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LLS NO. 20-1199.02 Shelby Ross x4510

COMMITTEE BILL

Joint Budget Committee

BILL TOPIC: "Child & Youth Behavioral Health Sys Prog"

A BILL FOR AN ACT

101 **CONCERNING DEPARTMENT IMPLEMENTATION OF HIGH-FIDELITY**
102 **WRAPAROUND SERVICES FOR ELIGIBLE AT-RISK CHILDREN.**

Bill Summary

(Note: This summary applies to this bill as introduced and does not reflect any amendments that may be subsequently adopted. If this bill passes third reading in the house of introduction, a bill summary that applies to the reengrossed version of this bill will be available at <http://leg.colorado.gov/>.)

The bill summary for this measure has been intentionally omitted and will appear on future redrafts of this measure.

1 *Be it enacted by the General Assembly of the State of Colorado:*

*Capital letters or bold & italic numbers indicate new material to be added to existing statute.
Dashes through the words indicate deletions from existing statute.*

1 **SECTION 1.** In Colorado Revised Statutes, **amend** section 25-
2 55-101 as follows:

3 **25-55-101. Training on standardized screening tools and**
4 **standardized assessment tool.** Following the selection of the
5 standardized screening tools, as described in section 27-62-103, AND
6 SUBJECT TO AVAILABLE APPROPRIATIONS, the department of public health
7 and environment shall ensure adequate statewide training on the
8 standardized screening tools for primary care providers and other
9 interested health care professionals who care for children, ensuring that
10 training is offered at no cost to the professional. Training services may be
11 contracted out to a third party.

12 **SECTION 2.** In Colorado Revised Statutes, 25.5-5-803, **amend**
13 (2) and (4) as follows:

14 **25.5-5-803. High-fidelity wraparound services for children**
15 **and youth - federal approval - reporting.** (1) No later than July 1,
16 2020, the state department shall seek federal authorization from the
17 federal centers for medicare and medicaid services to provide wraparound
18 services for eligible children and youth who are at risk of out-of-home
19 placement or in an out-of-home placement. Prior to seeking federal
20 authorization, the state department shall seek input from relevant
21 stakeholders including counties, managed care entities participating in the
22 statewide managed care system, families of children and youth with
23 behavioral health disorders, communities that have previously
24 implemented wraparound services, mental health professionals, and other
25 relevant departments. The state department shall consider tiered care
26 coordination as an approach when developing the wraparound model.

27 <{***HCPF: I'm assuming the CMS waiver has already been submitted***

1 *and likely approved? If so, that also means the stakeholder process*
2 *required in this section has been done. Therefore, I don't think this*
3 *sections needs to be amended.}>*

4 (2) Upon federal authorization, AND SUBJECT TO AVAILABLE
5 APPROPRIATIONS, the state department shall require managed care entities
6 to implement wraparound services, which may be contracted out to a third
7 party. SUBJECT TO AVAILABLE APPROPRIATIONS, the state department shall
8 contract with the department of human services and office of behavioral
9 health to ensure care coordinators and those responsible for implementing
10 wraparound services have adequate training and resources to support
11 children and youth who may have co-occurring diagnoses, including
12 behavioral health disorders and physical or intellectual or developmental
13 disabilities. Attention must also be given to the geographic diversity of
14 the state in designing this program in rural communities.

15 (3) Upon implementation of the wraparound services, the state
16 department and the department of human services shall monitor and
17 report the annual cost savings associated with eligible children and youth
18 receiving wraparound services to the public through the annual hearing,
19 pursuant to the "State Measurement for Accountable, Responsive, and
20 Transparent (SMART) Government Act", part 2 of article 7 of title 2. The
21 department of health care policy and financing shall require managed care
22 entities to report data on the utilization and effectiveness of wraparound
23 services. <{*Since this subsection (3) is prefaced with "upon*
24 *implementation of the wraparound services" and the implementation*
25 *of wraparound services is "subject to available appropriations" in*
26 *subsection (2), I don't think we need to amend this section.}>*

27 (4) SUBJECT TO AVAILABLE APPROPRIATIONS, the state department

1 shall work collaboratively with the department of human services,
2 counties, and other departments, as appropriate, to develop and
3 implement wraparound services for children and youth at risk of
4 out-of-home placement or in an out-of-home placement. The department
5 of human services shall oversee that the wraparound services are
6 delivered with fidelity to the model. As part of routine collaboration, AND
7 SUBJECT TO AVAILABLE APPROPRIATIONS, the state department shall
8 develop a model of sustainable funding for wraparound services in
9 consultation with the department of human services. Wraparound services
10 provided to eligible children and youth pursuant to this section must be
11 covered under the "Colorado Medical Assistance Act", articles 4, 5, and
12 6 of this title 25.5, SUBJECT TO AVAILABLE APPROPRIATIONS. The state
13 department may use targeting criteria to ramp up wraparound services as
14 service capacity increases, or temporarily, as necessary, to meet certain
15 federal financial participation requirements.

16 **SECTION 3.** In Colorado Revised Statutes, **amend** 25.5-5-804
17 as follows:

18 **25.5-5-804. Integrated funding pilot.** ~~No later than July 1, 2020,~~
19 SUBJECT TO AVAILABLE APPROPRIATIONS, the state department, in
20 conjunction with the department of human services, counties, and other
21 relevant departments, shall design and recommend a child and youth
22 behavioral health delivery system pilot program that addresses the
23 challenges of fragmentation and duplication of behavioral health services.
24 The pilot program shall integrate funding for behavioral health
25 intervention and treatment services across the state to serve children and
26 youth with behavioral health disorders. To implement the provisions of
27 this section, the state department shall collaborate with the department of

1 human services and other relevant stakeholders, including counties,
2 managed care entities, and families. <{**HCPF: What's the status of this?**
3 **Have HCPF and CDHS already began designing the pilot program?**}>

4 **SECTION 4.** In Colorado Revised Statutes, 27-62-102, **amend**
5 (1) as follows:

6 **27-62-102. High-fidelity wraparound services for children and**
7 **youth - interagency coordination - reporting.** (1) Pursuant to section
8 25.5-5-803 (4), the department of human services shall work
9 collaboratively with the department of health care policy and financing,
10 counties, and other relevant departments, as appropriate, to develop and
11 oversee wraparound services for children and youth at risk of out-of-home
12 placement or in an out-of-home placement. As part of routine
13 collaboration, the department of human services shall assist the
14 department of health care policy and financing in developing a model of
15 sustainable funding for wraparound services. The department of human
16 services and the department of health care policy and financing shall
17 monitor and report the annual cost savings associated with eligible
18 children and youth receiving wraparound services to the public through
19 the annual hearing, pursuant to the "State Measurement for Accountable,
20 Responsive, and Transparent (SMART) Government Act", part 2 of
21 article 7 of title 2. <{**Since this subsection (1) says "pursuant to section**
22 **25.5-5-803 (4)" and we're amending that section to say "subject to**
23 **available appropriations", I don't think we need to amend this**
24 **section.**}>

25 (2) SUBJECT TO AVAILABLE APPROPRIATIONS, two full-time staff
26 persons shall be appointed by the executive director of the department of
27 human services to support and facilitate interagency coordination

1 pursuant to this article 62, part 8 of article 5 of title 25.5, and any other
2 related interagency behavioral health efforts as determined by the
3 executive director of the department of human services.

4 **SECTION 5.** In Colorado Revised Statutes, 27-62-103, **amend**
5 (1), (2), and (3) as follows:

6 **27-62-103. Standardized assessment tool - standardized**
7 **screening tools - interagency coordination - single referral and entry**
8 **point. (1) Standardized assessment tool.** ~~No later than July 1, 2020,~~
9 SUBJECT TO AVAILABLE APPROPRIATIONS, the state department shall select
10 a single standardized assessment tool to facilitate identification of
11 behavioral health issues and other related needs in children and youth and
12 to develop a plan to implement the tool for programmatic utilization. The
13 state department shall consult with the department of health care policy
14 and financing, managed care entities, counties, stakeholders, and other
15 relevant departments, as appropriate, prior to selecting the tool.

16 **(2) Standardized screening tools.** ~~No later than July 1, 2020,~~
17 SUBJECT TO AVAILABLE APPROPRIATIONS, the state department shall select
18 developmentally appropriate and culturally competent statewide
19 behavioral health standardized screening tools for primary care providers
20 serving children, youth, and caregivers in the perinatal period, including
21 postpartum women. The state department and the department of human
22 services may make the tools available electronically for health care
23 professionals and the public. Prior to the adoption of the standardized
24 assessment tool described in subsection (1) of this section, and the
25 standardized screening tools described in this subsection (2), the state
26 department shall lead a public consultation process involving relevant
27 stakeholders, including health care professionals and managed care

1 entities, with input from the department of health care policy and
2 financing, the department of public health and environment, and the
3 division of insurance.

4 (3) **Single statewide referral and entry point.** ~~No later than July~~
5 ~~1, 2020,~~ SUBJECT TO AVAILABLE APPROPRIATIONS, the state department,
6 in conjunction with the department of health care policy and financing,
7 the department of public health and environment, and other relevant
8 departments and counties, as necessary, shall develop a plan for
9 establishing a single statewide referral and entry point for children and
10 youth who have a positive behavioral health screening or whose needs are
11 identified through a standardized assessment. In developing the single
12 statewide referral and entry point plan, the state department shall seek
13 input from relevant stakeholders, including counties, managed care
14 entities participating in the statewide managed care system, families of
15 children and youth with behavioral health disorders, communities that
16 have previously implemented wraparound services, mental health
17 professionals, and other relevant departments. <{**CDHS: What's the**
18 **status of these tools? I'm assuming the screening tool and assessment**
19 **tool have already been selected or developed? Have you already**
20 **developed a plan for the single statewide referral and entry point? If so,**
21 **I'm not sure this section needs to be amended.**>

22 **SECTION 6. Safety clause.** The general assembly hereby finds,
23 determines, and declares that this act is necessary for the immediate
24 preservation of the public peace, health, or safety.