



Meeting Minutes Behavioral Health and Integration Strategies (BHIS) Program Improvement Advisory Committee (PIAC) Subcommittee

Virtual Meeting

May 3, 2023, 9:00 AM - 10:30 AM

1. Introductions

Facilitators:

- Sue Williamson Children's community advocate
- Daniel Darting Signal Behavioral Health
- Matt Pfeifer Health Care Policy & Financing (Dept. Liaison)

Voting Members:

- Tom Keller Statewide PIAC
- Elizabeth Freudenthal Children's Hospital
- Charles Davis Crossroads Turning Points
- Monique McCollum Parent of special needs children on Medicaid
- Nina Marinello Intermountain Health
- Imo Succo Southwestern CO Area Health Education Center
- Deb Hutson Behavioral Health Administration

Other Attendees:

- Mona Allen Health Colorado, Inc.
- Kara Gehring Health Care Policy & Financing
- Cris Matoush Rocky Mountain Health Plans
- Nathan Cline Kemberton Healthcare LLC
- Marsha Penn Colorado Community Health Alliance
- Jane Moore Clinix Center for Health
- Courtney Bishop Health Services Advisory Group



- Crystal Brown Health Services Advisory Group
- Krista Cavataio Rocky Mountain Health Plans

Meeting called to order at 9:01 AM.

2. High Intensity Outpatient Scope of Work - Meredith Davis, HCPF

- American Rescue Plan Act (ARPA) project 3.06 - Behavioral Health Safety Net Expansion
 - o \$26M in funding
 - o Framed around [Senate Bill 19-222](#) and the [Department's Comprehensive Safety Net Service Model and Framework](#)
 - o Involved agencies include the Behavioral Health Administration (BHA), the Colorado Department of Public Health and Environment (CDPHE), and at times the Colorado Department of Public Safety.
 - o Aims to facilitate easier step down for people transitioning out of institutionalization
- Project goal to build out [Regional Accountable Entity \(RAE\)](#) network capacity for High-Intensity Outpatient Services through home and community-based services.
 - o RAEs have submitted plans (deliverables) on how they will use the money. Focus on working with existing contracted providers.
 - First follow-up report due at the end of this Fiscal Year (FY).
- Timeline discussed; project will wrap up by Quarter 1 of FY24-25.
 - o Example project - funding to support construction and development of new treatment center in Aurora that is meeting the needs of the community, especially LGBTQIA+ youth.
 - o Funding being released now.
- The group asks about tracking long term health outcomes
 - o HCPF is working with our Data Analytics Section (DAS) to develop rubric, to include billing codes and utilization data.
 - Reporting from RAEs
- Elizabeth Freudenthal requests that about denial rates be present in the reporting.
- **Meredith to check with the RAEs about sharing the plans they've submitted for this work; possible creation of summary document outlining plans. Meredith with connect with Matt Pfeifer on this effort and follow-up.**
 - o Possibility for RAEs to come and present on this work as well.
- Question around how many hours a week the intensive step-down would be.



- It would depend on the individual. The goal is to have each of these types of treatment available to every Coloradoan.
- Request that implementation be standard across RAEs. Multiple workgroup members share personal anecdotes of frustration within the system/between counties.
 - Looking to address this in Accountable Care Collaborative (ACC) Phase III program design.
 - Health equity is a priority.
- Concern around RAEs shifting care for cost savings purposes.
 - HCPF hopes the utilization management dashboard will illustrate implementation. January target date for dashboard.
- **BHIS members request that this topic be brought back to the meeting for updates and further feedback.**
- Monique McCollum, Imo Succo share personal experiences. Monique offers connecting HCPF to the families receiving these services for insight.
- Providers in the community advocate for health equity and closing disparities for people of color.
- Jennifer Holcomb from HCPF offers to connect with community providers about substance use disorder (SUD) challenges; jennifer.holcomb@state.co.us.
- The group calls out the need for diversity in the health care workforce. The issue seems to be getting worse.

3. Housekeeping

[House Bill 22-1302 implementation](#) update - Rodrick Prayer, HCPF

- More than 258 practice sites applied for the grant, including small practices and practices in rural areas.
- Next step is to select applicants for the \$31 million in funding for integrated behavioral health services in primary care settings. Applicants will be prioritized if:
 - Serve individuals with co-occurring diagnoses
 - Serve Persons with severe mental illness (PSMI)
 - Serve PSMI youth
 - Focused on community health workers
- Looking for practices to demonstrate ability to serve culturally diverse populations.
- Currently reviewing applications and will announce awardees June 1, 2023
- The award period is August 1, 2023 - December 30, 2026.
- Given the volume of applicants, Rodrick is advocating for another round of funding.
- Questions can be emailed to the HCPF integrated care team: hcpf_integratedcare@state.co.us.



Daniel calls the group to approve the April 2023 BHIS minutes. Elizabeth Freudenthal motions to approve, Deb Hutson seconds. There are no objections or abstentions. April 2023 meeting minutes are approved by voting members.

The group will cancel the July 5 BHIS meeting (summer break and schedule conflicts).

4. ACC Phase III: Children and Youth - Susanna Snyder, HCPF

- Children and youth approach for ACC Phase III is presented.
 - Vision: Build a system of care that is family-centered, trauma-informed and complete across the continuum for children, youth, families and caregivers that recognizes the distinct needs of this population--from identification of need to treatment.
- The ACC has a sliding scale of influence. For example, loan forgiveness is not a lever at HCPF (in regard to addressing workforce shortages).
- Consideration of models
 - Balancing disruptive reform and protective stability
- Proposed “Standardized Child Benefit”
 - Modeled with [Texas Department State Health Services Resilience and Recovery](#) model in mind.
 - Levels of care (ranging from low acuity to inpatient) would guarantee access to a suite of services, to complete the continuum of care.
 - Services guaranteed would be determined through stakeholder work.
 - Extra focus to build into the preventative space.
- Completing the continuum of care
 - Develop standardized child benefit to address different needs at different levels of complexity
 - Addresses goals for ACC Phase III through simplifying systems
- Project status: concept feedback and stakeholder feedback stage
- HCPF is creating a crosswalk to examine the intersection between this work and [Early and Periodic Screening, Diagnostic, and Treatment \(EPSDT\) requirements](#).
- Regarding bi-directional integration, Elizabeth Freudenthal advocates that HCPF should take into account the importance of primary care as a BH entry point. This initiative should include physical health sites (that may provide BH) and behavioral health sites (that may provide PH).
 - Elizabeth to connect offline with Susanna and John Laukkanen to discuss.
- Susanna asks that meeting participants take this concept to their peers; HCPF wants feedback.
 - Susanna can be reached at Susanna.snyder@state.co.us

5. Wrap up and next steps (HCPF)

The next meeting is scheduled for June 7, 2023. The meeting was adjourned 10:30 am.

