



Meeting Information			
Topic	IBHS Implementation Advisory Committee (Medicaid System of Care)		
Facilitator	Robert Werthwein, Jamie Ulrich		
Location, Date, Time	Virtual Video call link: Or dial: (US) +1 484-416-2590	Wednesday, January 22, 2025	2:30 – 4:00
Members	<input checked="" type="checkbox"/> Robert Werthwein- HCPF facilitator <input checked="" type="checkbox"/> Jamie Ulrich- County DHS Co-Facilitator <input checked="" type="checkbox"/> Stacey Davis- HCPF <input type="checkbox"/> Joe Homlar- CDHS <input checked="" type="checkbox"/> Kelli Reidford- BHA <input type="checkbox"/> Cara Cheevers- DOI <input checked="" type="checkbox"/> Christy Scott- CDEC <input checked="" type="checkbox"/> Ron-Li Liaw- CHA <input checked="" type="checkbox"/> Meg Taylor- RAE1	<input checked="" type="checkbox"/> Jen Hale-Coulson- RAE2 <input checked="" type="checkbox"/> Sarah Winfrey- RAE3 <input type="checkbox"/> Amy Donahue- RAE4 <input checked="" type="checkbox"/> Rebecca Wyperd- CSNP Assoc. <input checked="" type="checkbox"/> John Kefalas- CTY Commissioner <input checked="" type="checkbox"/> Kerry Swenson- Advocate CAFCA <input type="checkbox"/> Tori Shuler- Lived Exp. <input type="checkbox"/> Danielle Angotti- Advocate <input type="checkbox"/> Taylor Smith- BHA	

Purpose of meeting	Advisory Committee for the implementation of intensive behavioral health services for children and youth in Colorado
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Topics for discussion	<ul style="list-style-type: none"> ● Conversation with Plaintiffs ● Review and Finalize Charter- ● What is the System of Care? How do we describe it? -Robert Werthwein ● Debrief Joint Budget Committee Presentation - Robert Werthwein ● Workforce Capacity Center - Robert Werthwein ● Reimbursement Rates -Bell Curve - Robert Werthwein
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	<ul style="list-style-type: none"> ● Begin Phase 1 conversation (time Permitting) ● Next meeting -Thursday, March 20 · 12:30 – 2:00pm ● Video call link ● Public Comment
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Attachments	Settlement Agreement Summary HB24-1038 Settlement agreement Charter
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Notes:

Medicaid System of Care Implementation Advisory Committee - Meeting Notes

Date:January 22, 2025|

- Acknowledged the committee's involvement in the GA vs. Bimestefer settlement agreement, addressing the need for intensive, in-home assessments and mobile response support services for children under 21 in the Medicaid program.
- The focus is to reduce out-of-state provider reliance and emergency room visits for behavioral health needs, and to shorten lengths of stay in out-of-home placements.

Committee topics for discussion

- Provide an update on discussions with plaintiffs (GA vs. Bimestefer case).
- Finalize the committee charter.
- What is the System of Care?
- Review Joint Budget Committee presentation from two weeks ago.
- Discuss workforce capacity and associated challenges.
- Brief discussion on reimbursement rates and their connection to high-acuity children.
- begin Phase 1 implementation conversation,

Plaintiff Update

- **System of Care Plan:** The draft plan being submitted to the plaintiffs will address seven components of the system of care, including:
 - Pathways to care and referral process.
 - Intensive services like high-fidelity care coordination, crisis stabilization, and in-home treatment support.





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- Establishment of standards and roles across multiple systems (child welfare, behavioral health, special education, etc.).
- Phased rollout with Phase 1 aligned with House Bill 24-1038.
- After submission, the plaintiffs will review the plan and have 30 days to provide feedback. The department will have 30 days to respond.

EPSDT vs. High-Acuity Population

- Robert Werthwein clarified that the lawsuit addresses the need to provide necessary behavioral health services to children in their communities rather than relying on out-of-state placements.
- The focus is on children with high acuity needs who require high-intensity services to function successfully in their communities.

System of Care Design

- **System of Care Plan:**
 - Based on evidence-based practices used in other states (e.g., Massachusetts) with input from national consultant Suzanne Fields.
 - Aimed at providing a family-centered approach.
 - Not a budget document, nor a manual for practice/protocols. It is a systems design plan, subject to updates as the project progresses.
- Emphasis on meeting the needs of families with high-acuity children, addressing service gaps, and reducing reliance on out-of-home placements.

Charter Review

- The committee reviewed the [charter](#), setting clear guidelines and purposes for the group's work.

Update on plaintiffs

- Await final feedback from plaintiffs on the system of care plan. Once approved, the plan will be presented to the committee for detailed review.
- Phase 1 of the system rollout is slated for October 1, 2025.
- The next meeting will likely delve into budget discussions and further implementation details.
- Committee members encouraged to provide final feedback on the system of care design and communicate any additional thoughts regarding the charter or other topics.





Expanding Committee Scope:

- Robert Werthwein discussed the idea of expanding the focus of the group to include populations beyond just Medicaid in Colorado.
- Proposed forming a smaller group to discuss this idea further with Deputy Commissioner Kazy before signing the charter.
- **Small Group Meeting**
 - Volunteers for the smaller group included:
 - Ron-Li Liaw
 - Jamie Ulrich
 - Kelli Reidford
 - John Kefalas

(NOTE: small group will be made up from committee members only)

Continuum of Care vs. System of Care

- Robert clarified the distinction between *continuum of care* (the full range of services from prevention to intensive services) and *system of care* (coordination of services for higher-acuity populations).
- Emphasis was made on the importance of the *system of care* as the focus for this group, though prevention services remain valuable as part of the broader continuum.
- **Medicaid System of Care Naming and Updates**
 - There were discussions around renaming the Medicaid System of Care.
 - 28 submissions were received for new names, and after conducting Google searches to verify availability, some names were removed from the list.
 - Sarah Winfrey emphasized the need for an umbrella name that encompasses everything, making it easier to understand.
 - Robert agreed that the goal is to create a name that families can easily understand and latch on to, aiding in service navigation. Wants naming to go in front of the three committees for decision making

JBC Presentation Overview

- Robert provided a recap of the recent presentation to the Joint Budget Committee (JBC), addressing questions about the system of care and the ongoing settlement efforts.
- **System of Care Target Population**



- Robert provided clarity on the target population under the system of care, noting that it focuses on children, youth, and young adults under 21 who are Medicaid-enrolled with mental health needs that require intensive services.
- Emphasis was placed on identifying children at risk before they enter foster care or face school expulsions.
- **The Behavioral Health Administration (BHA) Role in the System of Care**
 - The Behavioral Health Administration (BHA) is deeply involved in the system of care work, including weekly meetings with HCPF and CDHS.
 - BHA is also working on the standardized assessment tools alongside HCPF and CDHS to ensure families don't have to retake assessments.
 - High-fidelity wraparound and care coordination were discussed as core components of the system of care. BHA is setting standards and training providers in this area.

Workforce Expansion and Provider Enrollment

- Meg Taylor raised the issue of community-based organizations not being able to enroll as Medicaid providers due to non-clinical staff. She suggested creating a new provider type to expand the workforce for high-fidelity wraparound services.
- Robert acknowledged this as a potential avenue for discussion, especially considering some families' discomfort with county-based wraparound services due to associations with child welfare.
- **System Coordination and Care Coordination**
 - A discussion on care coordination emphasized that there would not be a strict division between types of care coordinators.
 - Stacey Davis confirmed that RAE care coordinators would remain involved even within the Medicaid system of care to ensure continuity for the family, both before and after services.
- **Future Work and Focus Areas**
 - Robert provided an overview of future plans, including defining support services, behavioral services, and resolving overlaps across payers.
 - There is a push towards integration of services regardless of payer, ensuring families have a unified point of entry, whether they go through BHASOs or RAEs.
- **Workforce Supplemental Funding**
 - Robert mentioned a challenge regarding the supplemental funding for the workforce. The request was denied for the supplemental workforce, but there is still a chance for a comeback.
 - There are difficulties in training and certifying a workforce, so the full use of the \$9.3 million allocated by Senate Bill 195 starting July 2025 might not be possible.





A more specific budget strategy will be discussed later this fiscal year, after finalizing cost estimates.

Cost Estimates and Population Data

- Robert shared that they are finalizing population and cost estimates related to children with behavioral health needs.
- Focus is on a higher acuity population, similar to Illinois' approach, which has a large budget. Ohio and New Jersey have opted to serve a broader population, including non-Medicaid children, leading to a larger budget.
- Further discussions on cost and budget estimates will take place soon.
- Robert discussed the importance of reducing residential stays by implementing a system of care. Evidence shows a reduction in stays by 30-50% in certain studies. The goal is to stabilize children in their homes.
- Phase 1 will target children transitioning from QRDP and emergency departments to prevent further institutional care. National data suggests one-third of inpatient children re-enter within a year, which this program aims to address.
- There is a goal to start certifying workers in July 2025. However, these efforts may face delays.
- **Reimbursement Rates and Rate Setting**
 - Robert discussed the challenge of using historical expenditures to set rates. The average rate might not reflect the true costs of more complex services, especially for children with high acuity.
 - There is a need to rethink how costs for high-acuity children are estimated and ensure that payments reflect the intensity and frequency of required services.

Public Comments:

- **Meigan Lovelace**
 - She asked about funding for the workforce, particularly if the \$9.3 million in Senate Bill 195 will be redirected or if legislation is needed.
 - She also emphasized the importance of addressing the needs of children outside of Medicaid.
- **Elizabeth Cohn**
 - She raised concerns about speech therapy and occupational therapy being underutilized in behavioral health, especially for children with disabilities.
 - Elizabeth advocated for better reimbursement rates and broader access to these therapies, especially for younger children in rural areas.
- **Brett Snyder**





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- Suggested that BHASO representation might be beneficial for the committee, considering the intersections with the broader BHA system of care.

Meeting Adjourned at 1:49 PM

- Next meeting -Thursday, March 20 · 12:30 – 2:00pm
[Video call link](#)

