documentation Guidelines are always available in the Provider Manual
- Currently general guidelines, group, CBE/R, Per Diem Substance Use Disorder Services, Family Based, Independent Practitioner, and Integrated Behavioral Health in Long-Term Care guidelines are posted
- Provide guidance and expectations on minimum documentation requirements for reimbursement

Documentation Guidelines (cont)

- Should always be viewed in partnership with relevant State requirements and CBH Clinical Practice guidance
- 2026 will see the publication of additional levels of care and/or services
- Areas being considered are IBHS (ABA & Regionalized), Outpatient (SUD & MH), and Case Mgmt.

Artificial Intelligence

- CBH has provided general guidance via bulletin/notice (Bulletin 24-23 and Notice 8/25/25)
- CBH internal guidance has also been developed
- 2026 will provide an opportunity to revisit/revise policies and provide additional guidance

New Providers or Reunion Audits

- Carried over from last year
- Audits will focus on new providers (educational) and those with no audit contact in the last 3 years
- All audits will utilize random sampling
- Self-Audit submissions will 'count' towards audit contacts

Phase 3 - Compliance Plans

- Another carry over
- This will focus on follow-up with select providers to review implementation of compliance plans
- Selection will not be random, factors that can influence participation include but may not be limited to
 - Lack of reported self-audits
 - Concerns noted with Compliance Plan submission
 - Audit concerns that suggest ineffective plan/implementation

Data Outliers

- Data mining to uncover outliers is a foundational practice for PI work
- Auditing/Investigations based on data outliers will continue in 2026
- Continuation of reviewing providers who are above/below peers related to total billing, per member billing, coding, etc

Per Diem D&A Follow-Up

- Follow-Up to 2019 Tour and carry over from 2025
- Review to determine impact of previous tour and documentation guidelines (initial and revision)
- If completed, would be coordinated with larger ASAM alignment work and value-based purchasing efforts

Medical Necessity Reviews

- Further refinement and coordination with CBH Care Management related to retrospective reviews
- Increase seen in the last calendar year with additional volume possible in 2026
- May result in audit findings in the absence of initial request from Program Integrity
- Ensuring Medical Necessity is met and well documented is crucial (Compliance Plan)