

Connecticut Behavioral Health Partnership Provider Newsletter

Member Story

Accessing Care for Children with Complex Needs

Provider Referral Information Updates

Parents Under Pressure – Review

CT BHP News

Quick Clicks

Contents

Navigating Life With Resilience and Support.....	3
Understanding Access to Care for Children with Complex Needs.....	4
Strengthen Your Practice’s Visibility with HUSKY Health Members: Complete the Provider Data Verification Form!.....	6
Supporting Parents Under Pressure: A Call to Action.....	7
Introducing a New Value – Based Payment Initiative.....	8
Certified Community Behavioral Health Clinic (CCBHC) Implementation.....	9
Enhancing Behavioral Health Outcomes through Integrated Care and Social Drivers of Health.....	11
CT BHP Community Meetings.....	14
Quick Clicks.....	15

Navigating Life with Resilience and Support

“Inspiring resilience” describes the journey of a 26-year-old HUSKY Health member who has been receiving support from a Connecticut Behavioral Health Partnership (CT BHP) peer support specialist since May of 2024. Her story sheds light on the complexities of mental health and the importance of timely intervention and ongoing support. Diagnosed with attention deficit hyperactivity disorder (ADHD) and anxiety during her early school years, she now faces additional challenges with recent diagnoses of bipolar II disorder, depression, and autism. Moreover, she feels she may have characteristics of borderline personality disorder.

Her autism diagnosis in adulthood highlighted the need for supportive services that are tailored for late-diagnosed individuals. Throughout school, she experienced bullying and was often labeled “dramatic” by teachers more inclined to pass her along than address her needs. Sadly, without parental advocacy, she did not receive the early interventions that could have better addressed her needs. This absence of support led to a significant familial rift and years without communication.

Today, she resides in a rented room in a neighborhood where she is actively seeking ways to help ensure her safety and wellbeing. Her sister, acting as her conservator, provides financial support, a task that presents its own challenges. On her therapist’s advice, the member outreached to CT BHP for peer services, which led to scheduling regular weekly meetings. She experienced significant health challenges related to her mental health, which at times impacted her ability to attend appointments.

Despite these difficulties, the member has achieved several goals with the help of peer services. She secured part-time employment, maintains

regular appointments with her primary care physician, and is undergoing extensive dental care. She is actively engaged in therapy and is taking steps to mend family relationships by attending family therapy sessions. Her sister’s support has been crucial in providing access to Meals on Wheels and a home health aide who assists with cleaning and grocery shopping.

She continues to explore opportunities for social engagement that align with her comfort level and interests. Although she has attended events with NAMI and Toivo, she has yet to reconnect. Her long-term aspiration is to live in a group home that offers support, education in home caretaking and self-care, and social connections. Unfortunately, her sister has not been able to access the financial support necessary to make this dream a reality. The member aspires to a career working with children or generally helping others. Her CT BHP peer support specialist is currently planning to explore volunteer opportunities that align with her interests.

When asked about sharing her story, the member eagerly accepted, hoping her experiences might help others understand the challenges associated with mental health issues and to inspire them to seek the help and support they need. This individual’s journey highlights both the challenges and achievements of living with complex mental health conditions. Her story emphasizes the importance of support systems, from family to peer services, in navigating these challenges. By sharing her experiences, she aims to inspire others to seek help and foster community understanding, while demonstrating the power of resilience and support in overcoming adversity.

For more information on peer support services, please visit www.ctbhp.com, or call 1-877-852-8247 for more information.

You can also view our peer support brochure here: [Link](#)

Understanding Access to Care for Children with Complex Needs

Families of children with complex behavioral needs often face daunting challenges in securing the appropriate care and support. For those exhibiting at-risk behaviors, the route to finding the right resources can be particularly difficult. Access to behavioral health services is crucial, yet it remains a hurdle for many families seeking help.

PRTFs: A Community-Based Resource

Psychiatric Residential Treatment Facilities (PRTFs) offer a vital service to families in need. These community-based facilities cater to children and adolescents requiring intensive support but who do not need the restrictions of an inpatient hospital setting. Designed for individuals under 18 years old, PRTFs provide comprehensive care tailored to the unique needs of each child, ensuring a structured and supportive environment.

Comprehensive Services Offered at PRTFs

PRTFs provide a wide range of therapeutic and clinical services, including:

- ✓ **Psychiatric treatment and medication management:** Ensures children receive the appropriate medical care and medication adjustments necessary for their wellbeing.
- ✓ **On-site nursing and therapy options:** From recreational activities like art and music to specialized therapy such as cognitive behavioral therapy (CBT), dialectical behavioral therapy (DBT) and eye movement desensitization and reprocessing (EMDR).
- ✓ **Individual and family therapy:** Facilitates communication and understanding within families through regular therapy sessions.
- ✓ **Vocational and occupational therapy:** Prepares youth for future success by developing life skills.
- ✓ **Unique treatments:** Includes sensory rooms, milieu therapy, and family nights that enhance treatment experiences.
- ✓ **Educational support and aftercare:** On-site schooling and family support specialists help maintain educational progress and ensure smooth transitions post-treatment.

Who Can Benefit from PRTF Services?

PRTFs serve as a crucial step for youths not requiring hospital-level intervention but in

need of close, professionally managed care. They cater to children discharged from hospitals, or those coming directly from community settings, avoiding unnecessary inpatient hospital stays.

How Referrals to PRTFs Work

Referrals to PRTFs can come from various professional sources, ensuring that children receive appropriate care when needed:

- ✓ **Hospitals and emergency departments:** including clinicians, medical doctors, and case managers.
- ✓ **Inpatient psychiatric and medical teams:** assessing when a less restrictive environment is suitable.
- ✓ **Community treatment and medication providers:** such as psychiatrists, nurse practitioners, or primary care physicians.
- ✓ **Educational institutions:** school counselors and psychologists can identify and refer students in need.
- ✓ **Social workers and counselors:** who recognize at-risk youths and recommend further care.

The Vital Role of CT BHP Staff

The Connecticut Behavioral Health Partnership (CT BHP) plays an essential role in collaborating with PRTF providers and families to ensure effective care. CT BHP clinical care managers work closely with PRTFs for utilization review, confirming that the youth continue to require the level of care provided. CT BHP intensive care managers collaborate with PRTFs on individual cases. They offer support by participating in provider meetings and working with providers to identify discharge resources, and address barriers to services.

In 2024, 184 unique HUSKY Health youth were admitted to a PRTF. 71.55% of discharges were to a lower level of care.

Understanding Access to Care for Children with Complex Needs

Ensuring Tailored Care

Every child's treatment is personalized, considering their cultural, linguistic, and individual recovery needs. Considering verbal ability is crucial in tailoring treatment approaches at PRTFs, as it significantly influences a child's participation and engagement in therapeutic activities. With 24-hour supervised care, PRTFs ensure safety and appropriate intervention, diminishing the likelihood of further hospitalization.

A success story of a youth’s journey through PRTF services

A preteen who had been receiving psychiatric care for challenges they were experiencing, such as physical aggression, self-directed harm, mood dysregulation, and low frustration tolerance, transitioned to a PRTF for continued support. The focus at PRTF was on improving impulse control and taking accountability. Throughout treatment, the care team worked with the preteen to identify triggers and build coping strategies. Initially facing challenges with peer interactions and impulsivity, they received targeted support and medication adjustments. As the preteen made progress they and their family actively participated in family therapy and home visits. By discharge, the preteen showed significant improvements in impulse control, social interactions, and academic performance. They returned home with in-home clinical services. Eight months later, the youth and their family remain engaged in treatment, continuing to achieve positive clinical and relational outcomes, as recognized by their family and care team.

PRTF Facilities in Connecticut

THE CHILDREN'S CENTER OF HAMDEN	ALBERT J. SOLNIT SOUTH CAMPUS	ALBERT J. SOLNIT NORTH CAMPUS	THE VILLAGE FOR FAMILIES & CHILDREN	BOYS AND GIRLS VILLAGE
1400 Whitney Avenue, Hamden, CT 06517 T: 203-248-2116 F: 203-248-2572	915 River Road, Middletown, CT 06457 T: 860-704-4082 F: 860-772-1749	35 Gardner Street, East Windsor, CT 06088 T: 860-292-4000 F: 860-292-4066	1680 Albany Avenue, Hartford, CT 06105 T: 860-297-0585 F: 860-523-0346	528 Wheelers Farms Road, Milford, CT 06461 T: 475-261-1711 F: 203-783-9572
SERVING:				
Males 7-16 Females 7-16	Females 13-17	Males 13-17	Males 6-12 Females 6-12	Males 11-17

Access the Referral Form here: https://s18637.pcdn.co/wp-content/uploads/sites/76/PRTF_Referral_Form-10.2024.pdf

Strengthen Your Practice's Visibility with HUSKY Health Members: Complete the Provider Data Verification Form!

At the Connecticut Behavioral Health Partnership (CT BHP), we value your role in delivering quality care to HUSKY Health members. A way to enhance your connection to members is by completing our Provider Data Verification (PDV) form. Accurate and up to date referral information ensure your services are correctly listed in our database, helping members easily access the care they need and keeping you informed about important policy changes and training opportunities.

Why Complete the Form?

- ✓ **Accurate listings** - ensure your practice and services are represented accurately for better member referrals.
- ✓ **Stay updated** - receive timely updates on policy changes and training opportunities.
- ✓ **Promote inclusive care** - contribute information that helps us support diverse member needs, enhancing equitable and culturally sensitive care.

Your Contribution Makes a Difference

Your participation is crucial in bridging the gap between members and the necessary services, demonstrating your commitment to our community.

Access the form here: [CT BHP PDV form](#)

It only takes a few minutes to complete and allows our members to connect with your practice and experience exceptional care.



Supporting Parents Under Pressure: A Call to Action

In today's rapidly changing world, the role of parenting has become increasingly challenging. Nearly 70% of parents believe that raising children is more difficult now than it was two decades ago. This escalating difficulty is largely due to technological advancements, societal shifts, and heightened expectations for children's success. Recognizing these challenges, the U.S. Surgeon General has released "Parents Under Pressure," a comprehensive advisory to support families by addressing these modern complexities and offering actionable recommendations for providers working with children and families.

Key Challenges Facing Parents

Growing Stress: Parents today are confronted with a range of stressors, including financial burdens, lack of time, concerns for their children's safety, and cultural demands. These pressures are taking a toll on their mental health, with one in four parents experiencing mental health issues.

Disproportionate Impact: Certain groups, such as families with low-income, racial and ethnic minorities, and single parent households, face even greater challenges. These families are often caught in systemic issues like discrimination and economic instability, making their parenting journey even more difficult.

Community and Social Support: The advisory emphasizes the importance of supportive networks and open dialogue. Encouraging conversations about mental health and providing resources can significantly help reduce loneliness and stigma among parents.

Institutional Involvement: Schools and community organizations are crucial in creating social connections and support systems for parents. The advisory calls for government and employer policies that better prioritize mental health and community engagement.

Empowering Providers

Providers in the fields of child welfare and parental support are encouraged to explore the full advisory. Gaining a deep understanding of the multifaceted nature of parental stress is essential for developing effective practices and policies that acknowledge the evolving needs of families.

Addressing today's parenting challenges is crucial. Providers have a key role in reducing parental stress by understanding diverse family pressures and recognizing the unique struggles of marginalized groups. By strengthening community support, promoting mental health discussions, and advocating for supportive policies, providers can help create healthier environments for families. For detailed strategies, providers should refer to the full advisory report found here:

<https://www.hhs.gov/sites/default/files/parents-under-pressure.pdf>.

Parental Mental Health: 23.9% of parents have a mental illness, and 5.7% had a serious mental illness. Additionally, 14% of parents of children with special needs reported "fair or poor mental health."

Citation: Murthy, V. H. (2024). *Parents under pressure: The U.S. Surgeon General's Advisory on the Mental Health & Well-Being of Parents*. U.S. Department of Health and Human Services. Retrieved from [SurgeonGeneral.gov](https://www.surgeongeneral.gov).

Introducing a New Value-Based Payment Initiative

To enhance the quality and efficiency of healthcare delivery, the Department of Social Services (DSS), in collaboration with Carelon Behavioral Health of Connecticut (Carelon BH CT) is set to implement a voluntary Value-Based Payment (VBP) program targeting pediatric inpatient psychiatric services under HUSKY Health. This initiative forms part of a broader strategy to move away from traditional payment models towards one that emphasizes care quality and patient outcomes.

Program Launch and Phased Implementation

The program, designed as a performance-based prospective tiered payment model, will be introduced in a phased manner starting January 1, 2027. The first phase will involve Connecticut General Hospitals and Private Psychiatric Hospitals. Institutions such as Chronic Disease Hospitals and Children's General Hospitals will continue with the existing Interim Rate Add-On programs for the time being. This effective date is a change from the 2025 effective date stated in PB [2023-63](#). Interim Rate Add-On program information can be found in PB [2024-69](#).

Performance Metrics and Reporting

The cornerstone of this VBP initiative is its structured tiered payment system. Key performance metrics include the length of stay (LOS), readmission rates, and connect-to-care (C2C) rates. Performance data collected from January 1, 2025, to December 31, 2025, will inform the tier placement for the inaugural payment cycle of 2027. Providers will be issued quarterly VBP performance reports starting October 2025, ensuring they have the necessary data to assess and enhance their service quality.

Provider Participation and Support

Participation in the VBP program is voluntary, with options for institutions to continue under the Interim Rate Add-On programs if they choose not to engage with the new model initially. **Program sign up will occur later.** DSS and Carelon BH CT are committed to supporting providers through this transition, offering informational resources and ongoing engagement opportunities to facilitate a smooth adaptation and foster a culture of continuous improvement.

Contact and Further Information

Providers seeking more details on participation requirements, performance reporting, or any specific inquiries can access resources at www.ctdssmap.com or contact the Provider Assistance Center at 1-800-842-8440. As DSS continues to roll out this significant program, collaboration with providers will remain a top priority, ensuring that together, providers can drive meaningful improvements in pediatric mental healthcare across Connecticut. Stay informed and engaged as this transformative initiative moves forward to benefit youth mental health and overall wellbeing.

For additional updates and announcements, please visit the Connecticut Medical Assistance Program website at www.ctdssmap.com.

Certified Community Behavioral Health Clinic (CCBHC) Implementation

In December 2024, Connecticut was selected for the Certified Community Behavioral Health Clinic (CCBHC) planning grant!

A planning grant has been awarded to states that implement the Certified Community Behavioral Health Clinic (CCBHC) model in select behavioral health outpatient clinics. A Substance Abuse and Mental Health Services Administration (SAMHSA) initiative aims to improve community-based behavioral health services. CCBHCs are required to deliver integrated care to individuals and families of all ages, offering comprehensive services to those seeking mental health or substance use disorder assistance, regardless of their financial situation, location, or age. These clinics provide prompt access to a wide range of services, including prevention, crisis intervention, screening, care coordination, and evidence-based practices. The program employs a cost-based Prospective Payment System (PPS) to ensure adequate funding for all aspects of the CCBHC initiative. Beyond the core service standards, CCBHC providers must adhere to various organizational and practice standards, as well as engage in Quality Improvement Processes to guarantee high-quality, equitable, and effective care.

In the 2025 planning phase, Connecticut Behavioral Health Partnership (CT BHP), in collaboration with Caredon Behavioral Health CT, will establish a data infrastructure for tracking quality measures, assess the needs of the communities served by the CCBHCs and select clinics for

the CCBHC model implementation. A Request for Qualifications (RFQ) will be issued in the coming months for providers interested in becoming a CCBHC. Upon completion of the planning grant, Connecticut will apply for a four-year CCBHC demonstration grant, which will include a payment system that compensates providers based on the actual costs incurred by each clinic. Other states implementing the CCBHC model have seen significant improvements in workforce readiness and care quality.

The CT BHP is responsible for overseeing the planning grant and collaborates with several community partners:

- ✓ **Caredon Behavioral Health CT** will manage the grant's daily operations, including meeting coordination, data collection and reporting, and submissions to SAMHSA.
- ✓ **Mercer**, a consulting firm, will assist with actuarial analyses and the development of the prospective payment system.
- ✓ **Child Health and Development Institute** will offer and coordinate technical support in workforce development, as well as the identification, selection, and sustainability of Evidence-Based Practices (EBPs).
- ✓ **National Council on Quality Assurance** will review the selected CCBHCs to ensure they meet the certification criteria required by this initiative.



Certified Community Behavioral Health Clinic (CCBHC) Implementation

The 'Community' in CCBHC

CCBHC services:

CCBHCs deliver the following, either directly or through formal partnerships:

- ✓ 24/7 access to crisis services
- ✓ Outpatient mental health and substance use services
- ✓ Person and family-centered treatment planning
- ✓ Community-based mental health care for veterans
- ✓ Peer/family support and counselor services
- ✓ Targeted care management
- ✓ Outpatient primary care screening and monitoring
- ✓ Psychiatric rehabilitation services
- ✓ Screening, diagnosis, and risk assessment
- ✓ Preventative care
- ✓ Evidence-based practices (EBP)

Your voice matters

A steering committee inclusive of persons with lived experience will govern the CCBHC grant. Supported by diverse workgroups, the committee aims to unite stakeholders such as providers, state agencies, veterans, tribal communities, individuals with disabling conditions, those with direct behavioral health experience, and LGBTQAI+ members. This diversity is key to fostering innovation and ensuring comprehensive community service by CCBHCs.

For more information about the CCBHC, the planning grant, steering committee, or the sub-committees, contact Caroline Anyzeski at Caroline.Anyzeski@ct.gov or Fatmata Williams at Fatmata.Williams@ct.gov

Enhancing Behavioral Health Outcomes through Integrated Care and Social Drivers of Health

As societal factors increasingly influence behavioral health outcomes, understanding the vital relationship between social drivers of health (SDoH) and behavioral health care is crucial. SDoH refers to the environmental conditions where people are born, live, learn, work, play, worship, and age, that influence a wide range of health, functioning, and quality-of-life outcomes and risks. Carelon Behavioral Health of Connecticut (Carelon BH CT), with the collaboration of behavioral health providers, continue to explore innovative strategies for integrating social factors into healthcare systems that not only address immediate treatment needs but also create sustainable, equitable paths to wellness for all individuals.

Inpatient Psychiatry and Social Drivers of Health (SDoH)

The intersection of SDoH with inpatient psychiatry is crucial for enhancing mental health outcomes. Economic instability and lack of insurance often delay access to mental health services, resulting in hospitalization only when conditions severely escalate. Addressing SDoH enables preventive care, reducing the need for intensive interventions.

Communities with higher health risk factors face systemic barriers that increase hospitalization rates, highlighting disparities in care access and quality. Environmental stressors—such as violence and poor housing—can exacerbate psychiatric conditions, necessitating integrated care approaches that consider these factors during treatment.

To tackle these challenges, inpatient units offer temporary support; but achieving long-term success in mental wellness necessitates community-based solutions that address social isolation and other

social drivers. By integrating comprehensive social support and strategic discharge planning, healthcare facilities can ensure smooth transitions from institutional care to community reintegration. This approach includes staff education on social drivers and collaboration with community organizations to provide essential resources like housing, employment, and education. These efforts help mitigate barriers such as transportation and housing instability, preventing cycles of insecurity and promoting stable recovery. By addressing both medical and social factors, the healthcare system can empower individuals to thrive post-hospitalization.

Collaborative workgroups also play a pivotal role in these efforts. On June 26, 2024, the first statewide inpatient/residential levels of care workgroup, Substance Use Disorder (SUD) System Integration: Enhancing the Patient Journey Throughout the Continuum of Care, convened. The audience included providers from ASAM 4.0 withdrawal management (WM), adult inpatient psychiatry facilities (IPF), emergency departments (ED), and ASAM 3.1-3.7 inpatient/residential levels of care. The focus was creating ways to enhance patient journeys across the continuum of care, fostering collaborative discussions and sharing best practices to address systemic barriers and optimize outcomes.

SUD Services and System Integration

In SUD services, addressing SDoH is equally essential. Challenges like long waitlists and housing instability directly impact service delivery and recovery. The lack of supportive housing increases demand for inpatient care and raises readmission risks, making seamless referral pathways through Connect-to-Care meetings vital. These meetings have identified deficiencies in residential bed availability, complicating care transitions and prolonging stays.

Fast Facts

211 Call data from January 1, 2024-December 31, 2024¹:

- 33.2% of all calls were for housing and shelter requests.
- 12.4% of all calls were related to Mental Health and Addiction services.
- 11.9% of calls were for food assistance, including help buying food, and food pantry requests.

¹ source: <https://ct.211counts.org/>

Enhancing Behavioral Health Outcomes through Integrated Care and Social Drivers of Health

The Provider Analysis and Reporting (PAR) program focuses on data-driven care enhancements by collecting metrics on length of stay and readmission rates. Statewide workgroups contribute insights on referral processes and treatment best practices, focusing on opioid and alcohol use disorders. Collaborative efforts incorporate harm reduction strategies and health equity training, improving community-based treatment outcomes.

Medications for Substance Use Disorder treatment (also known as Medication-Assisted Treatment) practices in emergency departments highlight the importance of continuity in care through expedited referral systems. Integrated referral workflows enable effective communication and follow-up, crucial for maintaining treatment continuity and reducing overdose risks.

Overcoming Barriers and Enhancing Care

Successful discharge planning requires incorporating SDoH into strategy development, addressing transportation and socioeconomic barriers hindering access to aftercare. Housing remains a significant stressor, with many "high utilizers" affected by community resource limitations, demanding improved housing and transportation solutions.

By integrating comprehensive social support, fostering collaborative provider efforts, and employing data-driven strategies, healthcare systems can deliver holistic care that empowers individuals. These initiatives pave the way for equitable and sustainable recovery paths, transforming the landscape of inpatient psychiatry and SUD services to support individuals to thrive, not just survive, post-hospitalization.

Training and Development for Health Equity

The PAR program continues as a platform for sharing data through a health equity lens. In 2024, SDoH was explored within PAR strategies across all care levels, a focus that continues with the 2025 inpatient/residential PAR Program.

To support Carelon BH CT's regional network management (RNM) team in engaging providers around health equity, a three-part training, building on previous research and recent data, was provided by an external consultant. This training aims to embed a health equity lens across activities that address disparities in utilization, treatment, and outcomes for HUSKY Health members with substance use, mental health, or co-occurring disorders.

The first two training installments, held on July 10 and August 7, 2024, covered:

- ✓ Concepts, principles, and terms related to health equity.
- ✓ Structural and social drivers of health.
- ✓ Health equity clinical studies.
- ✓ Disparities in behavioral health services regionally and nationally.
- ✓ Communication strategies for provider and community education.
- ✓ Strategies for mitigating/eliminating disparities.
- ✓ Resources for fostering productive health equity discussions with providers.

Integrating SDoH into behavioral health care services is essential for achieving sustainable and equitable outcomes. Through initiatives like comprehensive social support, collaborative provider networks, and PAR program, healthcare systems can tackle barriers such as economic instability and housing issues. Enhancing care continuity with seamless referral pathways reduces risks like readmission and overdose. By focusing on prevention, treatment, and community reintegration, we can transform inpatient psychiatry and SUD services to empower individuals to thrive long-term. These efforts help create a more inclusive and responsive healthcare landscape.

Additional Resources

The After Care Follow-Up (AFU) section on the Connecticut Behavioral Health Partnership's (CT BHP) website was launched in January 2024 to provide resources for behavioral healthcare providers. This initiative emerged from a clinical study and offers tools like the importance of AFU, measurement methods, available services, and provider resources. Effective post-treatment care reduces hospital readmission, enhances continuity, and improves patient outcomes.

The site includes best practices for discharge planning and offers resources categorized by region, focusing on mental health, LGBTQIA+ support, autism, and more. Key programs like First Episode Psychosis, Peer Support, and Intensive Care Management are featured.

For more information, visit the AFU webpage [here](#), or by going to www.ctbhp.com, selecting 'For Providers', and navigating to 'After Care Follow Up (AFU)' from the right-hand menu.

Questions? Contact the CT BHP for support.

CTBHP@carelon.com – Provider Relations

CTBHPRegionalNetworkMangement@carelon.com – RNM Team



CT BHP Community Meetings

Mark your calendars for the HUSKY Health community meetings designed to help members understand and access their benefits. Topics to be covered include:

- ✓ Eligibility for services
- ✓ Administration of the HUSKY Health program
- ✓ Enrollment and re-enrollment processes
- ✓ Covered services under HUSKY Health
- ✓ Finding a healthcare provider
- ✓ Identifying HUSKY Health program partners

There will be five **virtual** community meetings hosted via Webex on the following dates and times:

- ✓ Wednesday, May 7, 2025, from 11 a.m. to 12 p.m.
- ✓ Tuesday, June 10, 2025, from 2 p.m. to 3 p.m.
- ✓ Tuesday, July 15, 2025, from 5 p.m. to 6 p.m.
- ✓ Tuesday, September 30, 2025, from 11 a.m. to 12 p.m.
- ✓ Tuesday, November 18, 2025, from 2 p.m. to 3 p.m.

The CT BHP will send out a formal invitational flyer to register in the coming weeks.



Quick Clicks

- [Bulletin Rewind](#) – Select here to review news and events this past year.
- **Community and Awareness Months**
 - March 2025:
 - Disability Awareness Month
 - Self-Harm Awareness Month
 - International Women’s Day – March 8th
 - Transgender Day of Visibility - March 31st
 - April 2025:
 - Stress Awareness Month
 - National Counseling Awareness Month
 - World Health Day - April 7th
 - May 2025:
 - Mental Health Awareness Month
 - National Anxiety Month
 - Asian American and Pacific Islander Awareness Month

We Want to Hear from You!

Do you have an article, opinion piece, or provider event you would like to submit to the CT Behavioral Health Partnership Newsletter? We would be delighted to hear from you.

We aim to ensure that our tri-annual newsletter offers articles that cover topics related to our providers’ work with children and adults, as well as special features that reflect ongoing developments in our families, communities, and state.

We encourage you to share your thoughts, ideas, comments, suggestions, and information about upcoming events and community developments. **Submit them to ctbhp@carelon.com.**

Thank you!

