



COLORADO

Governor Jared Polis

April 8, 2019

Michelle Barnes
Executive Director
Colorado Department of Human Services
1575 Sherman Street
Denver, CO 80203

Re: Governor's Behavioral Health Task Force

Dear Executive Director Barnes:

Thank you for agreeing to spearhead Colorado's Behavioral Health Task Force. This task force will evaluate Colorado's behavioral health system and author a statewide, strategic plan (Blueprint) to reform our system with the goal of enabling every Coloradan experiencing behavioral health needs to receive timely, high-quality services in their communities in a cost efficient manner. We can and must do better to transform our system for Coloradans living with a behavioral health condition so that they have access to affordable, high-quality, and patient-centered care.

Colorado dedicates over \$1 billion annually to its behavioral health system. Yet many national rankings place Colorado in the bottom quarter of states when evaluating the quality of behavioral health care Colorado provides to its residents. Colorado ranked 43rd out of 50 states on Mental Health of America's 2018 rankings for the prevalence of mental illness and access to care. Colorado also has among the highest suicide rates in the country.

We should streamline access to quality services that enable Coloradans experiencing behavioral health needs to obtain an education, enjoy their childhood, find and keep housing, acquire job skills, find and hold gainful employment, raise a family, stay out of the criminal justice system, and live productive, happy lives. When we as a state fall short of this obligation and spend money on items that don't achieve positive results, we all suffer the consequences.

Without a robust, efficient, cohesive, and innovative behavioral health system, some individuals are left with few options for obtaining the help they need. Too often, individuals living with behavioral health challenges experience homelessness and trauma, and all too often they find themselves involved in the costly criminal justice system or expensive emergency care system receiving services much too late at taxpayer expense. Further, studies have shown that there is a strong relationship between greater access to care and reduced rates of suicide. Providing upstream care and services through community behavioral health promotes the health, well-being, and civil rights of our citizens and also ensures we are using state resources effectively.

That is why today I am directing the Department of Human Services to create a task force that will evaluate and set the roadmap to use resources more effectively and improve the current behavioral health system in the state. This new task force will be responsible for developing a statewide, strategic blueprint to reform our system with the goal of improving the efficacy and efficiency of our behavioral health system.. The task force should build on the work of local and state agencies,



service providers, and stakeholders from across the spectrum, and embrace a holistic approach to the challenges our state faces while exploring creative and innovative solutions.

Colorado's focus must be to provide the appropriate level of service to Coloradans struggling with behavioral health issues in the most efficient, compassionate, and equitable manner. To accomplish this goal, the task force will:

1. Work with the legislature and relevant agencies to evaluate current funding streams and to recommend financing and administrative changes to ensure the behavioral health system is transformed into an integrated, accessible, accountable, efficient and high-quality behavioral health care system;
2. Identify systemic gaps and enhancements in access to behavioral health services, especially for vulnerable or underserved populations; and
3. Evaluate, recommend, and adopt proven strategies to drive efficiency and desired results.

The task force will develop Colorado's "Behavioral Health Blueprint" by June 2020, which will outline detailed steps to ensure the goals established by the task force are clearly communicated to relevant stakeholders, service providers, and individuals. Additionally, the Blueprint will include an implementation timeline for the desired system changes and a plan for improving timelines for competency restoration by January 1, 2020. The plans must anticipate implementation of the recommendations starting in July 2020.

Additionally, the task force will make statutory, policy, funding, governance and administrative recommendations focused upon:

- Developing a comprehensive list of all government-funded services and resources available for adults, children, and youth living with a behavioral health disorder in Colorado including identifying any duplicative or redundant services;
- Developing recommendations to improve behavioral health access, efficiency and outcomes, and review parity with physical health care; and
- Maximizing the efficiency of funding streams and recommending whether funding and programs ought to be consolidated under fewer state, regional or local agencies.

The task force will have the power to create subcommittees as it sees fit. However, the following subcommittees should be immediately created to address the following:

- Behavioral health safety net system. This subcommittee shall offer a roadmap to ensure that every Coloradan, regardless of acuity level, ability to pay, or co-occurring disabilities, can obtain appropriate behavioral health services in their community.
- Children's behavioral health. This subcommittee should develop a plan to address how we deliver and manage children's behavioral health and improve outcomes. The following should be reviewed:
 - Options to increase and enhance efficient and effective behavioral health services to children and youth;
 - Efforts between state agencies and community partners to increase public understanding and awareness of child and youth behavioral health needs;
 - Shared children and youth behavioral health policies to remove administrative barriers to facilitate collaboration between communities, Southern Ute Indian Tribe, Ute Mountain Ute Tribe and American Indian/Alaska Native-serving organizations, state departments, and political subdivisions of the state;



- Children and youth behavioral health recommendations, where appropriate, to enhance efficiency and avoid duplication of service delivery, referral, and entry point, and funding mechanisms for behavioral health services for children and youth;
 - The need for comprehensive wrap-around services and case management and coordination for children and youth;
 - The need for comprehensive screening and early intervention and prevention services for children, youth and families;
 - Strategies to promote behavioral health for youth and adolescents in school and community settings, including strategies to protect against mental health challenges, suicide, and substance use;
 - Changes in how children and youth behavioral health is governed ensuring services work seamlessly when children and their families are involved in multiple systems;
 - Strategies to address the needs of children and adolescents who become “stuck” between systems, including exploring community-based services and other strategies; and
 - The need for comprehensive support for children and youth who are transitioning out of foster care or out of the custody of the Division of Youth Services.
- Long-term competency plan. Consistent with a recent consent decree entered into by the Department of Human Services, this subcommittee should address the following:
 - The development of a comprehensive picture of the system of services and resources available for individuals in the criminal justice system who have been found incompetent to proceed;
 - The framework of a statewide strategic blueprint for competency and the first set of recommendations that aligns with the CDHS’s consent decree, to include:
 - A priority emphasis on prevention and diversion efforts;
 - Recommendations on restoration services specifically designed for persons with an intellectual or developmental disabilities;
 - Recommendations for short-term and long-term solutions, with an emphasis on expanding community-based solutions first, when appropriate;
 - Projections of competency evaluation and restoration needs over the next 20 years, and an understanding of the trends that impact need;
 - Legislative recommendations (if needed) to implement the plan, along with removing barriers or providing support to aspects of the plan;
 - Costs associated with implementation; and
 - Possible funding mechanisms, including leveraging non-state dollars.

At the direction of the Department of Human Services, the executive committee will define the task force agenda, establish rules, and create subcommittees as necessary to achieve the task force mandate.

The following organizations comprise the executive committee:

- Colorado Department of Human Services (“CDHS”) (Task Force Chair)

Executive Committee Members:

- Colorado Department of Public Health and Environment;
- Colorado Department of Health Care Policy and Financing;
- A representative of County Human Services;
- Colorado Division of Insurance; and
- The Office of Lt. Governor Dianne Primavera.



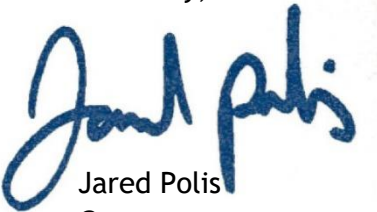
In addition, the following state agencies are required to participate in this task force to provide information and technical support:

- Colorado Office of Behavioral Health, CDHS;
- Colorado Department of Corrections;
- Colorado Department of Public Safety;
- Colorado Department of Education;
- Colorado Department of Agriculture; and
- Colorado Department of Military and Veterans Affairs.

Finally, I direct the task force to work with individuals who represent diverse and balanced perspectives with respect to these issues such as consumers and families dealing with behavioral health issues, key executive agencies representing state and local government, criminal justice experts, advocacy groups, behavioral health experts, and consumers. The task force should be no larger than 25 members in total.

Thank you again for your willingness to tackle such a large and complex issue. I look forward to supporting your efforts and helping to implement proposed reforms.

Sincerely,

A handwritten signature in blue ink that reads "Jared Polis". The signature is fluid and cursive, with the first name "Jared" and last name "Polis" clearly distinguishable.

Jared Polis
Governor

