

# May 13, 2026 Behavioral Health Partnership Oversight Council (BHPOC) Zoom Meeting

## Meeting summary

### Quick recap

The Behavioral Health Partnership Oversight Council held its monthly meeting with 47 attendees, including Spanish translation services provided by Carlos Blanco. The meeting began with a legislative citation recognizing former tri-chair Terry DiPietro for her dedicated service to the Council. Carrie Borden and Erica Sharillo from Carelon Behavioral Health presented follow-up responses to six questions about their services, including performance standards, provider coordination, and collaboration with other Administrative Service Organizations (ASOs). The presentation detailed Carelon's 15 performance standards, which they consistently meet at over 95% compliance rates, and highlighted their coordination efforts with Community Health Network, Benecare, and NEMT services. State agency representatives from DSS, DMHAS, and CSDE provided limited updates, primarily noting they would present legislative and budgetary impacts in the June meeting. Committee reports were shared, including updates from CFAC on upcoming community meetings and training opportunities, and the Adult Quality Access and Policy Committee's recent discussion on behavioral health homes. The conversation ended with discussion about the lack of substantive updates from state agencies, with Janine Sullivan-Wiley and Mike Demicco expressing surprise at the minimal reporting despite the recent legislative session.

### Next steps

Bryan Klimkiewicz

- [Provide update at next meeting regarding final impact surveys and fund requests for ARPA School Mental Health Specialists and ARPA Summer Mental Health Supports grants \(by June 15th and June 30th deadlines\).](#)
- [Post Kate Bohannon's contact information in the chat for coordination on mental health resource kits \(this was mentioned as an immediate action during the meeting\).](#)  
[Kate.Bohannon@ct.gov](mailto:Kate.Bohannon@ct.gov)

Carrie Bourdon

- [Send the presentation slides from today's meeting to David Kaplan.](#)

Sabrina Trocchi

- [Bring the question of standard expectations for state agency reporting to the Executive Committee for discussion and review of the regulation.](#)

## Collaboration

- [State agency representatives \(DSS, DMHAS, DDS, CSDE, etc.\): Prepare and present legislative and budgetary updates at the June meeting.](#)

## Summary

### Spanish Translation Services Setup Meeting

The meeting began with introductions and technical setup for Spanish translation services led by Carlos Blanco. David Kaplan welcomed attendees and confirmed the meeting was being recorded on CT-N. The meeting started at 2:05 PM with 47 participants, and the group was prepared to begin once translation services were established.

### Carillon Behavioral Health Partnership Update

The meeting began with Representative Mike Demmico and Sabrina Trocchi recognizing former tri-chair Terri DiPietro for her service to the Behavioral Health Partnership Oversight Council. A legislative citation was read honoring Terri's contributions to behavioral health services in Connecticut. The main agenda item focused on follow-up questions regarding services provided by Carelon Behavioral Health under the Connecticut Behavioral Health Partnership contract. Carrie Bourdon, CEO of Carelon Behavioral Health, and Erica Sharillo presented responses to six pre-submitted questions, including information about Carelon's three operational divisions: the Behavioral Health Partnership contract, child and family division, and commercial division.

### Carillon Services Performance Review

Carrie presented information about Carelon's services and performance standards under the CTBHP contract. She detailed the 15 performance standards, which are measured quarterly with financial penalties for missed standards, and reported that over 98% compliance has been achieved since 2011. Carrie also shared data on the volume of services provided in 2025, including nearly 50,000 reports, over 26,000 incoming calls, and 100,000 service requests reviewed. Regarding provider coordination, Carrie explained that while providers contract directly with DSS, Carelon has worked to increase the provider network to nearly 9,000 providers since 2020 and implements various processes to promote service coordination, including quality management, retrospective reviews, and provider engagement programs.

### ASO Collaboration and Partnerships Overview

Erika presented on coordination with ASOs (Accountable Service Organizations), describing various collaboration efforts throughout the year including community meetings, events, and presentations. She detailed specific partnerships with Community Health Network (CHN), Benecare, and MTM, highlighting shared member management, bi-weekly rounds, and escalation pathways. The

presentation included metrics on shared members across different programs and outcomes from NEMT collaborations, showing successful transitions and reduced livery usage among members.

### Behavioral Health Services Coordination Meeting

The meeting focused on discussions about behavioral health services and system coordination. Carrie and Erica from Carelon discussed their care management approach for inpatient transitions and post-discharge support, including their use of peer support specialists and standardized measures like HEDIS follow-up rates. The group also addressed call center operations, with Carrie explaining that Carelon meets performance benchmarks without needing a callback system. State agency representatives reported limited updates, with most agencies planning to provide legislative session and budget impacts in the June meeting. The conversation ended with committee reports from various behavioral health groups, including updates on educational programs and suicide prevention training.

### **Child/Adolescent Quality, Access & Policy Committee**

Last month the committee had 2 presenters from **Georgetown University McCourt School of Public Policy**. They reviewed the EPSDT role in behavioral health and introduced to the group CMS's toolkit for behavioral health services as they are related to EPSDT requirements. The committee believes the toolkit is a good road map to explore our children's Medicaid behavioral health system.