# DRAFT 2025 ANNUAL SYSTEM INFRASTRUCTURE WORKGROUP WORKPLAN:

# Workgroup Co Chairs: Alice Forrester & Jason Lang

**Suggested Purpose Statement:** Build the capacity and coordination of the children's behavioral health infrastructure to increase the <u>effectiveness</u> of and <u>access</u> to services that meet family needs. Effectiveness refers to data, governance, oversight and accountability. Access refers to availability of a diverse set of services and trained service providers, the coordination of services, systematic knowledge, channels of communication, and funding for sustainability.

**Priorities:** Priorities identified are systems of care models and public children's behavioral health data (access, quality & outcomes). The workgroup will monitor the TCB's legislation regarding Medicaid Rates, CCBHC grant planning & Feasibility and Fiscal Analysis of billing codes for training clinical staff on evidence-based models.

# Short Term Workgroup Goals:

- Identify meeting schedule, frequency of meetings, and meeting presentations with the workgroup
- Identify and finalize workgroup priorities with feedback from the workgroup
- Review of 2025 TCB legislation with the workgroup, refine how this workgroup will monitor and track the passed legislation
  - o For TCB recommendations that do not pass in legislation, the workgroup will identify how they would like to proceed on those specific recommendations.

# Medium Term Workgroup Goals (2025):

- Consistent monitoring of TCB 2025 passed legislation, updates on status of the implementation progress will be given at each workgroup meeting.
  - o Medicaid rate legislation (multiple factors)
    - \* Children's behavioral health reimbursement based on access needs
    - \* DSS Study that focuses specifically on children's behavioral health
  - o Certified Community Behavioral Health Clinics (CCBHC) planning grant that would include reimbursement for acuity-based care coordination services, value-based payment model that provides incentives for providers based on care outcomes and help navigate behavioral health resources and requirements.
  - Feasibility determination and fiscal analysis to estimate adding a billing code to help off-set initial costs for on-boarding and training clinical staff in evidence-based models, before they can bill for services. This would include potential Medicaid reimbursement for training and ramp-up, and feasibility assessment and fiscal analysis estimate should be submitted no later than October 1<sup>st</sup>, 2025.

- The workgroup will collaborate with the Children's Behavioral Health Plan Implementation Advisory Board (CBHPIAB) to review and find alignment on their work on Children's Feasibility and Fiscal Analysis
- Conduct a thorough review of children's behavioral health data (access, quality & outcomes)
  - o Create a roadmap of the data to evaluate how data is being collected, where are gaps
- Evaluate systems of care efforts in the State and nationally through presentations, workgroup expertise, and resources provided by the membership.
  - o Create a crosswalk of models and services throughout the state, to identify gaps in services and barriers to care
  - o Utilize other state examples of systems of care models (Ohio, Oregon) and compare models to Connecticut crosswalk
    - Review how systems of care models in Connecticut can be advanced and altered to model the work of other states
- Review of UConn Innovation's Governance and Data report
  - o Identify how the results can be utilized to build recommendations, and priorities.
- Develop a set of 2026 draft recommendations with the workgroup and present recommendations to the TCB committee in fall of 2025
  - o TCB leadership will review drafts and provide feedback
  - o Draft Workgroup recommendations will be presented at the October TCB Meeting

The development of 2026 recommendations is dependent on priorities, and progress within the group. If the group does come up with a set of recommendations, the decision to proceed with 2026 legislative recommendations package depends on committee and leadership feedback

# Long-Term Workgroup Goals (2025-2028):

\*Other priority areas and strategies identified in the strategic plan will be added to the workplan annually

• Utilize information from the workgroup to plan for 2026, 2027, and in subsequent years.

Meeting Schedule: System Infrastructure Workgroup meetings are set to Start April 15<sup>th</sup>, 2025, and recur on the third Tuesday of the month from 3-4:30 PM. All meetings will be virtual. Meeting agendas and the zoom link will be sent out prior to the meeting each month.

### DRAFT 2025 ANNUAL SERVICES WORKGROUP WORKPLAN:

#### Workgroup Co-Chairs: Edith Boyle, LCSW & Yann Poncin, MD

Suggested Services Purpose Statement: Ensure statewide and local capacity and awareness to provide a comprehensive range of affordable, integrated, coordinated, and family-centered services to children from birth to age 22, individualized and within the context of their families, caregivers, and communities.

#### \*In first workgroup meeting the membership will discuss adding "...to expectant parents and children from birth to age 22..."

**Priorities:** The identified priorities include peer-to-peer support and 211 services. The workgroup will monitor the TCB recommendations related to the crisis continuum, UCC's and IICAPs. Additionally, the group will prioritize and track legislation regarding access to care for children and young adults covered by private/commercial insurance.

#### Short-Term Workgroup Goals:

- Identify meeting schedule, frequency of meetings, and meeting presentations with the workgroup
- Identify and finalize workgroup priorities with feedback from the workgroup
- Review of 2025 TCB legislation with the workgroup, refine how this workgroup will monitor and track the passed legislation
  - o For TCB recommendations that do not pass in legislation, the workgroup will identify how they would like to proceed on those specific recommendations.

#### Medium-Term Workgroup Goals (2025):

- Consistent monitoring of TCB 2025 passed legislation and updates on the status of the implementation progress will be given at each services workgroup meeting.
- Collaborate with identified responsible state agencies and private organizations on progress of implementation, barriers, and needed adjustments.
- Services Array Survey (Implementation, distribution, collection, and analysis)
  - o Identify a distribution date and distribution list
  - Ensure a periodic review of the response rate, if there is a low response rate, the workgroup will identify other strategies for dissemination to increase the response rate
- Review services array survey results
  - Review the draft report accompanying the results
  - o Review draft report with TCB leadership
- CT Peer-to-peer support and services

- Assess peer-to-peer support and services in the state through presentations, workgroup expertise, literature reviews, and completed studies.
- Monitor the rates of utilization of the United Way of Connecticut 2-1-1 Infoline program, 9-8-8 National Suicide Prevention Lifeline, mobile crisis intervention services, urgent crisis centers, subacute crisis stabilization centers, and hospital emergency departments for such services, outreach and marketing strategies common sources of patient referrals to such service providers, the allocation of state and other financial resources to such service providers, and the anticipated demand for behavioral health services for children into the future.
  - $\circ$  Identify who we will be partnered with to complete the study.
  - o TYJI to release RFQ for research partner on the study
  - o Once awarded, work with the researcher on the implementation of the study
  - Monitor progress of study, review findings and data analysis
  - From the data, assess best practices for Crisis Continuum staffing, evaluate models used and identify best practices from across the State,
  - From the data, assess scan of hours of services used that operate 24/7
- Monitor the IICAPS study (multiple factors)
  - The study will review and design levels of the IICAPS model for consideration. Such a model should consider the needs and time demands placed on families and children and the ability to deliver positive outcomes sustainably.
  - What additional federal funding and reimbursement may be available to IICAPS MDO and the IICAPS network as an evidencebased/promising practice treatment program, if determined prudent to do so.
  - Randomized controlled trial (RCT) of IICAPS to qualify IICAPS federally as an evidence-based treatment program. Recommendation to TCB by Oct. 2025
  - Monitor the UCC Report:
    - The report will include a review of private health insurance coverage for treatment of children at urgent crisis centers and be reported to the TCB no later than October 1<sup>st</sup>, 2025.
    - Identify barriers and gaps in services
- Operationalize how the workgroup integrate work with the Prevention and School-Based Workgroups (e.g., UConn Services Array Results, 2025 and 2026 recommendations)
- Assess and monitor additional non-TCB 2025 legislation regarding access to services for children and young adults covered by private/commercial insurance
  - o Identify barriers to care and gaps in services
- Develop a set of 2026 draft recommendations with the workgroup and present recommendations to the TCB committee in fall of 2025\*
  - o TCB leadership will review drafts and provide feedback
  - o Draft Workgroup recommendations will be presented at the October TCB Meeting

\* The development of 2026 recommendations is dependent on priorities, and progress within the group. If the group does come up with a set of recommendations, the decision to proceed with 2026 legislative recommendations package depends on committee and leadership feedback

#### Long-Term Workgroup Goals (2025-2028):

\*Other priority areas and strategies identified in the strategic plan will be added to the workplan annually

• Utilize information from the workgroup to plan for 2026, 2027, and in subsequent years.

Meeting Schedule: Services Workgroups are set to Start April 9<sup>th</sup>, 2025, and recur on the second Wednesday of the month from 2-3:30 PM. All meetings will be virtual. Meeting agendas and the Zoom link will be sent out before the meeting each month.

## DRAFT PREVENTION ANNUAL WORKGROUP WORKPLAN:

Workgroup Co Chairs: Ingrid Gillespie, Director of Prevention, Liberation Programs Inc & Pamela Mautte, Director, Alliance for Prevention & Wellness Program of BH Healthcare

**Draft Purpose Statement:** The Prevention Workgroup of the Transforming Children's Behavioral Health Policy and Planning Committee (TCB) is committed to strengthening children's behavioral health prevention services and programming. We collaborate to identify challenges, examine solutions, and provide advisory recommendations to enhance prevention efforts statewide. **Priorities:** 

- Preventing substance use and overdose by promoting evidence-based strategies and addressing emerging trends.
- Evaluating how to expand access to suicide prevention and behavioral health services to facilitate early intervention and reduce crises.
- Promoting resilience and emotional well-being through education, community engagement, and policy advocacy.
- Integrating behavioral and physical health care to create a more cohesive, accessible, and effective support system.
- Embedding brief screenings, including trauma screenings, in healthcare, schools, and community programs to improve early identification, build social-emotional learning (SEL) skills, reinforce positive choices, and connect individuals to appropriate supports.

### Short Term Workgroup Goals:

- Identify meeting schedule, frequency of meetings, and meeting presentations with the workgroup
- Identify and finalize workgroup priorities with feedback from the workgroup
- Set terms of engagement and community engagement for the workgroup to set the tone and operationalize how we engage
- Establish a Workgroup Foundation
  - o Set terms of engagement and community engagement for the workgroup to set the tone and operationalize how we engage
  - Create space for workgroup members to share their personal priorities, biases, or special interests that bring them to the workgroup, connect, feel a sense of belonging and discuss how that intersects with the priorities of the workgroup
  - o Compile, discuss and share initial definitions important for active participation (defining primary, secondary, tertiary prevention
  - o Level-set with the workgroup with an overview of progression or lack of prevention efforts across the State
- Review of 2025 TCB legislation with the workgroup, refine how this workgroup will monitor and track the passed legislation
  - o For TCB recommendations that do not pass in legislation, the workgroup will identify how they would like to proceed on those specific recommendations.

# Medium Term Workgroup Goals (2025):

- Identify and map preventative services in CT and evaluate the sustainability of the programs, program needs, and asses' barriers to services
  - o Utilize expertise of the workgroup, resources, and presentations to build out mapping of services.
  - o Identify barriers and needs of individuals who utilize those services
  - o Identify community engagement efforts across the state, identify outreach and engagement strategies
  - o Create a report card for CT-where are we with prevention efforts, what are we missing?
  - o Review of funding for prevention programs, how are prevention efforts being funded across the State?
- Assess data collection methods for prevention services data in the State
  - o Map out various data collection methods in a crosswalk
  - o Identify best practices, best data collection methodologies for reporting, and identify barriers and gaps in data reporting
  - o Create a report card for CT- what data are we lacking, what needs to be improved?
- Narrow in on the substance use data results from the services array survey and build opportunities for collaboration with DCF and OSAC and other key partners to develop policy and service recommendations.
- Operationalize how does the workgroup integrate work with the Prevention and School Based Workgroups (e.g., UConn Services Array Results, 2025 and 2026 recommendations
- Develop a set of 2026 draft recommendations with the workgroup and present recommendations to the TCB committee in fall of 2025
  - o TCB leadership will review drafts and provide feedback
  - o Draft Workgroup recommendations will be presented at the October TCB Meeting

\*The development of 2026 recommendations is dependent on priorities, and progress within the group. If the group does come up with a set of recommendations, the decision to proceed with 2026 legislative recommendations package depends on committee and leadership feedback

# Long-Term Workgroup Goals (2025-2028):

\*Other priority areas and strategies identified in the strategic plan will be added to the workplan annually

- Utilize the results of the services array to build sustainable recommendations and priorities in 2025, 2026, and in subsequent years.
- Utilize information from the workgroup to plan for 2026, 2027, and in subsequent years.

Meeting Schedule: Prevention Workgroups are set to Start April 17<sup>th</sup>, 2025, and recur on the third Thursday of the month from 3:00-4:30 PM. All meetings will be virtual. Meeting agendas and the zoom link will be sent out prior to the meeting each month.

#### DRAFT 2025 ANNUAL SCHOOL BASED WORKGROUP WORKPLAN:

Workgroup Co Chairs: Dr. Elizabeth Connors, Associate Professor of Psychiatry, Division of Prevention and Community Research, Yale School of Medicine & Katerina Vlahos, Executive Director, Bridgeport Prospers

"School-based behavioral health services" refer to a full array of multi-tiered behavioral health services and supports including promotion, prevention, early intervention, and treatment for students in general and special education and accomplished through school-community-family partnerships.

#### **Draft Purpose Statement:**

Promote mental health, well-being, and academic success for children birth to age 22 by increasing the reach and quality of school-based behavioral health services. Reach refers to equitable availability of timely and appropriate school-based behavioral health services in all CT jurisdictions, through a multidisciplinary array of coordinated community-partnered and school-employed service providers. Quality refers to effective, student- and family-centered, interventions and approaches which are culturally responsive, equitable, inclusive, and evidence-based.

#### **Priorities:**

- 1. School Based Health Center Study
- 2. School Based Behavioral Health Services Recommendation
- 3. TBD with input from community

#### Short Term Workgroup Goals:

- Establish a Workgroup Foundation
  - o Set terms of engagement and community engagement for the workgroup to set the tone and operationalize how we engage
  - o Create space for workgroup members to share their personal priorities, biases, or special interests that bring them to the workgroup, connect, feel a sense of belonging and discuss how that intersects with the priorities of the workgroup
- Identify Meeting Schedule, frequency of meetings, and meeting presentations with the workgroup
- Identify and finalize workgroup priorities with feedback from the workgroup

- Review of 2025 TCB legislation with the workgroup, refine how this workgroup will monitor and track the passed legislation
  - o For TCB recommendations that do not pass in legislation, the workgroup will identify how they would like to proceed on those specific recommendations.
- Provide education and clear, inclusive language:
  - o Discuss and map the array of school based behavioral health professionals and create an infographic or other resources to communicate who school-based mental health professionals are in terms of discipline, training, role and employer type.
  - o Compile, discuss and share initial definitions important for active participation, clear communication within the workgroup and future glossary

# Medium Term Workgroup Goals (2025):

- Provide education and clear, inclusive language:
  - o Identify and map school-based behavioral health models in CT districts, including those who have SBHCs, community behavioral health partnerships, and the variety of school employed mental health professional staffing ratios
  - o Develop and maintain a glossary of terms related to school based behavioral health to promote diverse engagement in the efforts of the workgroup among stakeholders with an array of personal and professional backgrounds and expertise
- Operationalize how we will integrate work with the Services and Prevention Workgroups
  - o UConn Services Array Results
  - o 2025 and 2026 recommendations
- SBHC study design and monitor the implementation of the study
  - o Develop scope of work in partnership with DPH, OPM and CASBHC
  - o TYJI to release RFQ for research partner on the study
  - o Once awarded, work with researcher on study implementation
  - o Monitor study progress, review findings and data analysis, as follows:

- In collaboration with a state-wide association of school-based health centers, develop a survey for administration at such centers that is designed to obtain information concerning existing data collection practices and the anticipated challenges and opportunities presented by the implementation of more comprehensive data collection systems at such centers.
- In collaboration with the Commissioner of Public Health, develop appropriate reporting requirements for school-based health centers to determine and respond to the needs of school-based health centers. The committee may contract with a consultant to develop the survey not later than January 1, 2026, the Transforming Children's Behavioral Health Policy and Planning Committee shall submit a report, to the joint standing committee of the General Assembly having cognizance of matters relating to public health. Such report shall include, but need not be limited to, the survey and reporting requirements.
- School Behavioral Health Services study
  - Develop a scope of work for the intent of conducting a review of Medicaid and private insurance billing codes (e.g., behavioral health services provided and billed within schools) to ensure non-duplicative billing, opportunities to fully claim reimbursement for services provided, and efficient effective team coordination and collaboration among school-based mental health professionals.
  - o TYJI to release RFQ for research partner on the study (if applicable)
  - o If applicable, once awarded, work with research partner on the study
  - o Monitor progress of study, review findings and data analysis
- Identify potential third priority area in partnership with the workgroup (e.g., early childhood)
- Consistent monitoring of TCB 2025 passed legislation and updates on the status of the implementation progress will be given at each workgroup meeting.
  - o Collaborate with identified responsible state agencies and private organizations on progress of implementation, barriers, and needed adjustments.
- Develop a set of 2026 draft recommendations with the workgroup and present recommendations to the TCB committee in fall of 2025
  - o TCB leadership will review drafts and provide feedback
  - o Draft Workgroup recommendations will be presented at the October TCB Meeting

\*The development of 2026 recommendations is dependent on priorities, and progress within the group. If the group does come up with a set of recommendations, the decision to proceed with 2026 legislative recommendations package depends on committee and leadership feedback

## Long-Term Workgroup Goals (2025-2028):

\* \*Other priority areas and strategies identified in the strategic plan will be added to the workplan annually

- Identify how the workgroup will sustainably implement the 2025, 2026 and subsequent years' legislative priorities.
- Identify how the workgroup will implement priorities identified in the strategic plan into the School Based Annual Workplan for 2026, 2027, and subsequent years.

Meeting Schedule: School Based Workgroups are set to Start April 7<sup>th</sup>, 2025, and recur on the first Monday of the month from 3:00-4:30 PM. All meetings will be virtual. Meeting agendas and the zoom link will be sent out prior to the meeting each month.