

Children & Youth

Vision for ACC III

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.

Issues to Address in Phase III

Payment strategies inadequately supporting services

Administrative burden [families + providers]

Lack of a full continuum of care

Inconsistent care coordination across systems

Silos within the health care system

Workforce issues



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Standardized Child & Youth (BH) Benefit

Level of
Care (LOC)

Uniform
Process
Determines

Service
Category

Stakeholder
work defines
across
continuum

Services
Suite

Built into
contracts to
guarantee
across regions



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Completing the Continuum of Care

- Develop a **Standardized Child & Youth Benefit** to address different needs at different levels of complexity
 - Example: [Texas Resilience and Recovery](#) model
- **MODEL PROMOTES**
 - Simplified system
 - Reduction in Regional Variability
 - Framework to identify missing or hard to access services
 - Improve member experience (transparency + consistency)
 - Improve provider experience (transparency + consistency)
 - Increased accountability and oversight of RAEs



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The Continuum of Care



Child Benefit Continuum

Full continuum from screenings to inpatient psychiatric hospitalization

Level of Care	Service types			
Early Intervention	Screenings	Early Dyadic Services		
Base Outpatient	Medication Management	School-based BH	Clinic/Office setting	Community Crisis
Intensive Outpatient	Transition Services	Intensive Home-based	Intensive Community	
Residential	Qualified Residential Treatment Program	Psych Residential Treatment Facility	Crisis Stabilization Unit	
Hospitalization	Inpatient Psychiatric			

Level of acuity within service continuum

Population Acuity															
No or Unknown BH Needs	Tier 1														
Mild BH Needs	Tier 2														
Brief Acute Needs	Tier 3														
Chronic Acute Needs	Tier 3 + Intensive Treatment Planning														
Level of care	Community			Base Outpatient			Intense Outpatient			Residential			Inpatient		
ASAM Level	0.5			1			2.1; 2.5			3.5			3.7		4.0
MH Level of Care	0.5			1			1.5	2.0		2.1; 2.7		3.1; 3.5		3.7	4.0
Intensive Needs Assessments	NOT REQUIRED (Decision Making Tool available)							REQUIRED							
Wrap Around Continuum				Decision Making Tool dependent											
Services Continuum	Universal Promotion and prevention	Targeted Prevention	Screenings	Early Dyadic Services	Medication Only	School Based BH	Base Outpatient Services	Community Crisis Services	Transition Services	Intensive Community Based Services	Intensive Home Based Services	Q RTP	P RTF	CSU	Inpatient Hos.

- The higher end of the service continuum needs to be complete with services for children w/ acute needs
- Expand universal screenings (standardized) in various settings
- Have services that are for prevention and early intervention (dyadic services)
- Have trauma based therapies be a distinct set of services or highlighted under intensive community based services
- Increase the availability of intensive in-home services



Care Coordination

Tier	Entry Point	Activities at a Minimum Must Include
1: Prevention or Navigation	<ul style="list-style-type: none"> Well child visits PCP 	<ul style="list-style-type: none"> Brief needs screen Short-term monitoring/support Prevention outreach and education
2: Condition Management	<ul style="list-style-type: none"> Assessment indicating moderate needs Pervasive Developmental Disorder Substance Use Disorders Depression/Anxiety Disorders, e.g. 	<ul style="list-style-type: none"> Condition-based care plan Assessment based on population/need Condition management Long-term monitoring/support
3: Complex Members	<ul style="list-style-type: none"> Assessment indicated Creative Solutions Involved Uncontrolled BH conditions Multi-system involved (3+ visits/6 mos): Crisis, ED, or Hosp. 	<ul style="list-style-type: none"> Comprehensive care plan Assessment based on population/need Minimum monthly team meetings Long-term monitoring/support
3 + ITP/HFW	Tier 3: Complex Members with intensive treatment planning or High Fidelity Wrap needs	External vendor with ITP or HFW expertise manage care management in conjunction with RAE oversight



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System of Care Components



Components to System of Care

Standardized Assessment

Standardized assessment (CANS) to uniformly determine a child's needs and service type.

Crisis Resolution Teams

Intensive short-term in-home services and ongoing supports for those in crisis system or EDs.

Intensive Care Coordination

Hands-on care coordination with high-fidelity wraparound services and progress monitoring.

Support Services

Long-term in-home services to meet the support needs of children via Waiver.

Specialty Placements

1. Treatment Foster Care.
2. CHRP residential for long term supportive placements.



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HB 24-1038: High Acuity

Standardized
Assessment

Intensive Care
Coordination

Support
Services

Habilitative
Placements

Residential
Incentives

Residential Quality
& Oversight

Residential
Workforce

Room & Board
Alignment



ACC III Child & Youth Benefit Components

Standardized Assessment

Care Coordination Tiers

Support Services

Habilitative Placements

Level of Care Tool

High Fidelity Wrap

Early Dyadic Services

Intensive In-Home and Community Services