Care Coordinatiion Infrastructure
Presentation to the Behavioral Health Transformational Task Force

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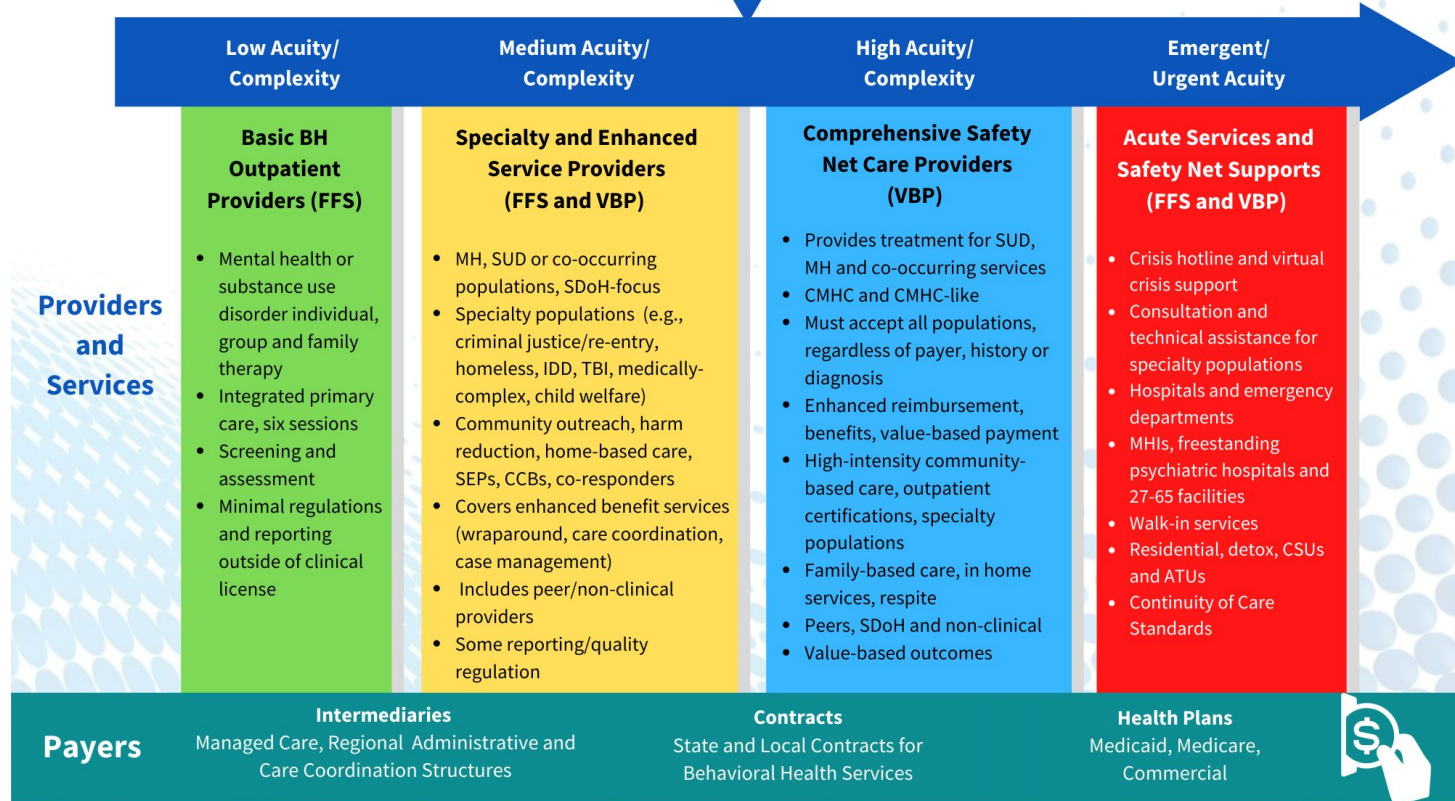
COLORADO
Department of Human Services

SB 19-222: Safety Net Vision

Consumer Care Navigation and Coordination Gateway

Low Acuity/ Complexity	Medium Acuity/ Complexity	High Acuity/ Complexity	Emergent/ Urgent Acuity

Providers and Services

Basic BH Outpatient Providers (FFS)	**Specialty and Enhanced Service Providers (FFS and VBP)**	**Comprehensive Safety Net Care Providers (VBP)**	**Acute Services and Safety Net Supports (FFS and VBP)**
• Mental health or substance use disorder individual, group and family therapy • Integrated primary care, six sessions • Screening and assessment • Minimal regulations and reporting outside of clinical license	• MH, SUD or co-occurring populations, SDoH-focus • Specialty populations (e.g., criminal justice/re-entry, homeless, IDD, TBI, medically-complex, child welfare) • Community outreach, harm reduction, home-based care, SEPs, CCBs, co-responders • Covers enhanced benefit services (wraparound, care coordination, case management) • Includes peer/non-clinical providers • Some reporting/quality regulation	• Provides treatment for SUD, MH and co-occurring services • CMHC and CMHC-like • Must accept all populations, regardless of payer, history or diagnosis • Enhanced reimbursement, benefits, value-based payment • High-intensity community-based care, outpatient certifications, specialty populations • Family-based care, in home services, respite • Peers, SDoH and non-clinical • Value-based outcomes	• Crisis hotline and virtual crisis support • Consultation and technical assistance for specialty populations • Hospitals and emergency departments • MHIs, freestanding psychiatric hospitals and 27-65 facilities • Walk-in services • Residential, detox, CSUs and ATUs • Continuity of Care Standards

Payers

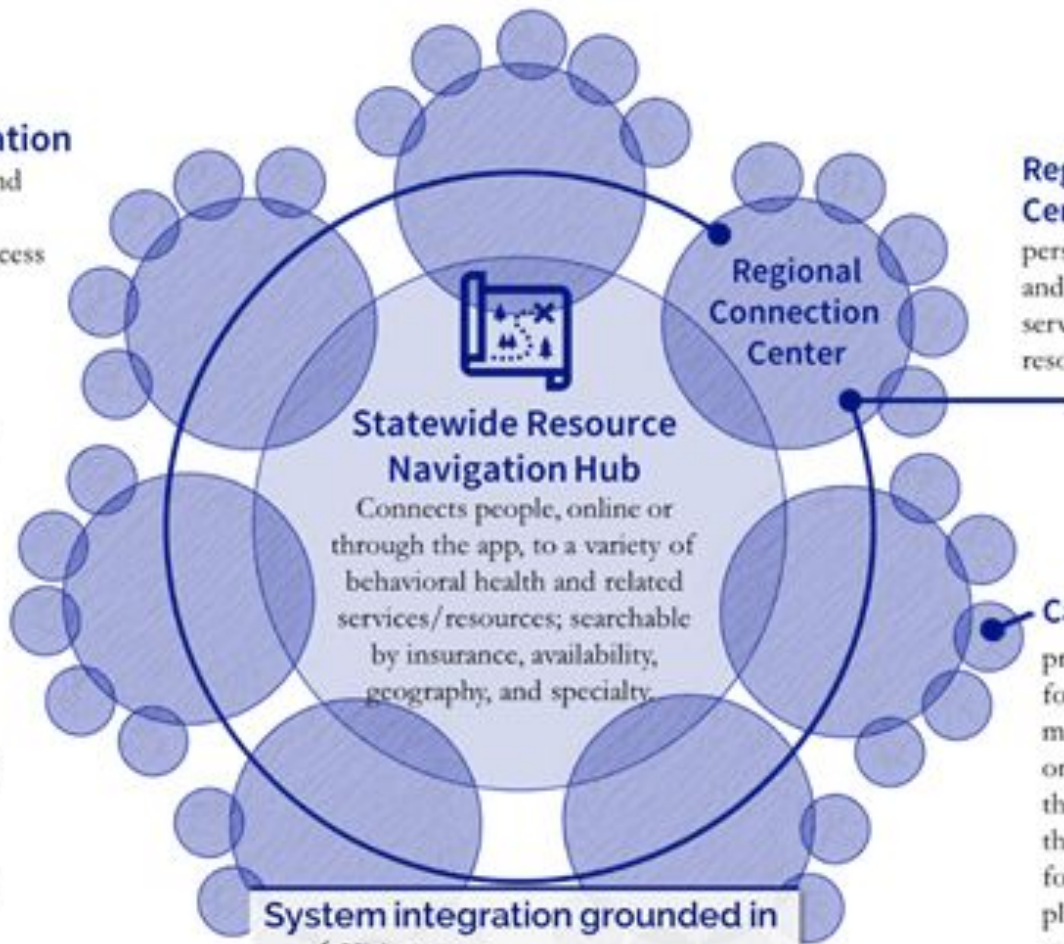| **Intermediaries** Managed Care, Regional Administrative and Care Coordination Structures	**Contracts** State and Local Contracts for Behavioral Health Services	**Health Plans** Medicaid, Medicare, Commercial

Multi-System Integration

enables cross-systems care and information sharing. This ensures easy and seamless access to the following services:

- **Behavioral Health**
- **Basic Human Needs** (housing, income, food, transportation, community)
- **Criminal Justice**
- **Education**
- **Child Welfare**
- **Aging & Disability**

Accountability

is supported through the statewide resource navigation platform with automatic survey and rating requests and through an easy to access complaint system with follow-up by regional resource navigators or care coordinators.

Regional Connection Center

Statewide Resource Navigation Hub

Connects people, online or through the app, to a variety of behavioral health and related services/resources; searchable by insurance, availability, geography, and specialty.

Regional Connection Centers

provide in-person or phone support and warm hand-offs to services, including local resources.

Care Coordination

provides wraparound services for people involved with multiple systems to facilitate one plan, one team; ensures that the individual/family has the supports they need to follow-through with their plan; and checks in and follows up to ensure ongoing engagement and effectiveness.

System integration grounded in

- ✓ Hiring peers,
- ✓ Trauma-informed and person-centered approaches, and

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Care coordination is a website and mobile application that serves as a centralized and cross-payer gateway for information for patients, providers, and care coordination and that facilitates access and navigation of behavioral health-care services and support.

Kick off meeting and orientation is Wednesday-11/10/21.

- **Policy**: Ensure that clients do not fall through the cracks and are able to be supported through care transitions and improved support to address SDOH.
- **User Design:** Front door to entry for locating resources including behavioral health and SDOH in your community. This tool will embed screening tools, free wellness and psychoeducational resources, community resources, and a process for accessing local care navigation and supports.
- **Technology:** Interoperable and Leverages existing tools and resources in partnership with OeHI and the eHealth Commission

SB21-137
Care Coordination
$26 M

1. Funding to support connections to the use of a statewide shared care coordination system and HIEs -also known as social health information exchange (S-HIE)

2. An EHR Lite that is compatible for HIE connections--meaning a single platform for paper based organizations to participate in the ecosystem for care coordination.

3. Upgrades for providers EHRs to improve provider to provider exchange of information through a standard information sharing.

Recommended Enhancements $15 M

Resource Navigation and Care Coordination human and regional investments:

Augment and where necessary build regional walk-in centers for crisis management and care coordination walk- in centers.

1. Ensure access for co-occurring conditions, paying special attention to meeting gaps by geography and population, including young people.

2. Hub and spoke model that provides "hot handoffs" between the center's offered community based services and beds when necessary.

1. Dept of Public Safety on Criminal Justice Information will be coordinated to align and connect resources into the single statewide platform to ensure improved coordination of care for justice involved populations.

2. HCPF has prioritized $15M for interoperability for social determinants of health platforms (6 or 7 in the state); $12M will go to platforms being interoperable; supplemental funding for increasing effectiveness. Micro-grants for local partners.

Recommended Enhancements $15 M

Additional Considerations