

CBHC BOARD POSITION STATEMENT 9.0

Ensuring a Behavioral Health Safety Net

Position Statement

Colorado's most vulnerable populations must have access to a robust, community based, high quality system of care regardless of insurance coverage, acuity status, or ability to pay. Community Mental Health Centers' (CMHCs) role in the behavioral health safety net is essential and must be supported by state policy.

Background

In 1963, following a national desire to promote community-based care and avoid institutionalization, the United States passed the Community Mental Health Act to create a federal structure to develop, align, and open community mental health centers nationwide. Colorado's providers came together to enhance existing services and access to care. The value of community-based behavioral health care that responds to local needs has been a guiding light throughout CBHC's history. As such, CBHC's membership of Community Mental Health Centers (CMHCs) are united in a strong commitment to provide a statewide system of core services for people with limited or no access to care.

What is a safety net?

The Institute of Medicine defines "core safety-net providers" as providers who, by mandate or mission, offer access to care regardless of a patient's ability to pay — and whose patient population includes a substantial share of uninsured, Medicaid, and other vulnerable patients.

In 2020, the Behavioral Health Task Force (BHTF) was commissioned by the Governor of Colorado and included a subcommittee dedicated to discussing the Behavioral Health Safety Net system. Their work defined the safety net as: "A safe, community-based behavioral health system that provides personcentered and patient-driven access to a continuum of behavioral health services and supports to all Coloradans regardless of severity of need or ability to pay". Similarly, the 2020 Behavioral Health Needs Assessment conducted by HMA on behalf of the Office of Behavioral Health discusses the safety net and identifies gaps in the continuum of care. Both the BHTF Blueprint and the Needs Assessment offer recommendations related to better defining and building out the continuum of essential services.

What is the benefit of a safety net system such as the CMHCs?

While options for health insurance coverage have increased, the need for safety net funding has not been eliminated. The number of uninsured individuals fell dramatically in Colorado and across the United States

with the advent of the Patient Protection and Affordable Care Act and particularly Medicaid expansion. However, in 2020, as a result of the COVID-19 Pandemic, Colorado experienced a dramatic increase in the number of unemployed community members, and consequently an increase in the number of uninsured. Others struggle to utilize the insurance they have due to the cumulative impact of high premiums, coinsurance, and co-pays. In addition, and despite parity laws, many commercial insurance plans have limited or inadequate behavioral health benefits. While this must be remedied, safety net health systems often play critical roles in providing essential services to these populations. Without access to this care, health care needs can go unaddressed, escalate, and lead to higher costs downstream for individuals and systems.

The behavioral health safety net supports individuals who may otherwise not receive care. CBHC members have provided high-quality care to low-income, uninsured, and underinsured populations for many decades. Our efforts are rooted in our mission and the knowledge that behavioral health is essential to health, that recovery is not only possible but likely, and that community-based care is essential to mitigating rising health care costs. As unmet needs increase, individuals' health declines and demand on emergency departments, hospitals, the criminal justice system, and other more costly systems grow. A strong safety net is critical to ensuring better health outcomes and prudent stewardship of taxpayer dollars.

CMHCs offer a statewide system of comprehensive care and are also the primary providers of services to safety net populations and those with high acuity conditions such as persons with serious mental illness. CMHCs also provide a community benefit such as disaster preparedness and emergency services (see related BPP). Core to the CMHC mission is to be available to the community in times of need. Similarly, Managed Service Organizations (MSOs) provide a statewide network of the full continuum of SUD prevention, treatment and recovery services through collaborations with local providers.

CBHC members work together to leverage resources and create a cohesive statewide system of care. Policy initiatives designed to help fill gaps in the safety net must build on this existing infrastructure and augment the vital work of community-based providers.

Policy Priorities

9.1 Solidify the role of Colorado's CMHCs within the behavioral health safety net system in Colorado.

- Colorado has long understood the benefit of a viable safety net to ensure access to care for highly vulnerable, unsupported individuals. CMHCs, and the comprehensive array of services they provide, are a critical component of that safety net. These services ensure community-based resources are available and must be sustained and leveraged towards protecting all Coloradans. CBHC supports policies that clearly define the role of CMHCs within a comprehensive safety net system.
 - Ensuring CMHCs vital role in providing <u>direct care</u> to indigent, Medicaid and underinsured populations is sustained
 - o Solidifying CMHCs standing as <u>essential community providers</u> in state Medicaid statute
 - o Enhancing CMHCs role in <u>coordinating care</u> with other essential community providers
 - Requiring state agencies responsible for serving vulnerable populations to work collaboratively with CMHCs to strengthen the safety net and continuum of care

9.2 Protection of Colorado's most vulnerable populations and support for the behavioral health safety net system

Throughout CBHC's history, we have advocated for the continuation and expansion of resources that are accessible and responsive to our communities' needs. Prioritizing the needs and experiences of the populations that we serve guides us throughout policy and advocacy decisions.

- CBHC supports policies that increase the availability and flexibility of resources through the State General Fund to provide comprehensive care for individuals who are uninsured or underinsured and to fill gaps in the continuum of care.
 - o Identifying gaps in the continuum of care and investing flexible resources to fill those gaps through community-driven, patient-centered solutions
 - Ensuring transparent policies and community engagement to promote accountability in state spending, direction, and administration
 - Ensuring that public funding that supports safety net providers allows for a reasonable reinvestment margin and increased capacity to meet emerging community needs
 - Utilizing payment methodologies tied to value rather than volume that incentivize high quality, appropriate levels of care with strong outcomes
- CBHC supports policies and legislation that minimize the regulatory and administrative burden associated with providing safety net behavioral healthcare.
 - Comprehensive strategies to blend funding streams and align eligibility guidelines, data and reporting requirements, and other administrative requirements
 - Ensuring administrative burden is reasonable and compensated within safety net provider activities
 - Maximizing investment in direct care and services rather than administrative or regulatory structures
 - Ensuring parity in administrative requirements and burden between Colorado's physical and behavioral healthcare safety net systems

9.3 Funding for behavioral health services not covered by public or private payers

CBHC believes it is critical that adequate funding be available for a full continuum of services that may extend beyond the benefit packages of public insurance like Medicaid or commercial insurance.

- ❖ CBHC supports policies that fill insurance gaps and keep individuals with high mental health and substance use needs in the community and out of more costly levels of care.
 - Utilizing a systems approach to understanding and examining the strengths and gaps in communities' healthcare delivery infrastructure
 - Prioritizing local community-based services over treatment in more costly, restrictive settings
 - Enhancing transitions of care by enhancing state investments in health information exchange and complex care management tools at the local provider level and leveraging existing tools or initiatives

- ❖ CBHC supports policies and legislation that help community-based providers meet patient needs that fall outside the scope of traditional public or private health insurance.
 - Leveraging and protecting behavioral health funding in the community as directed by community engagement and needs assessment
 - Advancing funding and models of care that address a full continuum of needs including the social determinants of health
 - Enhancing the role of community safety net providers in coordinating and managing the care of their patients.

9.4 Locally Driven Resources

Funding for behavioral health should be targeted to existing community-based providers and systems of care to leverage local assets and expertise and build on previous public investments. Investments in Colorado's existing systems should always be preferable over external or out of state entities.

- CBHC supports policies, legislation, and funding reforms that reflect the value that healthcare is local. Competitive procurement of community based behavioral health services should be avoided when appropriate.
 - When competitive procurement for services is necessary, always prioritize and value existing systems of care and community partnerships
 - When competitive procurement for services is necessary, always prioritize and value locally based non-profit organizations over out-of-state entities or for-profit entities
 - o Supporting telehealth modalities as part of a locally driven continuum of care

9.5 Centers of Excellence

- CBHC supports development of a Centers of Excellence (COE) model that recognizes and incentivizes high quality care through value-based payment methodologies.
 - Developing Colorado-specific COE designation criteria, modeled in part on national standards (e.g. Certified Community Behavioral Health Clinics)
 - Defining and supporting a standardized robust array of services beyond traditional treatment including recovery-oriented services and supports addressing the social determinants of health
 - Maximizing the use of less costly, high impact services such as those defined in Colorado's
 1915 (B) (3) waiver, of which CMHCs are the primary provider
 - Defining uniform data collection and reporting requirements and rewarding value-based care
 - o Ensuring collaborative agreements are in place between COEs and other local providers

Effective Period

The Colorado Behavioral Healthcare Council (CBHC) Board of Directors approved this policy on 02/16/2018. It is reviewed as required by the Public Policy Advisory Committee.

Policy Updated

Updates to this policy position were approved by the CBHC Board of Directors on 03/18/2021.

Expiration: 03/18/2023