COLORADO
Department of Health Care Policy & Financing

1570 Grant Street
Denver, CO 80203

Voting member questionnaire

1. What unique perspective can you bring to this subcommittee?
2. What is your experience working within behavioral health?
3. Do you have any conflicts of interest being a voting member for this subcommittee?
4. Will you be able to consistently be able to attend our monthly meetings?
5. Are you currently sitting on another task force/ committee that is focused on behavioral health topics?
6. What region of the state do you currently work in?
7. Would you like to be considered for the Co-Chair for this subcommittee?