

# February 18, 2026 Child/Adolescent Quality, Access & Policy Committee Zoom Meeting

## Meeting summary

### Quick recap

The meeting focused on a comprehensive presentation of the Connecticut Behavioral Health Partnership (CTBHP) by Erika Sharillo and Kris Noam, who provided an overview of Carelon's role as the Administrative Service Organization (ASO), including their performance standards, clinical programs, and provider network. The presentation detailed the utilization management process, discharge delay statistics, and system throughput challenges, highlighting that while discharge delay volumes remained stable, the average length of stay increased from 2024 to 2025. Jackie Cook followed with a detailed analysis of inpatient discharge delays among youth, showing that Yale New Haven Hospital accounted for the highest volume of delayed discharges, particularly for Solnit Hospital and psychiatric residential treatment facilities. The conversation ended with discussions about system capacity constraints, mitigation strategies, and the need for expanded service capacity across multiple levels of care to improve system throughput and reduce discharge delays.

### Next steps

- [Erika Sharillo/Provider Relations: Check with the provider relations team for the ETA or status of the 2025 utilization reports and update Tammy \(and the committee\) when they will be published online.](#)
- [Erika: Take back the question from Jeff Vanderploeg \(via Hector Glynn\) regarding whether the 10% increase in expenditures is due to increased rates or utilization of more costly levels of care and provide an answer at a future meeting.](#)
- [Committee: Review the presented data and prepare additional questions for next month's meeting regarding the data sets and presentations.](#)
- [Committee: Welcome and prepare for the presentation by the national EPSDT expert from Georgetown University at the April meeting.](#)

## Summary

### Meeting Agenda and Live Broadcast

Hector Glynn, the Co-Chair, indicated it was time to start the meeting, and discussions about last month's meetings were opened to the floor. Hector mentioned that his Co-Chair would participate primarily through chat due to being in transit, and Melissa Green was thanked for her participation. The meeting was set to follow its usual agenda, with a presentation for Carelon being a part of the schedule.

## **Connecticut Behavioral Health Partnership Overview**

### **Connecticut Youth Behavioral Health Outcomes**

Kris Noam presented outcomes for youth in Connecticut's behavioral health programs, highlighting a 62.6% reduction in discharge delays and a decrease in average length of stay from 17.8 to 13.5 days between 2018 and 2024. The HEDIS measures showed Connecticut performing comparably or better than national and New England rates in several areas, including psychosocial care for children on antipsychotics and substance use disorder treatment initiation. However, metabolic monitoring rates for children on antipsychotics were lower than national and New England rates, prompting plans to implement a program to improve these measures.

### **Health Equity Analytics and Outreach**

Erika Sharillo discussed telephonic outreach efforts to educate parents about metabolic monitoring requirements for certain medications and a joint forum with CHN to educate prescribers about youth health maintenance. Kris presented Carelon's analytics and innovations, including quality metrics, population health dashboards, provider performance dashboards, and advanced analytics for forecasting behavioral health outcomes. The team emphasized their focus on health equity, highlighted by predictive models to improve post-hospitalization follow-up rates and pharmacy analyses to address medication adherence disparities.

### **Husky Health Access Challenges**

Erika presented data on HUSKY Health membership, noting that 1.1 million members accessed behavioral health services in 2024, with costs rising by over 10% and network expansion by 40%. She highlighted ongoing access issues and waitlists, emphasizing the need for increased capacity. The discussion touched on using the Area Deprivation Index to improve health equity data and ongoing efforts to enhance care access and efficiency through various initiatives. Bernetta Henry raised concerns about children with autism spectrum disorder spending extended periods in emergency departments, which Erika acknowledged as a contributing factor to costs. The team also discussed the need for more ABA services and psychiatric residential treatment beds, with Erika noting that certain populations have limited access due to age and gender constraints.

### **Youth Psychiatric Discharge Delay Trends**

Jackie Cook presented data on youth inpatient psychiatric facility discharge delays, showing stable volumes (112 discharges in 2025) but increasing average lengths of stay (from 17.5 to 25.5 days between 2024-2025). The data revealed that Yale New Haven Hospital had the highest volume of discharge delays, particularly for Solnit Hospital and PRTF placements. The committee discussed factors contributing to delays, including hospital acuity levels and access to downstream care, with Paulo noting that risk adjustment was not included in the descriptive data. The conversation ended

with plans to review the data further and welcome national EPSDT experts from Georgetown University to present at the April meeting.