What is the Child Mental Health Treatment Act?
The Child Mental Health Treatment Act is a law that allows families to access community and residential treatment services for their child without having to go through the dependency and neglect process, when there is no abuse or neglect of the child.

The Child Mental Health Treatment Act (CRS 27-67-101, et seq.) was enacted into Colorado law in 1999 through House Bill 99-1116. The Act allows families to access community, residential, and transitional treatment services for their child without requiring a dependency and neglect action, when there is no child abuse or neglect. To be eligible, a child must have a mental illness, be under the age of 18, and be at risk of out-of-home placement or at risk of further involvement with a county department of human/social services. The Act applies to both Medicaid eligible and non-Medicaid eligible children, although the application and payment processes differ. Local and State-level appeal processes are available if services are denied, and for local interagency disputes.

How is the child's eligibility determined?
For children who are not categorically eligible for Medicaid: the child must have a mental illness and be at risk of out-of-home placement, and found in need of community, residential, or transitional services determined by a community mental health center.

For children with Medicaid: the child must have a mental illness, and require residential level of care determined by the behavioral health organization.

Where do you go to apply?
Only a parent, legal guardian, or child over the age of 15 may apply for services under the Act. If the child has Medicaid, contact the Behavioral Health Organization (BHO) listed on their Medicaid card. If the child does not have Medicaid, contact the local Community Mental Health Center (CMHC). The mental health agency will provide an assessment to determine your child's eligibility. A list can be found here.

What is the parent/guardian role once the child is admitted to a residential facility?
Family involvement is essential to successful treatment outcomes. This includes participation in developing the treatment plan, review of the child's progress, family therapy, and discharge planning.

What if the child is denied services by the mental health agency?
If services are denied, the mental health agency will provide written recommendations of appropriate services for the child and family. The family will need to make decisions and explore resources to pay for these services. The mental health agency will also inform the parent/guardian about the appeal process. If the local appeal supports the denial, the parent/guardian may appeal to the Office of Behavioral Health if the child does not have Medicaid. If the child is Medicaid-eligible, the parent/guardian or the BHO may appeal to the Department of Health Care Policy and Financing (Colorado Medicaid).

What happens if the local mental health agency and county department of human/social services are uncertain about which agency is responsible for providing services under the Act?
The agencies should first use their local interagency dispute resolution process. If the matter is not resolved at that level, it should be referred to the Office of Behavioral Health, which will convene a committee to review and recommend a resolution.
What happens next when a non-Medicaid eligible child is determined eligible by the CMHC for community based treatment?

If approved for community based treatment 1) the CMHC determines the financial obligation of the family (see below and “Financial Aspects”). 2) A Plan of Care is created with the CMHC. 3) With the aid of the CMHC the child begins services with an agency within the community.

What happens next when a non-Medicaid eligible child is determined eligible by the CMHC for residential treatment?

If approved for residential treatment: 1) the CMHC determines the financial obligation of the family (see below). 2) A Plan of Care is created with the CMHC. 3) The parent/guardian applies for Supplemental Security Income (SSI) for the child at the local office of the Social Security Administration (SSA). The CMHC can help you get in touch with that office, and provide a contact person there.

The CMHC can provide help in locating a residential facility in Colorado appropriate to the child's needs. It is important that the parent/guardian be involved in this since family participation is essential to effective treatment.

What is the parent's financial obligation for services under this Act?

- The CMHC may assess a fee for the eligibility evaluation, based on a sliding scale. If private insurance is not available to pay this fee, the parents may be responsible for the cost. This fee is assessed regardless of the outcome of the evaluation; parents may be required to pay this fee even if the child is not found eligible for residential treatment services.
- Parents will also be assessed a monthly fee for the child's stay in the residential facility. This fee is based on the Colorado Child Support Guidelines. The residential facility determines the amount based on income information provided by the parents. Parents pay this amount directly to the facility for each month their child is in the residential facility.
- If the child does not qualify for SSI, the parents will be responsible for the full cost of care after the first 30 days of placement. Parents may appeal the SSI decision through the local Social Security Administration (SSA) office.

What is involved in applying for SSI for the child?

- To qualify for SSI the child must meet the disability and income requirements established by the SSA. The child must have a disability that has lasted, or is expected to last, for a year. Additionally, the disability must result in an impairment that interferes with daily living, e.g. inability to function in a regular classroom at school.
- The parent/guardian income is not counted in determining financial eligibility if admission to a residential facility will occur within 30 days and will last longer than one month. It is essential to provide the SSA office with all relevant reports, assessments, evaluations, and other documentation concerning the child's mental health needs. A SSI checklist developed by the SSA can help in the application process. Additional information about SSI can be found on the Social Security Administration's website.

How will the residential facility be paid for a child's care?

For the first 30 days, when SSI eligibility usually has not been determined, residential treatment costs are covered by private insurance (if available), parental fee, and State funds (CMHTA). Beyond the first 30 days, for children found eligible for SSI, the payment is covered by private insurance (if available), the child's monthly SSI benefit (minus $30 which is used for the personal needs of the child), parental fee, and State funds (CMHTA), if necessary. Medicaid reimburses the residential facility for treatment costs.

For additional questions or assistance regarding the Child Mental Health Treatment Act, please contact the CMHTA Program Manager, Andrew Gabor at (303) 866-7422 or andrew.gabor@state.co.us.

See website for more information:  http://www.colorado.gov/cs/Satellite?c=Page&childpagename=CDHS-BehavioralHealth%2FCBONLayout&cid=1251581622760&pagename=CBONWrapper