HCPF Fact Sheet Page 1 of 5



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Colorado System of Care (CO-SOC) Frequently Asked Questions

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The Department of Health Care Policy and Financing (HCPF) administers Health First Colorado (Colorado's Medicaid program), Child Health Plan *Plus* (CHP+) and other health care programs for Coloradans who qualify. This guide provides answers to frequently asked questions about the Colorado System of Care.

General

Q: What is a System of Care?

A: A System of Care (SOC) is a coordinated network of community-based services and supports for eligible Medicaid members with significant or complex mental health concerns or other challenges and their families. It is designed to:

- build strong and meaningful partnerships with families and youth,
- be culturally and linguistically responsive, and
- help children, youth and their families function better at home, in school, in the community, and throughout life.

Q: What is the Colorado System of Care?

A: The Colorado System of Care (CO-SOC) is the statewide framework developed collaboratively by HCPF and the Behavioral Health Administration (BHA) to support children and youth with complex or high-acuity behavioral health needs.

Phased Rollout

Q: What is happening in year one of CO-SOC?

A: Beginning July 1, 2025, year one of CO-SOC will focus on serving Medicaid members between the ages of 11 and 17 who are referred to their Regional Accountable Entity (RAE) and are:

- Nearing discharge from residential treatment settings, or
- Experiencing an "Extended Stay" status in a hospital setting (per C.R.S. § 27-50-101(13.5)).

CO-SOC year one services include:

- Use of an Enhanced Standardized Assessment (ESA).
- Intensive care coordination through Enhanced High-Fidelity Wraparound (EHFW).
- Intensive home-based treatment (IHBT) delivered through Enhanced Multisystemic Therapy (EMST), Enhanced Functional Family Therapy (EFFT) or other approved evidence-based models.

HCPF Fact Sheet Page 2 of 5

Q: Where can I find information about CO-SOC?

A: You can find more information on the <u>CO-SOC webpage</u>. To stay informed and engaged in the CO-SOC implementation:

- <u>Subscribe</u> to the Colorado System of Care (CO-SOC) for Children and Youth Behavioral Health Newsletter, and
- Email questions about CO-SOC to hcpf co soc@state.co.us.

Q: How can I get involved in CO-SOC?

A: You can participate in the CO-SOC advisory committees, which are open to the public. These include the Implementation Advisory Committee, Lived Experience Committee, and Statewide Leadership Advisory Committee. Meeting dates and registration details are available on the <u>CO-SOC webpage</u>.

Enhanced High Fidelity Wraparound

Q: What is Intensive Care Coordination?

A: Intensive Care Coordination (ICC) is a more comprehensive approach to care planning, coordination of services, authorization of services, and monitoring of services and supports than that provided in traditional clinical or medical settings. Under CO-SOC, ICC is delivered using evidence-based models from the National Wraparound Implementation Center (NWIC), including EHFW.

Q: What is Enhanced High Fidelity Wraparound?

A: Enhanced High Fidelity Wraparound (EHFW) is an evidence-based care coordination model designed for youth and families who are experiencing a behavioral health crisis and/or at imminent risk of out-of-home placement. More information can be found at the Intensive Behavioral Health Services webpage.

Q: Who can provide EHFW?

A: EHFW may only be provided by a certified ICC provider who will coordinate intensive behavioral health services and support providers delivering services for eligible members. Additional information on Certified ICC Providers can be found in Section 3.5 of the lmplementation Plan.

Intensive Home-Based Treatment

Q: What is Intensive Home-Based Treatment (IHBT)?

A: IHBT is a framework and set of practice standards for delivering intensive, mental health services for children and youth with serious emotional disabilities and their families IHBT emphasizes:

- Supporting the family system and natural supports,
- Providing services in the home, school and community where the youth lives, and
- Stabilizing mental health concerns, addressing educational needs and supports, and safely maintaining the youth in the least restrictive, most normative environment.

Q: What is Multisystemic Therapy?

A: Multisystemic Therapy (MST) is an intensive, in-home treatment for adolescents, ages 12 to 17, who display serious behavioral challenges. MST targets the factors that contribute to anti-social behavior, including adolescent characteristics, family relations, peer relations, and school performance. MST addresses gang involvement, runaway behaviors, heavy

HCPF Fact Sheet Page 3 of 5

substance use, or those who are at risk for juvenile justice system involvement. More information can be found at the <u>MST Services website</u> and <u>Title IV-E Prevention Services</u>.

Q: What is Functional Family Therapy?

A: Functional Family Therapy (FFT) is a systematic, evidence-based, manual-driven, family-based treatment program used for a wide range of problems (including drug use and abuse, conduct disorder, mental health concerns, truancy, and related family problems) affecting youth ages 11 to 18 and their families. More information can be found at the FFT LLC website and Title IV-E Prevention Services.

Q: What does "enhanced" mean?

A: The designation of "Enhanced" for MST and FFT under CO-SOC and the Workforce Capacity Center reflects the commitment to fidelity and the additional intensity required to serve children and youth with the highest acuity needs.

Q: Can a person be trained on both the MST and FFT model?

A: No, a clinician cannot be trained on both based on each model's strict adherence to its own fidelity standards. Cross-training would compromise the integrity of the models.

Q: Will there be training for CO-SOC programs for sites/providers?

A: Yes, the Workforce Capacity Center (WCC) will develop certification and training programs for CO-SOC, including EHFW. The WCC will partner with national organizations, including MST Services/Affiliates and FFT LLC, to provide training, technical assistance, and fidelity monitoring for CO-SOC providers.

Enhanced Standardized Assessment (ESA) and Child and Adolescent Needs and Strengths (CANS) Tool

Q: What is the Enhanced Standardized Assessment?

A: ESA is a comprehensive behavioral health assessment conducted as a behavioral health encounter conducted by a nonphysician, licensed or licensure candidate behavioral health professional. The ESA is designed to provide a full clinical picture of the child, youth and family's needs, guide treatment and service planning and ensure recommendations align with an appropriate level of care.

Q: What is the CANS tool?

A: The CANS tool is a standardized, multi-purpose assessment tool used to:

- Support decision making, including level of care and service planning,
- Facilitate quality improvement initiatives, and
- Allow for the monitoring of outcomes of services.

The CANS tool was developed to ensure that the assessment process directly links to the individualized service plans and supports the application of evidence-based practices.

Q: How was the new Colorado CANS 3.0 tool developed?

A: In 2025, HCPF, along with other state agencies and a variety of stakeholders, partnered with Dr. John Lyons, the founder of Child and Adolescent Needs and Strengths (CANS) tool and the Director of the Center for Innovation in Population Health at the University of Kentucky, to develop the new Colorado CANS 3.0.

HCPF Fact Sheet Page 4 of 5

Workforce Capacity Center

Q: What is the Workforce Capacity Center?

A: HCPF, in collaboration with BHA, has contracted with Colorado State University to create a Workforce Capacity Center (WCC) to oversee training, credentialing, and fidelity monitoring of providers to ensure adherence to the standards of evidence-based models.

Q: What will the WCC do?

A: The WCC will:

- Develop certification and training programs for the Colorado System of Care (CO-SOC), which includes Enhanced High Fidelity Wraparound (EHFW), Enhanced Functional Family Therapy (EFFT), Enhanced Multisystemic Therapy (EMST), Enhanced Standardized Assessment (ESA), and the Children and Adolescent Needs and Strengths tool (CANS).
- Provide training, technical assistance, and fidelity monitoring for the CO-SOC in partnership with national model developers.
- Support behavioral health workforce recruitment, retention, and provider expansion, particularly in rural and frontier communities.
- Track and report provider certifications, fidelity outcomes, and workforce data through regular reports and dashboards.

O: How will the WCC be involved in EHFW?

A: The WCC will collaborate with NWIC to train and certify EHFW coaches for CO-SOC EHFW sites. These coaches will be employed by the WCC and will be assigned to support 9 to 12 teams or sites who provide EHFW.

Agency Roles

Q: How is BHA involved in CO-SOC?

A: HCPF and BHA are working together in the development and implementation of CO-SOC. BHA involvement includes: participating in regularly scheduled planning meetings, serving on CO-SOC advisory committees, and collaborating on the WCC. Additionally, children and youth who are not Medicaid-eligible will be referred to a Behavioral Health Administrative Service Organization (BHASO).

Q: How is the Colorado Department Of Human Services (CDHS) involved in CO-SOC?

A: Cross-system collaboration between CDHS and HCPF is vital to ensuring access to CO-SOC services for children and youth who are involved in child welfare or juvenile justice. For children or youth who are involved in the Division of Child Welfare or the Division of Youth Services, the assigned case manager will be included as a member of the care team, which is identified by the ICC facilitator.

Q: What are the Regional Accountable Entity (RAE) roles in CO-SOC?

A: RAEs play a key role in CO-SOC by:

- Providing ongoing care coordination for their members,
- Authorizing services and treatment,
- Leading data collection and readiness activities throughout year one, and
- Identifying potential CO-SOC providers.

HCPF Fact Sheet Page 5 of 5

Q: What are the agency roles in the advisory committees?

A: The BHA, CDHS, Colorado Department of Early Childhood and other state departments have representatives who participate on the CO-SOC advisory committees, including the Statewide Leadership Advisory Committee and Implementation Advisory Committee.

For more information contact

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