Colorado Behavioral Healthcare Council

Supporting community resilience, guiding behavioral health innovation, and partnering to enhance individual wellbeing throughout Colorado

CBHC Membership

- > 17 Community Mental Health Centers (CMHCs)
- ➤ 4 Managed Service Organizations (MSOs)
 - Manage non-Medicaid, state and federal funding for substance use disorder (SUD) services (prevention, treatment and recovery) across seven state regions.
- 2 Specialty Clinics:
 - Servicios de la Raza
 - Asian Pacific Development Center



Presentation Objectives

- Provide an overview of Colorado's Community Mental Health Center system.
- Describe challenges to behavioral health care in Colorado, including the impact of COVID-19.
- Discuss potential strategies to mitigate those challenges and CBHC's policy priorities.



Colorado Behavioral Healthcare Council

Colorado's Community Mental Health Centers:

- Provide a continuum of behavioral health services and respond to local needs
- Established in statute in 1967, currently referenced in C.R.S. 27-66-101
- Colorado's Safety Net Behavioral Healthcare System



* Anapahoe County is served by Anapahoe/Douglas MHV excluding the city of Aurora, which is served by Aurora MHC.

Colorado Community Mental Health Centers by County Served

Unduplicated Count - Persons Served





Comprehensive Array of Services



Mental Health First Aid Colorado

Mental Health First Aid (MHFA) is a national public education program that introduces participants to risk factors and warning signs of mental health and substance use problems.

MHFA has been delivered to more than 2 million individuals nationally, enabled by strong, local partnerships and local fundraising tied to advancing dissemination. To date, MHFA has been delivered to over 70,000 Coloradans.

CBHC administers MHFA Colorado.

Benefits of MHFA Courses



Factors Limiting Access To Behavioral Health Care

Stigma	 MH/SUD seen as moral issue rather than chronic disease Fear of losing one's job, child welfare issues and/or civil commitment
Navigating complex systems	• Fragmented and administratively complex
Insurance coverage	 Uninsured or underinsured Inadequate enforcement of Parity Limited scope of coverage
Provider reimbursement	 Workforce shortages Inadequate rates for MH and SUD services Limited opportunities for participation in alternative payment models

Impact of COVID-19

- The COVID-19 pandemic and its impact on our health, well-being and economy has created or exacerbated negative behavioral health consequences for many of us and our loved ones; anxiety, depression, loneliness, sleep disturbances, increased substance misuse/abuse, and trauma are all likely during this stressful and uncertain time.
- It is more important than ever that we be intentional about taking care of ourselves and to do what we can to check in on family, friends, and neighbors.
- It is more important than ever that Colorado's behavioral health safety net be strengthened so we can continue to provide much needed services and supports.

Figure 8

Significant Shares Say The Coronavirus Has Had A Negative Impact On Their Mental Health

Percent who say they feel that worry or stress related to coronavirus has had a negative impact on their mental health:



SOURCE: KFF Health Tracking Poll (conducted March 25-30, 2020). See topline for full question wording.





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Do you feel that worry or stress related to the coronavirus has had a negative impact on your mental health, or not?

Fifty-three percent of all respondents, and 61% of women said the stress and worry related to the coronavirus has had a negative impact on their mental health. Other population subgroups that have had their mental health negatively impacted significantly include younger individuals aged 18 to 29 (69%), family households with a child aged 18 or younger (64%), Denver residents (62%), people who have lost their job or income (62%) and people who do not have health insurance (69%).





Responding to the Pandemic

- CBHC members have continued to provide face to face crisis, residential and in-patient services, while adhering to strict safety guidelines.
- Within days, CBHC members dramatically increased their telehealth capabilities.
 - Emergency provisions at the state and federal levels have enabled providers to deliver outpatient services via video, telephone, or live chat and get reimbursed for those services at rates comparable to services provided in office-based settings.
 - Some CBHC members are offering expanded evening and weekend appointments and groups.

For more information visit <u>https://www.cbhc.org/covid-19-info/</u>

CMHC Disaster Behavioral Health Response CMHCs play a pivotal role in responding to community crises including man-made and natural disasters and each has a Disaster Response Coordinator.



In response to COVID-19 CMHCs are stepping up to provide

Crisis counseling to first responders, health care workers and other essential workers. Support groups and education on coping skills, stress management, parenting, etc.

Other partnerships with state and local public health agencies



To our Colorado residents and friends,

We understand the growing concerns about the Coronavirus (COVID-19), and its impact on public health, daily lives, and access to mental health and addiction recovery services. Colorado's Community Mental Health Centers are committed to ensuring the continuity of essential services while also safeguarding the health of staff, clients, and communities. To provide support during this time, the Colorado Behavioral Healthcare Council would like to offer the following resources to you.





Lawmakers Will Soon Start The Grim Work Of Cutting Colorado's Coronavirus Wounded Budget





Hart Van Denburg/CPR News

CBHC Policy Priorities



CBHC supports alternative payment models that offer increased flexibility and enable providers to respond to emerging community and client needs.



CBHC supports policies that promote a full array of mental health and substance use disorder treatment services that meet the needs of Colorado's diverse population and communities.



CBHC supports policies and program models that will help build Colorado's behavioral health workforce.



CBHC supports policies that promote accountability while reducing administrative burden and increasing alignment.

Behavioral Health Workforce Crisis

- Aging Workforce
- Shortage of New Professionals
- Geography a Key Factor
- Salary Disparity Between Systems
- Credentialing and Billing Issues



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Administrative Burden





Payment Models

- Reimbursement rates in behavioral health have historically been inadequate and lack parity with primary care or other specialists.
- Current payment methodologies focus on volume over capacity, value or quality.
- More flexible payment models are needed to provide patientcentered care and respond quickly to emerging community needs.

Some National Models Addressing Payment and Service Delivery Reform in Behavioral Health

- Certified Community Behavioral Health Clinics (Section 223 of the Protecting Access to Medicare Act of 2014.)
 - A new federal definition for behavioral health provider with a defined set of services and standardized data and quality reporting.
 - Prospective Payment System tied to actual costs.
- Medicaid Health Homes for persons with chronic conditions (section 2703 of the Affordable Care Act)
 - Providers earn a per member per month for enhanced care coordination and care management for persons with serious mental illness and/or 2 + chronic conditions





Discussion

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