



Practice Innovation Program

UNIVERSITY OF COLORADO
ANSCHUTZ MEDICAL CAMPUS

Project funded by the Colorado
Department of Healthcare Policy
and Finance per House-Bill 22-1302
Healthcare Practice Transformation



COLORADO
Department of Health Care
Policy & Financing

1302 PF Learning Community

January 21, 2025



Department of
Family Medicine



Welcome!

Please put your name, pronouns, role and organization in the chat.

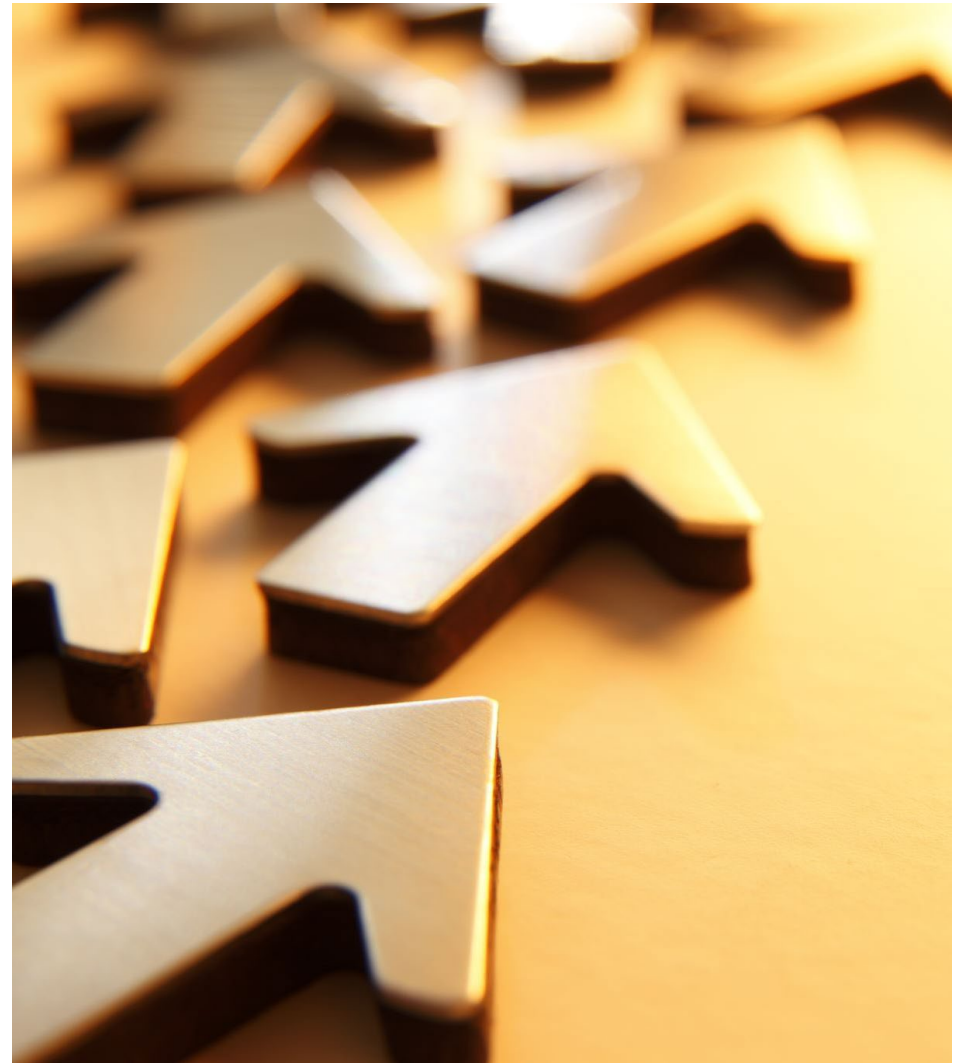
You can ask questions via the chat we will monitor it as we go along. We will also pause for questions periodically.

Slides from today will be made available on the Practice Innovation Program website.



AGENDA

- **HCPF billing update** – Steph
- **2025 scope of work updates**– Kristin
- **Upcoming Events** - Kathy
- **COMET Presentation** – Sadie Fritzler, Practice Facilitator, CU Department of Family Medicine



2025 Scope of Work Updates

- Currently issued scope of work ends 1/31/2025
- Updated purchase orders are in process for 2/1/2025 - 6/30/2025
 - SOW for this time period was shared with PTO leads
- Beyond June 2025: tapering down facilitation as intended in the legislation; working on details
- Questions? Kristin.crispe@cuanschutz.edu

PF Deliverable Schedule, February - June 2025

Activity	Due Date
January 2025 Field Note	2/8/2025
February 2025 Field Note	3/8/2025
March 2025 Field Note	4/8/2025
Quarterly PTO Snapshot – Q1 2025	4/15/2025
April 2025 Field Note	5/8/2025
May 2025 Field Note	6/8/2025
Update Building Blocks of Behavioral Health Integration: Care Delivery Assessment	6/15/2025
Quarterly PTO Snapshot – Q2 2025	6/15/2025
June 2025 Field Note	6/30/2025
Evaluation Task	6/30/2025

Events on the Horizon

Is your EHR Working For You: Capture Billing Opportunities?

Objectives:

- Review Technology, is your technology working for you?
- How to setup a billing claims Audit tool
- How to build a rules engine and template manager to capture accurate billing

Wednesday, January 29th 12:00 – 12:45

A Special 1302 PTO and Provider Highlight - Practice Autism West and Behavioral Health Services

Synopsis:

This presentation, outlines the progress, goals, and initiatives of BHI-1302, focusing on enhancing autism care and behavioral health services. It highlights key wins, current barriers, and strategic plans for growth, including hiring professionals, expanding facilities, increasing testing capacities, and integrating technology for improved care delivery. The session also emphasizes community outreach, professional development, and continuous quality improvement to support patients and families effectively. Key goals include doubling operational capacity, hiring specialists, and fostering long-term sustainability by 2026.

Thursday, January 30th 12:00 – 12:45

Special guests – Jenny Webb and Sherrie Bedonie

Spring Collaborative Learning Session – Monday, April 21, 2025 – Save the Date

Keynote speaker – Attorney General Phil Weiser

Registration coming soon!



Scan to complete the
evaluation

https://practiceinnovationco.co1.qualtrics.com/jfe/form/SV_0The4kLPclSXJ1s



COMET Presentation

Sadie Fritzler, High Plains Research Network Practice Facilitator, CU
Department of Family Medicine

Meret Felzien, High Plains Research Network Community Member

COMET

Changing Our Mental and Emotional Trajectory
to Improve Mental Health in Rural Communities

with Maret Felzien and Sadie Fritzler

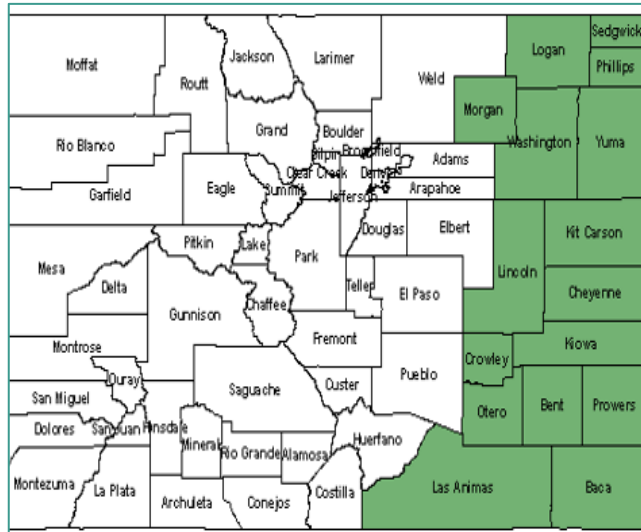
Disclosure Statement

We have no financial investments and receive no funding from any of the private companies.

No off-label medication use will be discussed.

We are not a mental health experts or care providers.

Who we are



High Plains Research Network
Region in Colorado

- High Plains Research Network (HPRN)
 - Practice- and community-based research network that works with primary care practices, hospitals, public health agencies, health organizations, and community members in 16 counties of eastern rural and frontier Colorado
 - Established in 1997
 - Guided by a Community Advisory Council (est. 2003)
 - Housed at the University of Colorado Department of Family Medicine
- **Maret Felzien** – HPRN C.A.C. member (joined 2003)
- **Sadie Fritzler** – HPRN Research Coordinator/Practice Facilitator

What is COMET™ ?

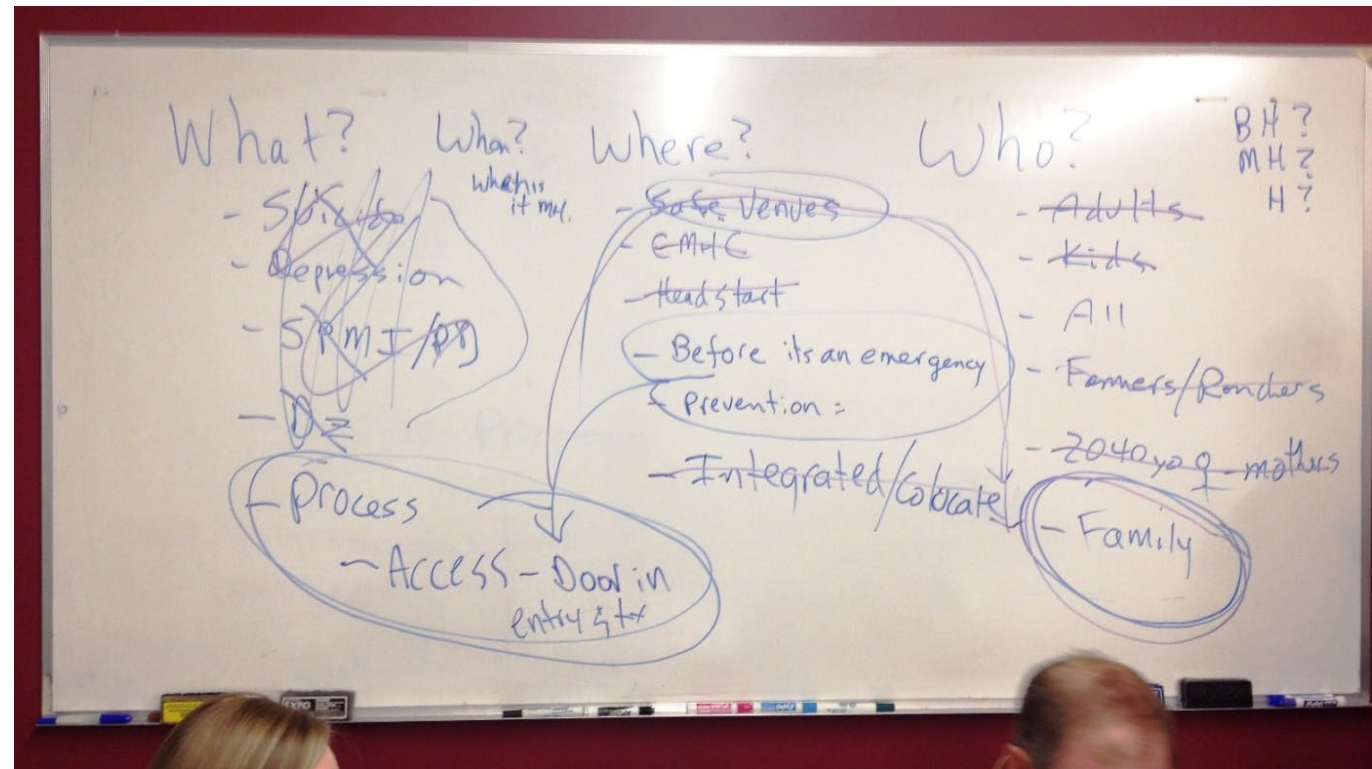
A community-based intervention to improve community members' ability to help others successfully access mental health care or support – especially before the condition becomes an emergency.

COMET Development

- HPRN C.A.C. identified “mental health” as a priority health issue – but we didn’t know where to start!
- **We needed to learn.** We met with experts in the field during 3 meetings spaced over a year to learn about major mental health conditions (major diagnoses), policy issues, integrated behavioral health care. (Supported by PCORI grant)
- So many factors influence mental health. What could we impact?
We were STUCK!

2013

- So we talked...And talked. We recognized that our grassroots group was not about to change high level policy challenges related to mental health.
- Finally, our academic partner proposed a focus on depression in older, male farmers (highest suicide rates in our region).
- Community members said “no.” We need to focus on **access** to mental/emotional healthcare and support – the entrance to care **before** an emergency to **prevent** crisis in families and the general population.



But...there aren't really *evidence-based guidelines* for how to access mental health support. So we:

- Used *Appreciative Inquiry (AI)* to collect data to learn from our community members what worked for them around *accessing mental health care*.
- Our research partners in DFM conducted interviews with prompting question: *“Think about you or people you may know who have had a mental health issue and successfully accessed mental health care or support. Tell us that success story.”*
- 29 stories from 21 people
- Looked for key elements across stories. Are certain elements common in many stories of success?

Child	Teen	Adult	Elderly
4	7	15	3

Male	Female	Transgender
10	18	1

The AI data became our “evidence” for accessing mental and emotional health care and support. But we needed to make the data meaningful to our communities. So we:

- Used the *Boot Camp Translation (BCT)* process to translate AI data into messages and materials that will be **locally relevant**, **effective**, and **sustainable** in our rural communities.
 - 3 in-person meetings
 - 3 30-minute conference calls
 - Over 7 months



Conversational Gravity Assist

Be "the other person"

WELLNESS

VULNERABLE SPACE

CRISIS

Someone headed
toward crisis.

You are here.
Be "the other person."

Mental Health First Aid
Crisis Hotlines
Law Enforcement

Community-based **safe venues** for emotional expression

COMET: The Questions/Statements



<ul style="list-style-type: none">• ACKNOWLEDGE SOMEONE IS "NOT YOURSELF"	<p><i>"You don't seem yourself lately."</i></p>
<ul style="list-style-type: none">• ASK "HOW ARE YOU?"	<p><i>"How are you? No, really. How are you?"</i></p>
<ul style="list-style-type: none">• SHARE OBSERVATION OF MOOD OR BEHAVIOR	<p><i>"I've noticed you haven't... [been at coffee, football games, etc]."</i></p>
<ul style="list-style-type: none">• ASK ABOUT FAMILY OR SOCIAL LIFE	<p><i>"How are things at... [home, work, school, with your friends]?"</i></p>
<ul style="list-style-type: none">• OFFER AN INVITATION TO ENGAGE	<p><i>"Can we get coffee sometime soon and talk?"</i></p>
<ul style="list-style-type: none">• OPTIONAL: SELF-DISCLOSURE	<p><i>"I had a similar situation once..."</i></p>
<ul style="list-style-type: none">• ASK HOW TO HELP MORE, OR EXIT THE CONVERSATION SUPPORTIVELY	<p>Validation of importance: <i>"Thanks for sharing this."</i></p> <p>Engage a little more: <i>"Have you shared this with your doctor?"</i></p> <p>Exit strategies: <i>"Know I'm here if you need anything."</i></p>

- We asked ourselves:
 - “Will people know how to use COMET and the wallet cards? Will it have credibility?”
 - What will people think of this? How will people respond?



2018

- **COMET Community Training:**

- Developed by a C.A.C. member who worked in education, with guidance
- Designed for community members
- 90 minutes – 2 hours
- Information + practice
- Taught by 2-person team (including C.A.C. members)



- Over time, demand continued to increase.
- Developed hub-and-spoke model, tapping into the knowledge and expertise of local people across the country



- **COMET Regional Trainer Workshops:**

- Certified COMET Trainers equipped to conduct COMET Community Trainings in their own local communities
- Diverse backgrounds of people that want to help their communities
- Conducted by a core training “faculty,” which includes C.A.C. members, HPRN staff, CSU Extension, AgrAbility, and Southeast Health Group (now with Valley-Wide Health Systems, Inc)

2020

Current stats:

- Community Trainings
 - 198 conducted (2 in Spanish)
 - 2347 people trained
 - 11 states and Honduras

- Train the Trainer Workshops
 - 24 conducted
 - 145 Regional Community Trainers trained
 - 8 states

*June
2024*

Results

Table 2. Likelihood of asking someone how they're doing... *really doing* (n=633 pre; 580 post)

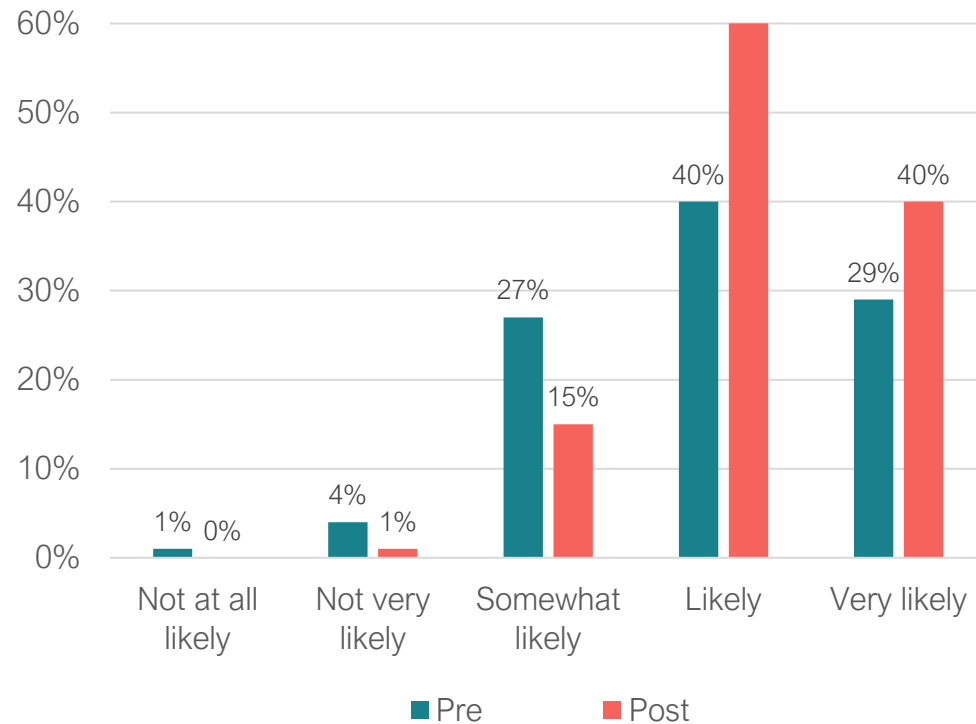
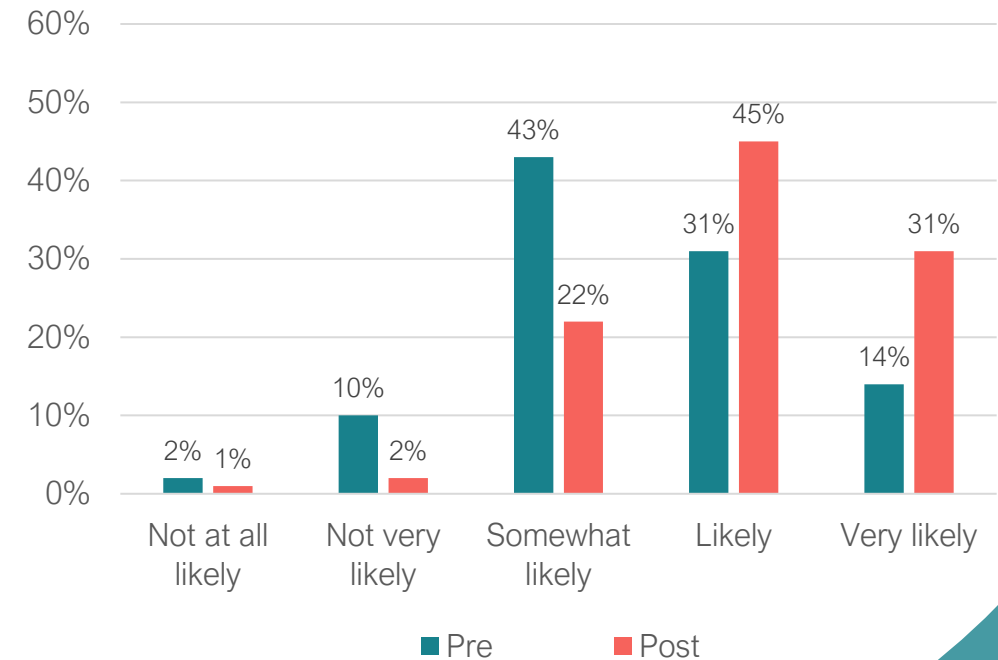


Table 3. Likelihood of telling someone you've noticed a change in mood/behavior (n=632 pre; 578 post)



Results

Table 4. Likelihood of inviting family/friends to tell you more about potentially emotional situation (n=628 pre; 578 post)

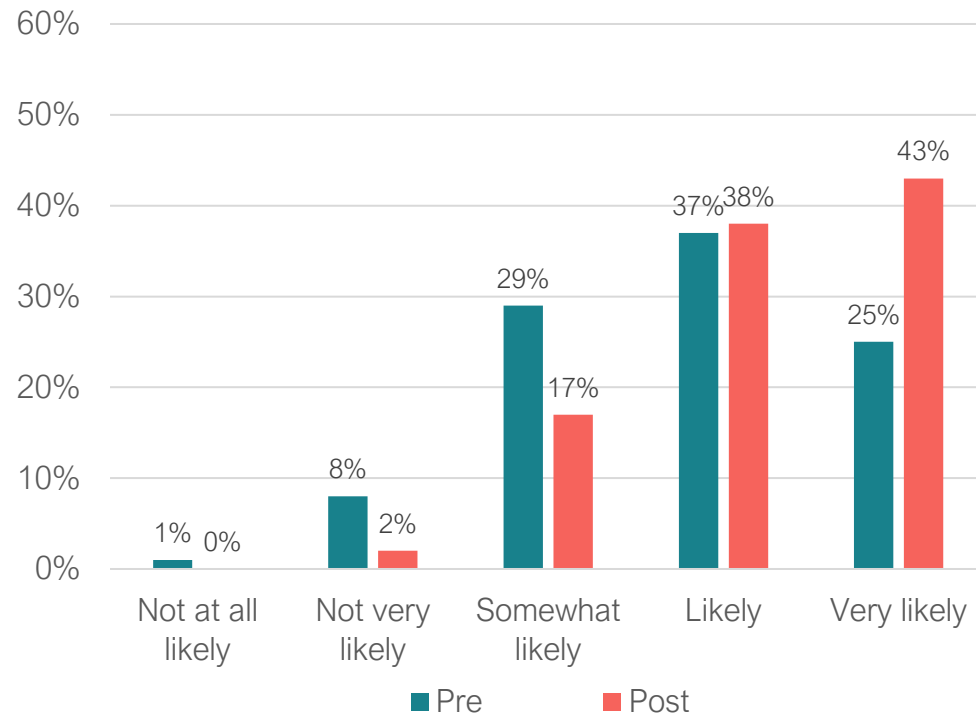
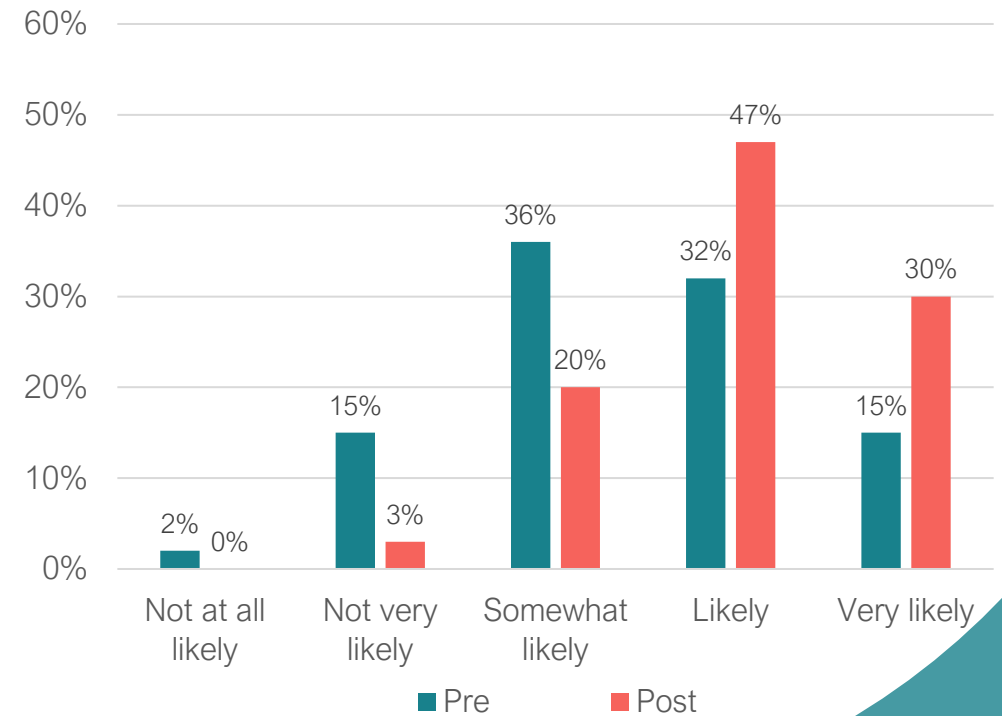


Table 5. Likelihood of inviting acquaintance/co-worker to tell you more about potentially emotional situation (n=631 pre; 577 post)



Fred Rogers: *“Anything that’s human is mentionable, and anything that is mentionable can be more manageable. When we can talk about our feelings, they become less overwhelming, less upsetting, and less scary. The people we trust with that important talk can help us know that we are not alone.”*

Thank you! Questions?

Contact: COMET@cuanschutz.edu

PIP Contacts

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Thank you!