



COLORADO

Office of Behavioral Health

Department of Human Services

Overview of the Colorado Office of Behavioral Health & the State Behavioral Health System



Patrick K. Fox, M.D.
Chief Medical Officer, CDHS

CCJJ Presentation
May 13, 2016

Colorado Government Organizational Structure

Governor John Hickenlooper

Dept of Healthcare Policy and Financing

Executive Director Sue Birch

Department of Human Services

Executive Director Reggie Bicha

Department of Public Health and Environment

Executive Director Larry Wolk

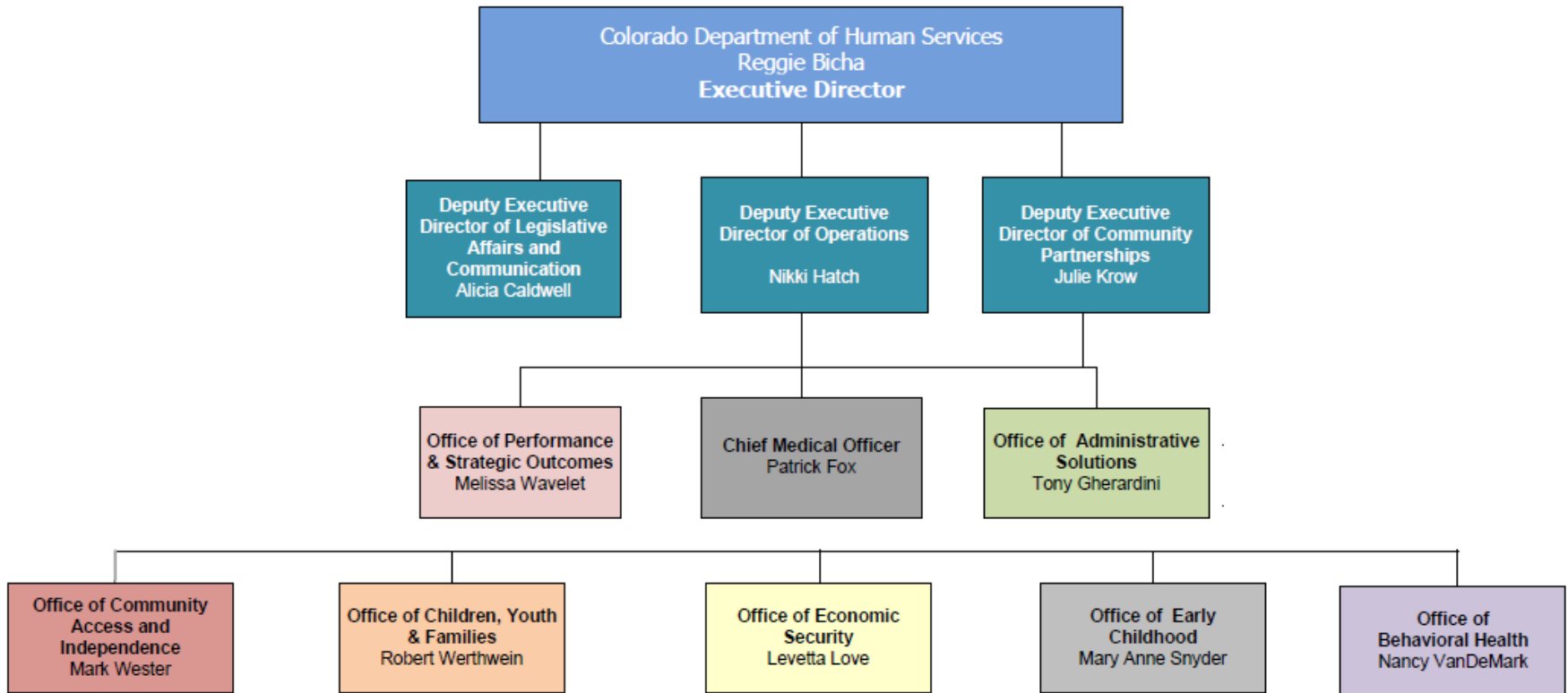
Primary oversight of Medicaid-funded services and health care purchasing as the designated state Medicaid authority. Behavioral health services include both mental health and substance use disorder services. Most behavioral health services are provided to Medicaid-eligible clients through statewide managed care through the Medicaid 1915(b) Waiver or "capitated" program.

Public health agency has primary regulatory oversight of and licensing authority over health facilities and the provision of agency licenses: hospitals, community mental health centers and community mental health clinics, nursing homes, and school-based health clinics.

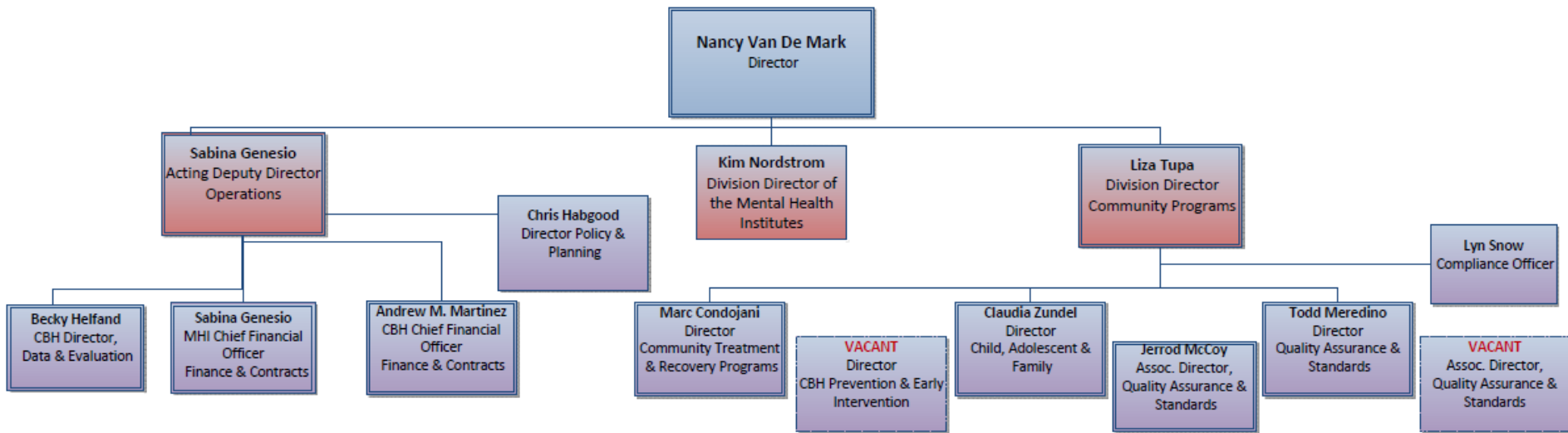


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CDHS Organizational Structure



Office of Behavioral Health Organizational Structure



Office of Behavioral Health

Vision

Transforming and Strengthening Behavioral Health for Coloradans as a leader in behavioral health prevention, early intervention, treatment and recovery.

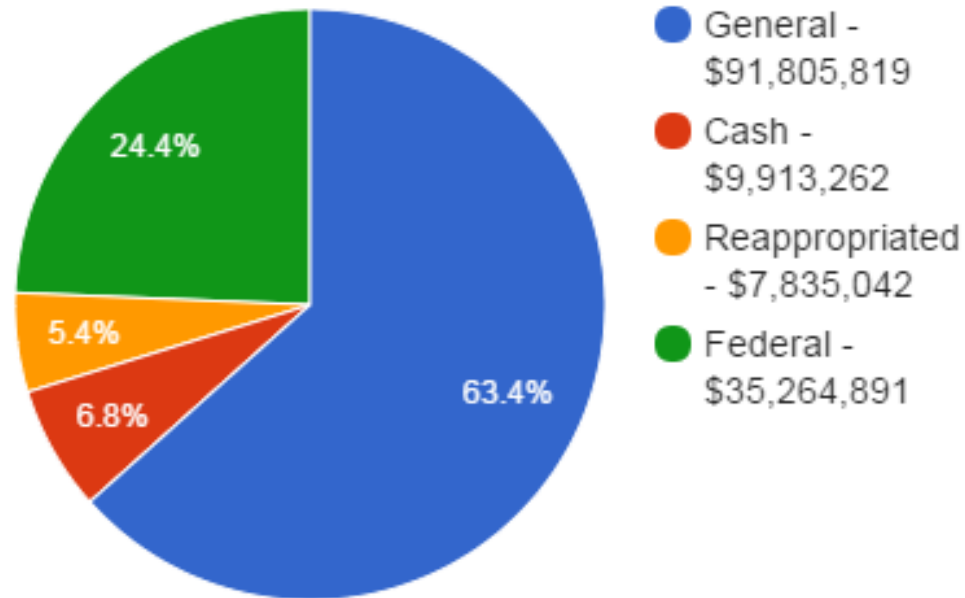
Mission and Goals

We are dedicated to strengthening the health, resiliency, and recovery of Coloradans through quality and effective behavioral health prevention, intervention, treatment and recovery.



Community Behavioral Health Services

OBH FY 2015-16 Appropriated Fund Total:
\$144,819,014



Federal Fiscal Year Award

MH Block Grant	\$6,900,325
SA Block Grant	\$25,467,833

Community Behavioral Health Services

Overview

- Employs 59.2 FTE (Long Bill appropriated)
 - Staff work primarily within seven program/activity areas:
 - Prevention and Early Intervention Programs
 - Treatment and Recovery Programs
 - Quality Assurance and Standards
 - Crisis Services
 - Child, Adolescent and Family Services
 - Data and Evaluation
 - Business & Support Services



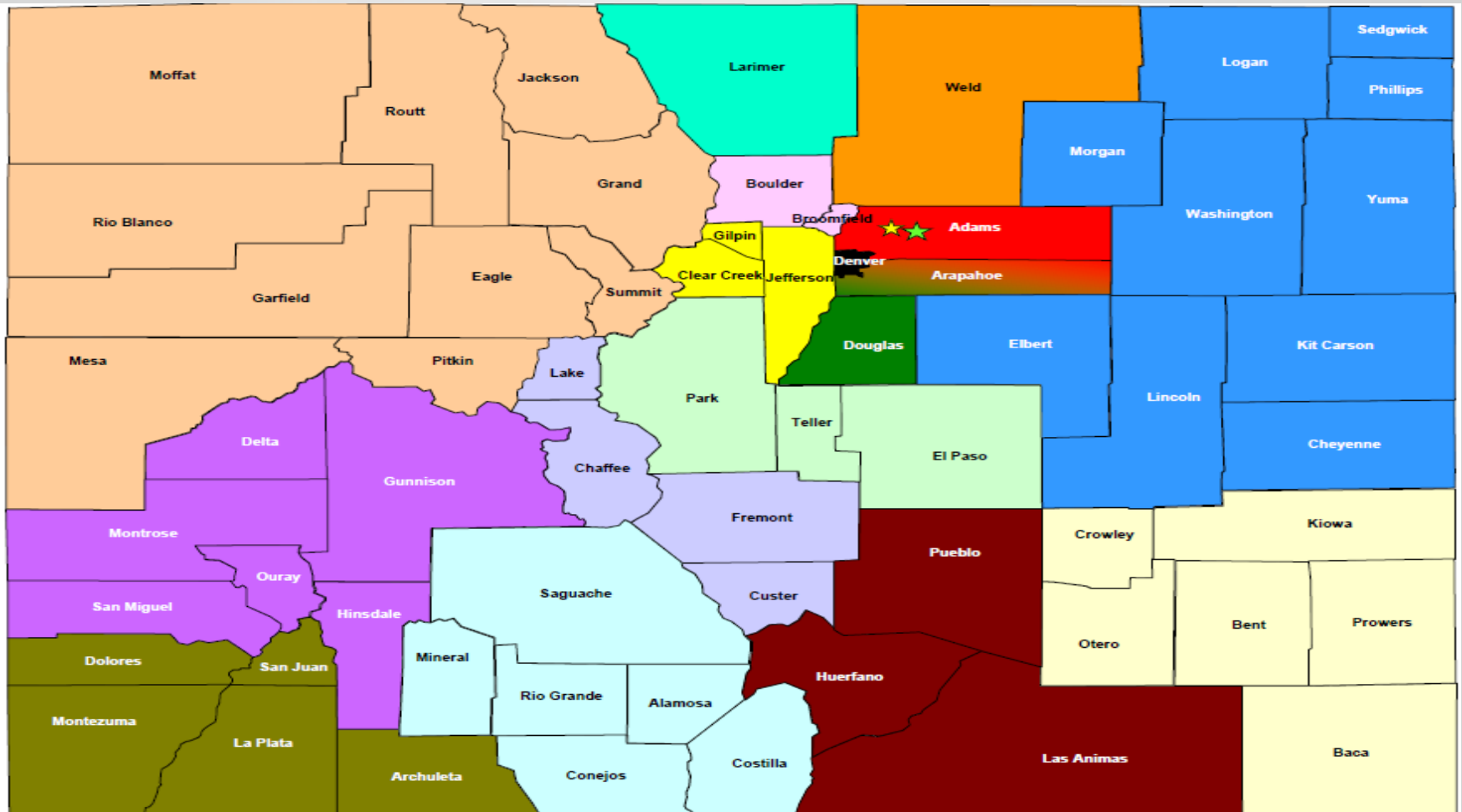
Community Behavioral Health Services

In accordance with Colorado statute, oversees community behavioral health providers of services, including:

- 17 community mental health centers.
- 14 community mental health clinics or psychiatric specialty clinics. (Clinics serve special populations such as members of racial, ethnic or linguistic minority groups.)
- 48 designated facilities (involuntary mental health treatment, 1,445 psychiatric beds, including the two state psychiatric institutes).
- 4 designated managed service organizations across seven sub-state purchasing areas that contract with 41 funded substance use disorder treatment providers 184 sites of service.
- 6 acute treatment facilities.
- 40 residential facilities providing residential mental health services for children (psychiatric residential treatment facilities and therapeutic residential child care facilities).
- 698 licensed substance use disorder treatment provider agencies.
- 44 prevention providers (94 statewide programs/strategies).



Community Mental Health Centers



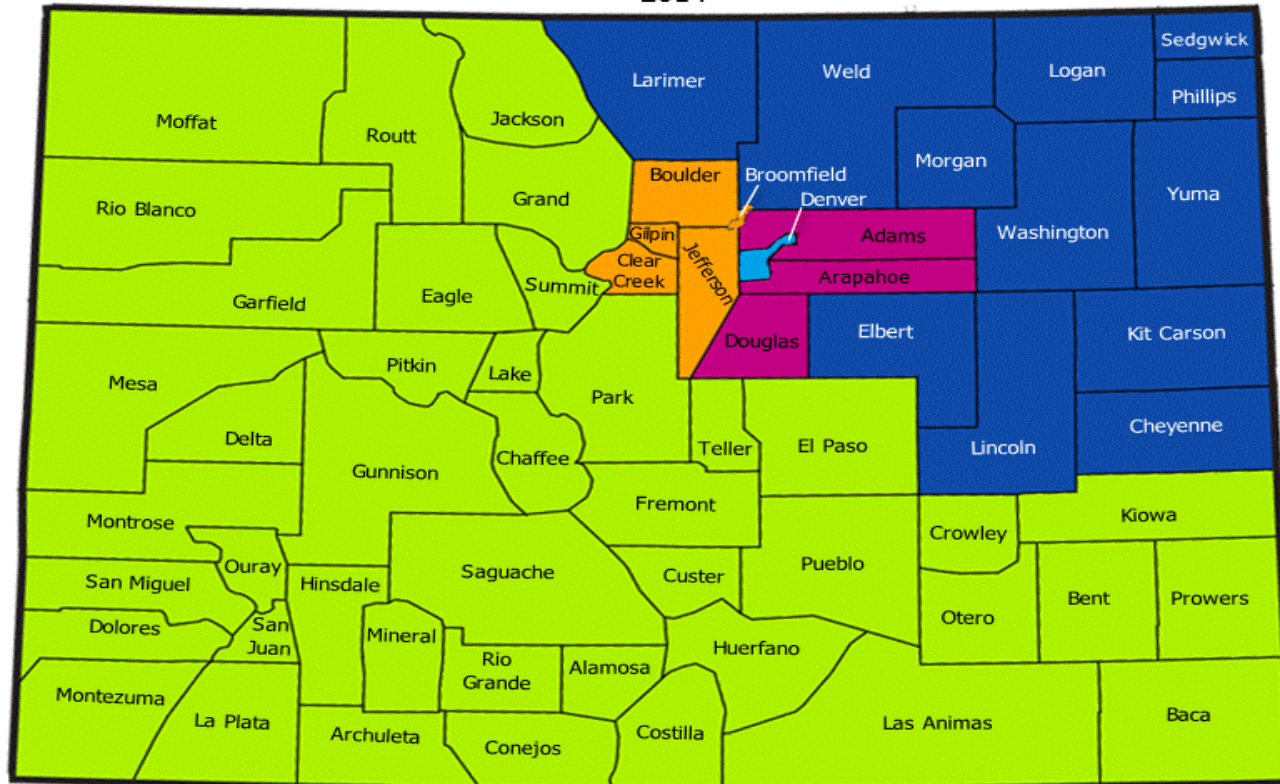
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|------------------------------------|------------------------------------|---|------------------------------|
| ★ Servicios de la Raza | Axis Health Systems, Inc. | Mental Health Center of Denver | Solvista Health |
| ★ Asian Pacific Development Center | Centennial Mental Health Center | The Center for Mental Health | Southwest Family Group |
| AllHealth Network* | Community Reach Center | Mind Springs Health | Health Solutions |
| AspenPointe | Jefferson Center for Mental Health | North Range Behavioral Health | Summit Stone Health Partners |
| Aurora Mental Health Center* | Mental Health Partners | San Luis Valley Behavioral Health Group | |

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

Colorado Community Mental Health Centers by County Served

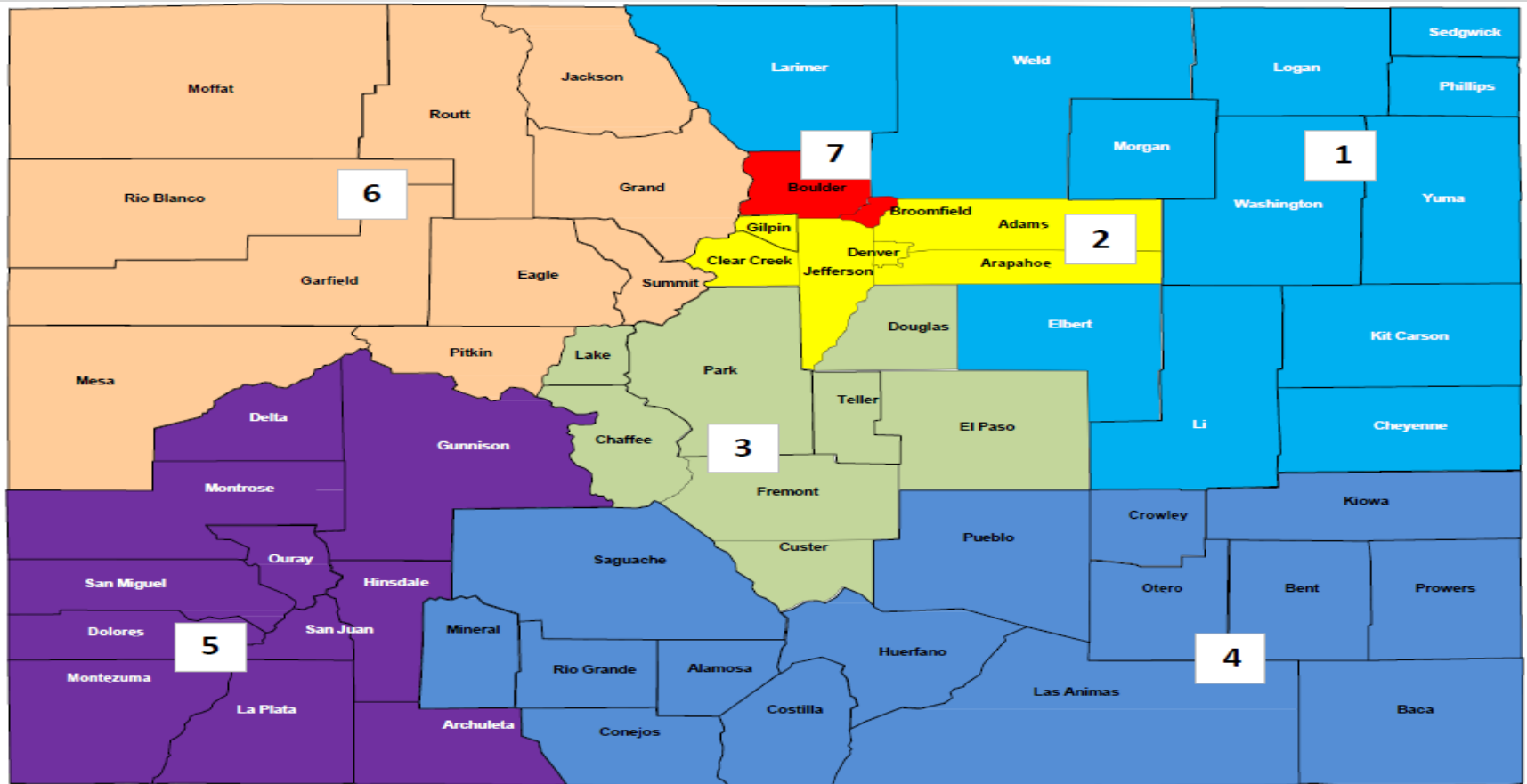
Behavioral Health Organizations

Colorado Medicaid
Community Behavioral Health Services Program
Geographic Service Areas
2014



- Colorado Access/Access Behavioral Care Northeast (ABC)
- Behavioral Healthcare, Inc. (BHI)
- Colorado Health Partnership (CHP)
- Foothills Behavioral Health Partners (FBHP)
- Colorado Access/Access Behavioral Care Denver (ABC)

Managed Service Organizations



**Colorado Managed Service Organizations
Catchment Areas by Sub-State Planning Areas (SSPA)**

MSO	SSPA
Mental Health Partners	7
AspenPointe	3
Signal Behavioral Health Network, Inc.	1, 2, 4
West Slope Casa, LLC	5, 6

Strengthening Colorado's Mental Health System- Colorado's Crisis Response System

EXPANDED BEHAVIORAL HEALTH ACCESS FOR COLORADO

Colorado's first statewide resource for assistance with a mental health, substance use or other emotional crisis

Established via Gov. John Hickenlooper's "Strengthening Colorado's Mental Health System: A Plan to Safeguard all Coloradans" initiative in partnership with the Colorado Department of Human Services

Provides expanded access to behavioral health crisis services, ensuring Coloradans get the right services in the right locations at the right time throughout the state



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Strengthening Colorado's Mental Health System- Colorado's Crisis Response System

GOALS:

- Expand early access to support and services for individuals with behavioral health needs and their families
- Promote ongoing recovery through linkage with community resources
- Decrease the number of unnecessary involuntary civil commitments, hospital emergency room visits, jail stays, and reduce episodes of homelessness for individuals experiencing a behavioral health emergency
- Increase the availability of community and natural supports to prevent behavioral health crisis



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Colorado's Crisis Response System

Key Service Components

CRISIS SUPPORT LINE 1-844-493-8255

The crisis support line is a 24/7/365 support line for anyone affected by a mental health, substance use or emotional crisis. All calls are connected to a mental health professional, who will provide immediate support and connections to further resources.

CRISIS WALK-IN CENTERS / STABILIZATION UNITS

The crisis walk-in centers are open 24/7/365 and provide walk-in crisis screening and counseling, medical clearance, assessment and triage and linkage to follow-up service providers.

They are designated by the State to accept individuals voluntarily or on a mental health hold; they can also vacate a hold or initiate a hold.

Crisis Stabilization Units provide crisis beds for 1-5 days, for either voluntary or involuntary treatment.

Services are provided regardless of residency, legal status, payor source or lack of a payor source, or diagnosis. Prior authorization is NOT needed for crisis stabilization services, whether CSU, Respite, or Mobile.

MOBILE CARE

Mobile care is available 24/7/365, meeting individuals at their homes or other locations.

Mobile care includes specialized services to meet individual's unique needs. Mobile care will arrange for appropriate transport to needed services for individuals in crisis, ensuring that transportation options are safe and provided in the least restrictive manner whenever possible.

RESPITE CARE

Respite care provides safe, stabilization and support, and is often peer-managed. This service requires an assessment by a Crisis Clinician, either through Mobile or Walk-in Services and has a voluntarily stay of 1-14 days. Services may include individual respite supports such as in-home respite, peer supports, crisis apartments or family-based crisis homes.



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Metro Denver Region

WALK-IN CENTERS

12055 W. 2nd Place
Lakewood, CO 80228

791 Chambers Road
Aurora, CO 80011
7a.m.-11p.m.

1000 Alpine Avenue
(West Entrance)
Boulder, CO 80304

4353 E. Colfax Avenue
Denver, CO 80220

WALK-IN CENTERS and CRISIS STABILIZATION UNITS

2551 W 84th Avenue
Westminster, CO 80031

6509 S. Santa Fe Drive
Littleton, CO 80120

2206 Victor Street
Aurora, CO 80045

CRISIS STABILIZATION UNITS

Child/Adol- 1290 Potomac Street
Aurora, CO 80012

Child/Adol- 421 Zang Street
Lakewood, CO 80228



Southeast Region-SCCC

WALK-IN CENTERS AND CRISIS STABILIZATION UNITS

1302 Chinook Lane
Pueblo, CO 81001

115 S Parkside Drive
Colorado Springs, CO

Western Slope-WSC

WALK-IN CENTERS AND CRISIS STABILIZATION UNIT

515 28 3/4 Road
Grand Junction, CO 81501

Northeast Region-NBH

WALK-IN CENTERS

525 West Oak Street
Fort Collins, CO 80521

928 12th St
Greeley, CO 80631

CRISIS STABILIZATION UNITS

1217 Riverside Avenue
Fort Collins, CO 80524



Mobile Crisis Services:

- Linked to crisis stabilization units and respite/residential services
- Timely face-to-face response
- Intervention regardless of where the crisis occurs
- Work closely with police, crisis hotlines, schools and hospital emergency departments
- Operate 24 hours a day, 365 days a year by providing:
 - Community based interventions
 - Pre-screening assessments
 - Managing/controlling crisis diversionary services



CCC- 6 dispatch locations



SCCC- 12 dispatch locations



NBH- 3 dispatch locations



WSC- 20 dispatch locations



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Office of Behavioral Health – Substance Use Disorder Services

The Office of Behavioral Health serves as the federally designated Single State Authority (SSA) for substance use disorder prevention and treatment to oversee distribution of the federal block grants for substance use disorder treatment and substance use disorder prevention.



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Office of Behavioral Health Role Substance Use Disorder Services

Substance Use Disorder Oversight Description

- Title 27, Article 80, 81, and 82 Colorado Revised Statute primarily governs these programs.
- Contract for the provision of community prevention, intervention, treatment and recovery services.
- Ensure timely access to a continuum of services including outpatient, residential, and detoxification services
- Assure expedited access and specialized services for priority populations
- Contract for prevention services to strengthen local initiatives to reduce risk factors for substance use at the individual, family and community levels.



Office of Behavioral Health Role Substance Use Disorder Services

Categories of Substance Use Treatment Licenses based on American Society of Addiction Medicine levels of care:

- Gender-responsive women's treatment.
- Medication- assisted treatment for opiate dependence.
- Treatment of Minors.
- Offender education, treatment and adjunct services.
- Driving Under the Influence, Driving While Ability Impaired, and Driving Under the Influence offender education and treatment.
- Treatment of persons involuntarily committed to treatment.



Office of Behavioral Health Funding Substance Use Disorder Services

Substance Use Disorder Oversight Description

Program Cost: Total appropriated funding for Substance Use Disorder, Prevention and Treatment Services total funding for FY 2015-16 is \$46,139,364.

- \$15,436,902 is General Fund
- \$3,957,954 is from various cash funds
- \$3,092,634 is from reappropriated funds (including Medicaid)
- \$23,651,874 is federal funding (Substance Abuse Prevention and Treatment Block Grant and other federal discretionary grants)



Office of Behavioral Health Numbers Served Substance Use Disorder Services

Substance Use Disorder Oversight Description

Persons Served: FY 2014-15

- Treatment Consumers/Clients: Of 30,106 discharges from substance use disorder treatment (excluding Detoxification and Driving Under the Influence services), 27,128 were unique consumer/clients.
- Detoxification Consumers/Clients: There were 52,591 discharges from detoxification services (excluding Driving Under the Influence services), 27,591 of which were unique consumer/clients.
- DUI Consumers/Clients: There were 25,667 discharges from DUI services (excluding other treatment and detoxification services), of which 22,896 were unique consumer/clients.



Office of Behavioral Health – Mental Health Services

The Office of Behavioral Health serves as the federally designated State Mental Health Authority (SMHA) for mental disorder prevention, treatment, and recovery to oversee distribution of the federal block grants for mental disorder services.



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Office of Behavioral Health Role Mental Health Services

Mental Health Oversight Description

- Title 27, Article 65 through 69 Colorado Revised Statute primarily governs the operation of the mental health programs.
- Colorado's public mental health system is comprised of the community-based mental health programs overseen by the Office of Behavioral Health, and the State's Medicaid, capitated waiver program, which the Colorado Department of Health Care Policy and Financing (HCPF) administers. HCPF manages the Medicaid-eligible population and the Office manages the non-Medicaid population.



Office of Behavioral Health – Mental Health Services

Categories of Mental Health Services Designations and Licenses:

- Community Mental Health Center
- Community Mental Health Clinic (Psychiatric Specialty Clinic)
- Psychiatric Hospital
- Seventy-two-Hour Treatment and Evaluation
- Acute Treatment Unit
- Short-Term Treatment Facility
- Long-Term Treatment Facility
- Therapeutic Residential Child Care Facility
- Psychiatric Residential Treatment Facility



Office of Behavioral Health Funding Mental Health Services

Mental Health Oversight Description

Program Cost: Total appropriated funding for Mental Health Services for FY 2015-16 is \$49,352,996.

- \$38,592,553 is General Fund
- \$4,243,407 is from various cash funds
- \$283,467 is from reappropriated funds (including Medicaid)
- \$6,233,569 is federal funding (MH block grant and other federal discretionary grants)



Office of Behavioral Health Number served Mental Health Services

Mental Health Oversight Description

Persons Served: FY 2014 URS Data:

- Total served by the public mental health system
113,269
- Office funded non-Medicaid/indigent consumer/clients
27,130
- Medicaid funded consumer/clients
51,727
- Both Medicaid and non-Medicaid
34,412



Unmet Need Trends

Data indicates the unmet needs or challenges in Colorado to be:

1. Lack of inpatient hospital services
2. Inadequate housing resources (affordability and type)
3. Availability of specialized for the aging population
4. Difficulty retaining and recruiting qualified workforce
5. Availability of services for people with co-occurring service needs
6. Inadequate access to services
7. Lack of a continuum of prevention and recovery services
8. Inadequate availability of specialty services (i.e. LGBTQ, Trauma, and non-English speaking services)



Office of Behavioral Health Priorities for 2016-2017

1. Identify and fund critical services gaps remaining after implementation of the Affordable Care Act
2. Enhance the effectiveness of the inpatient mental health services provided at the Mental Health Institutes to include facilitation of a smooth transition back to community
3. Align regulatory efforts and contracting with the changing healthcare environment
4. Ensure availability of accurate and timely information about changing statewide behavioral health trends



Office of Behavioral Health Priorities for 2016-2017

Identify and fund critical services gaps remaining after implementation of ACA

Support recovery support services including housing assistance, employment supports and peer-delivered services

Fund continuity of care efforts not funded by public or private insurance

Promote services for populations excluded currently from Medicaid coverage such as individuals in jails and institutions

Ensure availability of emergency/safety net services such as detoxification and crisis response



Office of Behavioral Health Priorities for 2016-2017

Enhance the effectiveness of the services provided at the Mental Health Institutes

Enhance use of trauma-informed care approaches

Promote transition support services

Provide employment services

Use technology to improve quality of care

Expand use of alternatives to seclusion and restraint

Enhance community linkages



Office of Behavioral Health Priorities for 2016-2017

Align regulatory efforts

Ensure timely processing of licenses

Facilitate rule changes to support changing delivery system such as integrated healthcare and jail-based services

Examine and respond to changing workforce requirements such as peer credentialing



Office of Behavioral Health Priorities for 2016-2017

Ensure availability of accurate and timely information about behavioral health trends

Support state-specific studies of substance use trends

Compile state-specific data on behavioral health problems

Stay abreast of trends in behavioral health prevention and treatment effectiveness



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Office of Behavioral Health Priorities for 2016-2017

The CDHS, Office of Behavioral Health's Block Grant reflects a change focus as emphasized by the federal government from traditional treatment dollars to:

- Prevention and early intervention 5% in FY 2016 and 10% FY 2017.
- Recovery Support Services 5% in FY 2016 and 10% FY 2017.



Mental Health Institutes – Mission and Role

Recovery is a collaborative, active growth process by which patients move towards increased independence, hope, personal identity and a goal driven and meaningful life not dominated by symptoms of mental illness.

- The Institutes are the inpatient psychiatric hospital “safety net” .
- The Institutes serve indigent and Medicaid eligible individuals referred by the State’s community mental health centers.
- The Institute in Pueblo also provides forensic services to individuals referred by the State’s justice system.

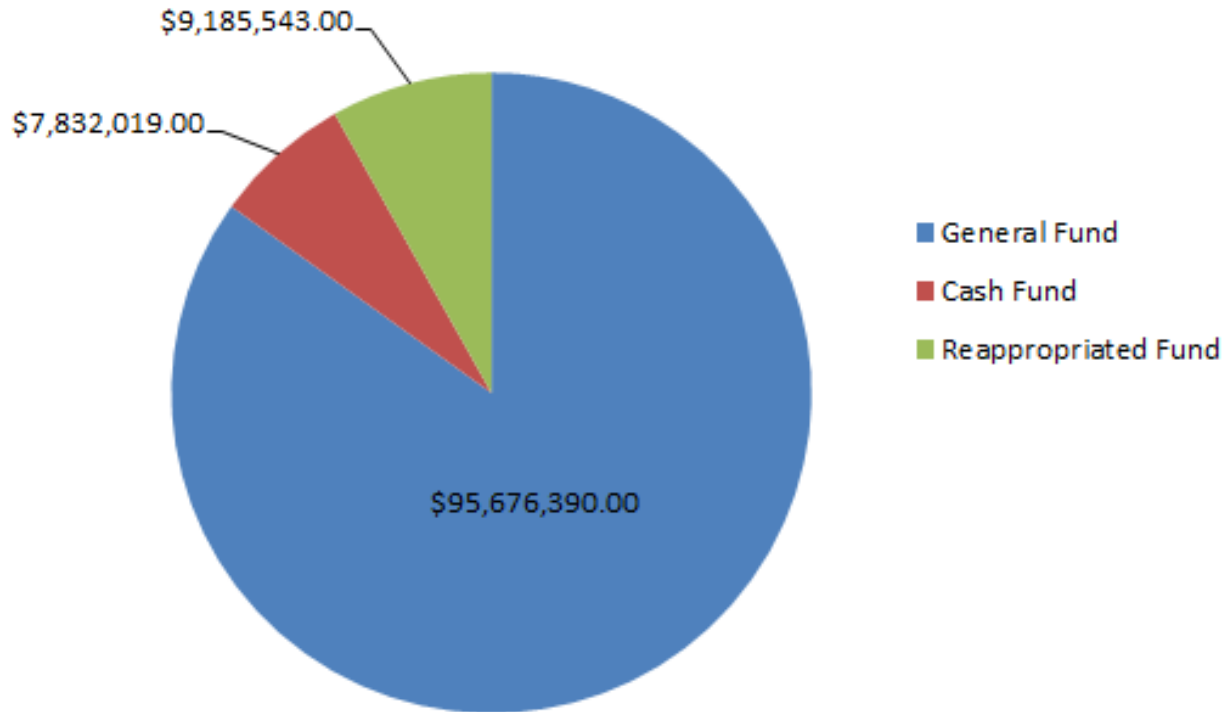


Mental Health Institute Appropriated Funds

Mental Health Institutes Appropriated Funds

Total: \$112,693,952

House Bill 16-1242



Colorado Mental Health Institute at Pueblo (CMHIP)

Overview

- Operates a total of 449 psychiatric beds
(104 beds in the Admissions Program, 116 in the Cognitive-Behavioral Program, 157 in the Psych-Social Program, and 72 in the Restoration Program), treating adolescent, adult and geriatric patients.
- Employs 959.0 FTE (Long Bill appropriated)
- Serves a patients with a range of commitment types:
 - 30% Incompetent to Proceed/Restoration (forensic)
 - 30% Not Guilty by Reason of Insanity (forensic)
 - 1% Department of Corrections Transfer (forensic)
 - 11% Court Ordered Evaluation (forensic)
 - 10% Voluntary Civil
 - 18% Involuntary Civil



Overview (cont.)

- Patients with civil commitments are referred by community mental health centers and the court system. Courts refer individuals who are determined to be a danger to themselves or others or gravely disabled due to mental illness.
- Patients with forensic commitments are referred from the State court system. State law requires CMHIP to provide services for individuals:
 - Ordered to CMHIP for an evaluation of competency to stand trial
 - Ordered to CMHIP for restoration to competency
 - Committed to CMHIP as not guilty by reason of insanity

CMHIP operates at an Average Daily Census of 394.3 (87%) patients.



Colorado Mental Health Institute at Fort Logan (CMHIFL)

Overview

- Operates 94 civil Adult inpatient psychiatric beds.
- Accepts individuals referred from the community mental health centers under C.R.S. 27-65.
- Employs 216.4 FTE (Long Bill appropriated)

CMHIFL operates at an Average Daily Census of 91.3 (97%) patients.



Capital Project Initiatives



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Office of Behavioral Health – Strategic Initiatives

Mental Health Institutes' - Electronic Health Record (EHR) System

Request: \$14,712,755 Total Funds (2-years)/General Fund

- Comprehensive project to replace the current legacy health information management (clinical, laboratory, and dietary), pharmacy, and billing systems.
- The fully-integrated EHR will meet Federal regulatory and reimbursement standards and will allow the State to share vital patient information with community providers (mental and physical health).
- System will automatically tie patient treatments to patient outcomes and will directly assist clinical efforts to address patient needs.
- Project includes the initial software purchase, customization, installation and training, and required network/system infrastructure, hardware, and licensing.



Office of Behavioral Health – Strategic Initiatives

Mental Health Institute - Suicide Risk Mitigation Projects

Request: \$10,809,988 Total Funds (3-years)/General Fund

- Three-year initiative (FY 2014-15 thru FY 2016-17) to complete the third-phase project (first phase began in late 1990's) to mitigate patient suicide and/or self-harm by removing and replacing building components at both mental health institutes (Ft. Logan and Pueblo).
- Patient units at the Institutes were built on average 50-years ago, some were not intended for use as locked inpatient units. These systematic modifications will improve the Department's ability to provide safe environments to meet patient population needs.
- Project includes the design, engineering, and construction for modifications to six patient treatment units with high-risk rates for suicide mitigation need.



Office of Behavioral Health – Strategic Initiatives

Program and Master Planning - Mental Health Institute Modernization

Request: \$815,000 Total Funds/General Fund

- Both a Facility Program Plan (FPP) and a Site Master Plan (SMP) are being performed by RNL, the contractor selected through a competitive bid process, for the current mental health institute campuses at Fort Logan and Pueblo.
- The FPP and SMP are part of a larger strategic analysis for the modernization and replacement of State-operated behavioral health facilities.
- Will address: enhancement of facility compliance, improvement of patient outcomes, and addressing deficiencies in patient, staff, and public safety infrastructure to meet the State's responsibility for quality patient care.



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Other OBH Initiatives to Improve Capacity



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Office of Behavioral Health – Improved Community Capacity

- Address the State's current behavioral health system's capacity challenges to deliver a continuum of community-based treatment services most appropriate to consumer needs in the least restrictive and most independent community setting
- Provide community living for individuals currently placed in inappropriate settings, including psychiatric hospitals, nursing homes, emergency rooms, and county jails

Update

- Assertive Community Treatment services have been expanded
- Housing Vouchers are distributed and monitored by DOLA
- Transition specialist/care management and wraparound services are in place at both mental health institutes
- Money Follows the Individual Model of service delivery



Office of Behavioral Health – Jail-Based Competency Evaluation & Restoration

- On November 4, 2013 the state opened a 22-bed jail-based restoration program at the Arapahoe County Detention Facility
- Reduce the number of restoration patients admitted to Colorado Mental Health Institute at Pueblo (CMHIP) to enable the Department to maintain compliance with the CLA v. Bicha Settlement Agreement
- Inmates requiring in-patient level of care are still be served by CMHIP
- Save county sheriff departments' valuable time and resources by not requiring them to transport jail inmates from the Denver area to CMHIP
- Creates a therapeutic, intensive treatment program within a correctional setting

Update

- Based on continued demand, the Department requested and received funding to expand the program by an additional 30 beds. The Office of Behavioral Health has contracted with Correct Care, LLC to provide competency evaluation and restoration services within the Arapahoe County Detention Facility.



Office of Behavioral Health – Trauma-Informed Care

- Improve patient outcomes through the implementation of a researched best practices trauma informed care (TIC) approach to behavioral health services
- Includes assessing clients for trauma and adverse experiences, understanding the impact of trauma on mental health and substance abuse disorders, incorporating the treatment of trauma at all levels of service delivery and utilizing peer support to improve patient outcomes within the mental health institutes as well as the community behavioral health providers
- Mental Health Institutes at Ft. Logan and Pueblo have implemented a trauma informed system of care that includes relaxation rooms, peer facilitators, new TIC Social Workers and Psychologist, and new TIC questions on the admissions questionnaire.

