



Colorado Psychiatric Society
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April 13, 2022

House Health & Insurance Committee Members
200 E Colfax Ave
Denver, Colorado 80203

RE: HB22-1325, Primary Care Alternative Payment Models

Madame Chair Lontine and Committee Members

Please accept this letter as written testimony from the Colorado Psychiatric Society on HB 22-1325. CPS is in an amend position on the bill, although we do strongly support the bill overall.

We support HB 1325 because it will increase access to quality care across our state. Our members' experience in using evidence-based alternative payment models for primary care has been that they improve access, quality of care, and outcomes for our patients. Such models allow the health care system to extend currently scarce psychiatric treatment services to additional patients and provide support for primary care physicians.

One example of this innovative APM care is known as the Collaborative Care Model. It is a great example of what this bill can support. Collaborative care is a well-studied treatment model for the primary care setting that has shown in more than 90 randomized controlled trials to improve outcomes and to be cost-effective.

- the SUMMIT Randomized Clinical Trial found that collaborative care for opioid and alcohol use disorder increased both the proportion of patients receiving evidence-based treatment and the number achieving abstinence at six months. Abstinence improved 47% over the control.
- In addition to the health benefits of collaborative care, several studies have demonstrated that it is cost-effective. For example, the IMPACT study observed that the model was associated with substantially lower total health care costs compared to typical care – an ROI of \$6.50:1.

We thank Representative Kennedy for working with us to add language to ensure the bill supports alternative payment models that are evidence-based and focused on measurable patient outcomes.

Incorporating “measurement-based” outcomes is a key component in “evidence-based” care. Recording measurement-based results with frequency over a period of treatment indicates whether a patient is experiencing, full, partial, or no response to treatment and allows providers to adjust treatment plans accordingly.

Our parent organization, the American Psychiatric Association (APA) supports the use of Measurement Based Care by psychiatrists in the evidence-based treatment of behavioral health conditions in a manner that is streamlined, efficient and does not create burden. Measurement-based care can, when implemented appropriately, support clinical care, improve patient outcomes, and demonstrate the value of psychiatric care.

We need to enable more Coloradans with mental health and substance use disorders to experience the benefits of evidence-based, measurement-based care that promotes quality and outcomes.

Thank you for your support of HB 22-1325 and consideration of the suggested amendment from CPS.



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Respectfully,

A handwritten signature in blue ink, appearing to read "Anna Weaver".

Anna Weaver, MA, CAE
Executive Director, Colorado Psychiatric Society

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