



## SUPPORTING LOCAL SOLUTIONS FOR BETTER PERINATAL BEHAVIORAL HEALTH

A Perinatal Behavioral Health Learning Collaborative & Grant Program

**IMPACT BH** helps Colorado communities strengthen and integrate their local perinatal behavioral health services through a 12-month learning collaborative and grant program. The program brings together **clinical, community-based and public health partners** to catalyze meaningful and sustainable change for perinatal women, infants, and families.

This document will guide you through the program's structure, components and how to get involved in FY27 (July 1, 2026 - June 30, 2027)



## TABLE OF CONTENTS

Why IMPACT BH.....3

How IMPACT BH  
Operates .....5

IMPACT BH Learning  
Collaboratives .....6

Perinatal Navigation Grants.....9

Expression of Interest Timeline  
and Requirements .....10



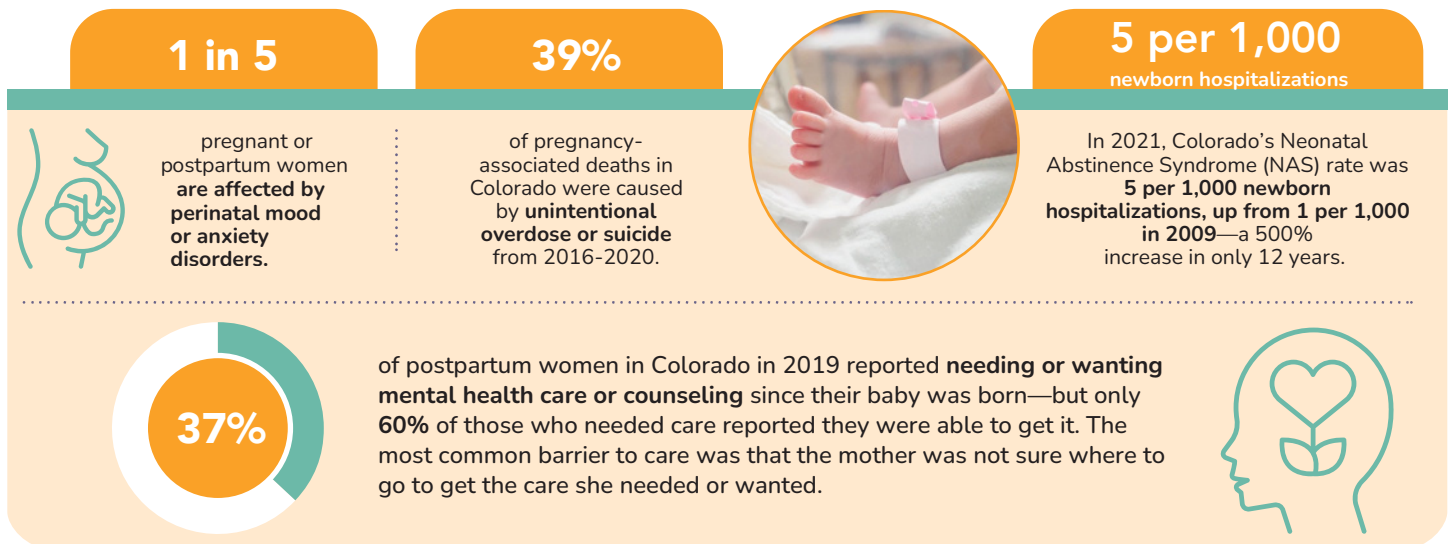


IMPACT BH is a training, technical assistance, and grant program led by the Colorado Perinatal Care Quality Collaborative (CPCQC) in partnership with the Colorado Behavioral Health Administration. The program helps communities strengthen systems of care for pregnant and postpartum women experiencing mental health, substance use and/or health-related social needs

**Preparing for and welcoming a new baby can be a whirlwind.** Learning how to feed the baby, changing diapers around the clock, and operating on little sleep can strain even the most confident families. For pregnant and postpartum women who are struggling with their mental health or substance misuse, finding the treatment they need—on top of juggling the demands of caring for a child—can feel impossible.

Fortunately, there are steps communities can take to ensure women can access treatment or support for their behavioral health—when and where they need it. The IMprove Perinatal Access, Coordination, and Treatment: Behavioral Health program (IMPACT BH) strengthens connections and collaboration among organizations serving pregnant and postpartum women, infants, and their families—weaving a tight web of support to ensure no family in need of behavioral health services falls through the cracks

▶ **THE DATA ARE CLEAR:** there is an urgent need to improve access to treatment and support for mental health and substance use among pregnant and postpartum women.



## WHY IMPACT BH MATTERS

Successful behavioral health care doesn't happen in a vacuum. It's the product of a collaborative, integrated system that helps mothers and infants access high-quality services in the places that are right for them.

Throughout pregnancy and the postpartum period, parents may receive services from a hospital, a doctor's office, or other organizations based in the community. IMPACT BH supports these partners in working together—offering training and resources through a 12 month learning collaborative and grant program—to make sure families receive the best possible behavioral health care and support.



## HOW THE IMPACT BH PROGRAM WORKS

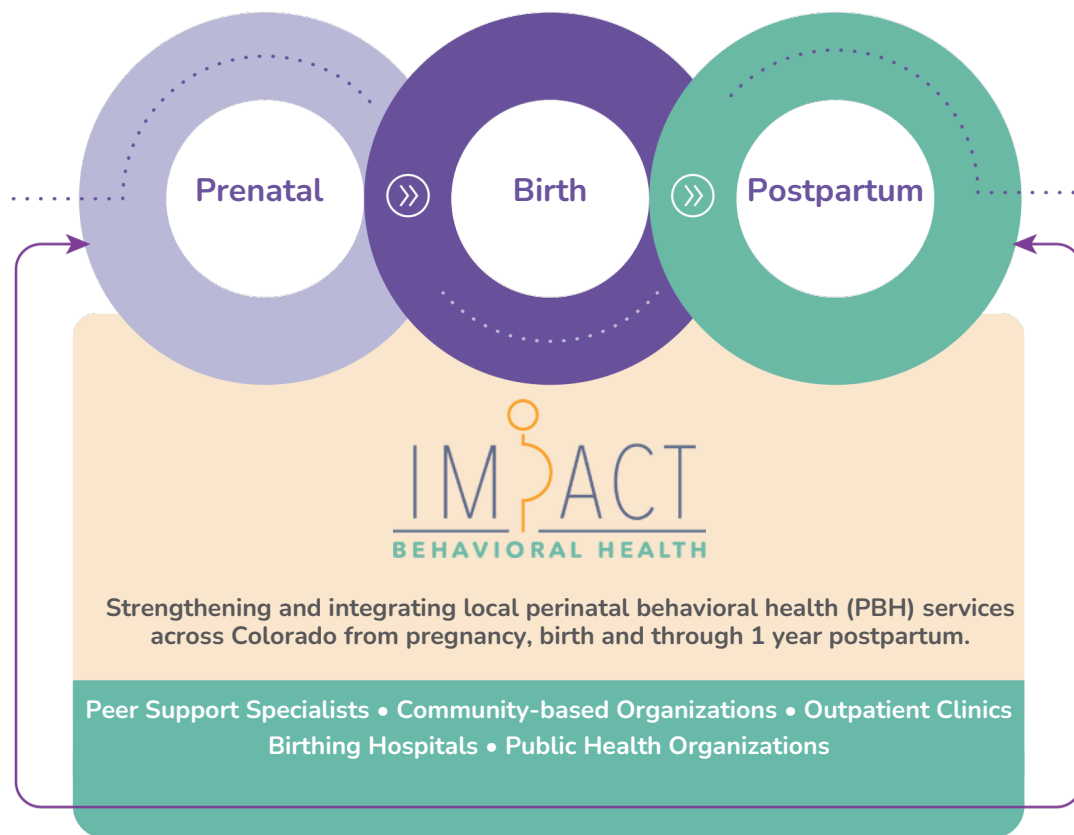
IMPACT BH helps communities build a strong system of support for families in three ways:

- 1 **Increase early detection and effective response to perinatal mental health and substance use needs** by strengthening screening, brief intervention, and referral to treatment (SBIRT) practices across clinical and community settings. IMPACT BH offers a quality improvement learning collaborative and associated quality improvement coaching for counties on the best ways to identify perinatal behavioral health disorders and refer maternal and infant dyads to the type of care they need.
- 2 **Improve timely and appropriate access to care** by expanding community-based perinatal navigation services. Perinatal navigation helps maternal and infant dyads connect to vital services when they need them. Navigation can be provided through peer support providers, community health workers, doulas, home visitors, or other navigation providers.
- 3 **Establish and sustain local Perinatal Continuum of Care (PCOC) groups** to address persistent service gaps, strengthen cross-sector coordination, and support local adoption of best practices. IMPACT BH brings together local networks of community-based and clinical providers to improve referrals and care for mothers and infants within their communities.

TO SEE MORE MATERNAL HEALTH DATA FOR COLORADO, SEE THE [COLORADO FACT SHEET - MATERNAL MENTAL HEALTH LEADERSHIP ALLIANCE AND MATERNAL MORTALITY IN COLORADO, 2016-2020](#)

IMPACT BH leads a learning collaborative initiative involving the **Colorado Perinatal Care Quality Collaborative (CPCQC)**, **local perinatal navigation providers**, **outpatient clinical settings**, **birthing hospitals**, and **additional key partners across local perinatal continuums of care**. Strong collaboration and active engagement across the perinatal continuum of care are essential to the program's success.

Together, partners participate in a learning collaborative to implement universal perinatal mental health and substance use disorder (SUD) SBIRT practices. In addition, local communities receive grants to expand vital perinatal navigation services. Across local communities, partners work together to increase connections to statewide supports and advance sustainable solutions.



### COLORADO PERINATAL CARE QUALITY COLLABORATIVE (CPCQC)

CPCQC is Colorado's leading organization for improving perinatal health outcomes, partnering with medical organizations, providers, policymakers, patients, and community partners to advance the quality, consistency and reach of care. Through structured quality improvement (QI) learning collaboratives, CPCQC engages 100% of Colorado's labor and delivery units in improving perinatal care. Recognizing that high-quality care must extend beyond hospital settings, IMPACT BH expands CPCQC's support into communities, strengthening connections across perinatal behavioral health systems to support families throughout the full perinatal period.

Beginning in FY27, CPCQC plans to pilot a new learning collaborative model through IMPACT BH.

The pilot learning collaboratives will be designed to help participating Colorado communities **increase early detection and effective response to perinatal mental health and substance use needs** by strengthening screening, brief intervention, and referral to treatment (SBIRT) practices across local clinical and community settings. The pilot quality improvement learning collaboratives will offer training and technical assistance from subject matter experts on a variety of perinatal behavioral health SBIRT topics, including:

- Perinatal mood, anxiety and substance use disorders identification through universal screening
- Identification of and response to health-related social needs during the perinatal period
- Brief intervention, including for complex clinical concerns such as suicidal ideation and intimate partner violence
- Referral to local, statewide, and national resources to help maternal and infant dyads access appropriate support
- Sustaining SBIRT advancements through improved workflows, billing practices, and connection to statewide resources

#### Key components of the pilot FY27 IMPACT BH Learning Collaboratives:

- **Evidence-based clinical curriculum adapted from Alliance for Innovation on Maternal Health (AIM)** perinatal substance use disorder, perinatal mental health conditions, and postpartum discharge transitions patient safety bundles
- **Shared learning across clinical and community settings** to help providers work from the same evidence-based SBIRT guidance, strengthen cross-county communication, and collaboratively address implementation challenges in real time
- **Incorporation of peer support and lived experience** by connecting teams to perinatal peer services and engaging patients and families as partners in improvement, ensuring care improvements reflect community needs and realities
- **Facilitated connections to statewide programs and supports**, such as Colorado PROSPER, Prenatal Plus, CU Women's Behavioral Health, BHASOs, and more, ensuring clinics and community partners can leverage expert guidance and statewide infrastructure beyond the grant period

---

*Note: CPCQC is co-designing the pilot learning collaboratives with subject matter experts, former IMPACT BH partners, and patients with lived experience prior to the FY27 IMPACT BH grant cycle. CPCQC invites prospective and incoming IMPACT BH communities to help shape the pilot learning collaborative structure and data collection practices.*

IMPACT BH achieves its greatest impact when the entire local perinatal care network participates. Collective county engagement allows teams to coordinate care across the perinatal continuum, enhance local behavioral health capacity, and drive meaningful improvements in SBIRT and maternal behavioral health outcomes together.

**Full participation from both clinical and community partners is required to bring IMPACT BH to a county or region. Specifically, CPCQC asks that the following providers participate in IMPACT BH learning collaborative:**

---

### PERINATAL NAVIGATION PROVIDER(S) - REQUIRED

#### Why:

Perinatal navigation providers are vital partners in addressing rising perinatal mental health and substance use complications. Navigators help families locate resources, address barriers to accessing treatment, and access wrap-around support. Perinatal navigators often support families as peer support, care coordinators, community health workers, home visitors, doulas, or other types of often community-based providers.

As trusted partners, navigators are uniquely capable of identifying perinatal mental health and substance use complications. However, perinatal navigators often lack the training, technical assistance, and clinical support needed to confidently identify and respond to mental health and substance use complications within their scopes of work.

#### Partner(s) Requested:

Local perinatal home visiting providers (ie: Nurse Family Partnership, Parents as Teachers, Family Connects, etc.), peer support services, doula providers and/or other local providers offering perinatal navigation support

---

### OUTPATIENT CLINIC(S) - REQUIRED

#### Why:

Perinatal families often receive care across multiple settings, including primary care clinics during both the prenatal and postpartum periods. Traditional obstetric care typically ends around six weeks postpartum, leaving a gap in support for new mothers. Outpatient clinics play a critical role in filling this gap. Pediatric and family medicine clinics, which continue to see infants throughout the postpartum period, are uniquely positioned to identify maternal mental health and substance use challenges, and connect mothers to appropriate care and resources.

#### Clinic(s) Requested:

Local family medicine, pediatric, and/or obstetric clinic(s) serving perinatal women--especially those most at risk for developing perinatal mental health and/or substance use complications



## ADDITIONAL PARTICIPANTS - ENCOURAGED

The following local entities are encouraged to participate in IMPACT BH learning collaboratives. A community's exact list of learning collaborative participants will depend on local services available.

- Public Health Department, Department of Human Services / CPS
- Emergency Department
- Hospital L&D
- Midwives and local homebirth providers
- Local Certified Community Behavioral Health Clinic (CCBHC)
- Local patients with lived experience
- Local perinatal, infant, and early childhood mental health provider(s)
- Local substance use provider(s) and peers
- Local Tribal governments and/or Native leaders
- Additional local perinatal health providers (ie: lactation support, women's health physical therapy, etc.)
- Additional local Health Related Social Needs (HRSN) services providers (ie: local family resource center, sober living)
- Additional local providers supporting women and families disproportionately impacted by perinatal behavioral health complications

## Data Collection

IMPACT BH collects data at baseline, quarterly, and upon grant completion to monitor progress, evaluate outcomes, and support continuous program improvement. **CPCQC is refining specific data collection requirements in advance of the FY27 grant cycle.** However, at a high-level, CPCQC anticipates collecting the following data from key perinatal navigation and outpatient clinic learning collaborative participants:

Structure Measure Examples
<ul style="list-style-type: none"> <li>• Use of validated substance use disorder and mental health screening tools (Yes/No)</li> <li>• Established referral pathways for perinatal behavioral health and HRSN challenges (Yes/No)</li> </ul>
Perinatal Behavioral Health Measure Examples
<ul style="list-style-type: none"> <li>• Number of perinatal clients screened for mental health and substance use using validated tools</li> <li>• Number of positive mental health and substance use screens</li> <li>• Number of perinatal patients with positive mental health and/or substance use screens who received referrals to treatment</li> </ul>
Health Related Social Needs (HRSN) Measures Examples
<ul style="list-style-type: none"> <li>• Number of perinatal clients screened for HRSN</li> <li>• Number of positive HRSN screens</li> <li>• Number of patients with positive HRSN screens who received referrals to resources</li> </ul>



IMPACT offers perinatal navigation grants to support community-based initiatives in counties participating in the IMPACT learning collaboratives to expand local perinatal navigation services addressing mental health and substance use needs during pregnancy and postpartum. Perinatal navigators—including peer support services, community health workers, doulas, and home visitors—help families overcome barriers to care, access resources, and receive wrap-around support. Funding will strengthen navigator capacity through training, technical assistance, and clinical connections to better identify concerns and link families to care. Grant amounts will depend on available funding in FY27.

Funding may be used for a variety of purposes, including expanding local perinatal navigation services, launching new local support groups, training community members to become perinatal peers, and more

Funding may not be used to fund services billable through other funding sources, for social determinants of health (SDoH) needs, or unapproved travel

### IMPACT BH Perinatal Navigation Grants in Action

#### Garfield County (July 2022 - June 2024)



- **Great Expectations**—one of Colorado's first home visiting organizations serving Roaring Fork Valley families—expanded its programs to include a dedicated perinatal navigator. This navigator established referral partnerships with the local community hospital and affiliated clinics. As a result, Great Expectations now more effectively meet families' needs and provides comprehensive support throughout the perinatal period.



- **Valley Settlement** is a grassroots organization that provides comprehensive family services including perinatal and parenting programs, created by and for the immigrant and Latina/o community. Valley Settlement developed and piloted a Promotoras de Salud model, a community health worker program to provide essential resources and education for perinatal Latina/o families in their community. In addition, they built out a team of maternal peers through the [Alma](#) program to better support moms struggling with mental health conditions during the perinatal period.

#### Montrose County (July 2024 - June 2025)



- **Hilltop Community Resources** expanded their successful B4 Babies & Beyond program from Mesa County to serve families residing in Montrose County. B4 Babies & Beyond helps parents and caregivers get ready for a healthy start by offering free support with prenatal care, health coverage, nutrition, and connections to local resources. The B4 Babies navigation team enhanced their ability to respond to clients in need of behavioral health support by implementing depression and substance use screenings and referring families to timely behavioral health support within their community.



I had an amazing experience. [My B4Babies Navigator] really helped me feel confident in my new pregnancy. I am so grateful for these resources in the community”

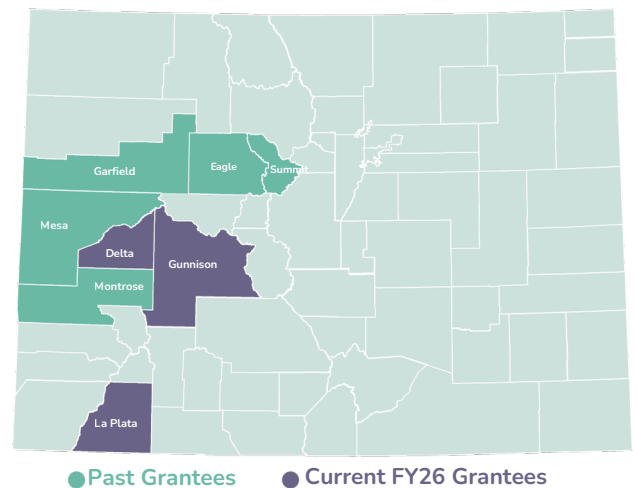
– B4Babies client

This collective impact program depends on strong collaboration and coordination among clinical providers, community-based organizations, public health agencies, and more. As a systems-level intervention, IMPACT BH is most effective when implemented with active engagement across the local perinatal continuum of care (PCOC). Together, IMPACT BH partners work to strengthen local behavioral health services and SBIRT practices for pregnant and postpartum women.

**Strong candidate communities for IMPACT BH share the following characteristics. However, CPCQC encourages all interested communities to apply.**

- Are classified as rural or frontier by the Colorado Department of Health Care Policy and Financing (HCPF)
- Have not previously participated in IMPACT BH.
- Demonstrate a commitment to strengthening perinatal behavioral health care and interest in the full continuum of care through their Expression of Interest (EOI).
- Confirm perinatal navigation and outpatient clinics ability to participate in one learning collaborative and/or coaching call per month
- Closest birthing hospital(s) are participating in a CPCQC perinatal behavioral health quality improvement program (Turning the Tide or SPARK). *Note: Many Colorado counties do not have a local hospital with a labor and delivery unit. If this describes your county, we encourage you to connect with the closest counties that have local labor and delivery unit(s) to partner together through IMPACT BH*

**IMPACT BH – Counties Served**



CPCQC seeks to provide prospective communities and regions with clear guidance on key dates and next steps in the IMPACT BH expansion process. All dates are in Mountain Time (MT) and are subject to change based on program funding and contract approvals.

---

### Expression of Interest (EOI) Process

- **EOI Request Release Date:** Monday, February 2, 2026
  - **Questions Due:** Friday, February 20, 2026, by 5:00 PM MT
    - Submit questions via email to: [khibshman@cpcqc.org](mailto:khibshman@cpcqc.org)
  - **Responses to Questions Posted:** Wednesday, February 25th, 2026
  - **EOI Submission Deadline:** Friday, March 6, 2026, by 5:00 PM MT
    - Submit EOIs via email to: CPCQC Director of Integrated Behavioral Health, [khibshman@cpcqc.org](mailto:khibshman@cpcqc.org)
  - **Anticipated Notification of Communities Invited to RFP:** Mid-March March 2026
- 

### Office Hours

CPCQC will host **two virtual office hours** for prospective communities to ask questions and learn more about the EOI and IMPACT BH program:

- Thursday, February 12th, 2026, from 11:00 - 11:50 PM MT. [Zoom Link](#)
  - Thursday, February 26th, 2026, from 1:00 - 1:50 PM MT. [Zoom Link](#)
- 

### Next Steps: Request for Proposals (RFP) Process

Communities selected through the EOI process will be invited to respond to the official RFP to procure the local entity that will receive and manage IMPACT BH perinatal navigation grant funding.

- **RFP Period:** April 2026
- **Contracting:** May 2026
- **FY27 Grant Cycle Launch:** July 1, 2026 (dependent on CPCQC reprocurring the IMPACT BH backbone contract with the Colorado Behavioral Health Administration and receiving funding for program expansion)

### EOI INSTRUCTIONS

Please respond to the following questions regarding your community or service area's interest in and readiness to participate in IMPACT BH.

- EOs must be written collaboratively. **CPCQC will accept one EOI per county or service area, representing all participating clinical and community partners.**
- Responses should be narrative format and submitted as a PDF.
- **EOIs should not exceed six pages.**
- Clearly identify all partner organizations involved in the submission and their respective roles
- Include contact information for the primary EOI lead who can serve as CPCQC's point of contact for questions or follow-up.
- **Submit completed EOIs by Friday, March 6th, 2026, by 5:00 PM MT to [khibshman@cpcqc.org](mailto:khibshman@cpcqc.org)**

---

### NARRATIVE QUESTIONS

1. Please describe the collective of organizations submitting this EOI, including each partner's mission, scope, relevant experience supporting perinatal populations
2. Describe your community or service region's perinatal mental health and substance use needs, including key service gaps, opportunities for improvement, and existing strengths or resources
3. IMPACT BH seeks to strengthen connections across local hospital, clinic, and community settings. Where do perinatal women in your community give birth? Which CPCQC hospital quality improvement program(s) are nearby hospital labor and delivery units participating in? How could IMPACT BH help enhance hospital, clinic, and community continuity in your area?
4. Explain how your community or service region would benefit from participating in the IMPACT BH learning collaborative, which partner organizations and staff would be involved, and confirm your collective's ability to engage in at least one monthly virtual learning collaborative call and/or quality improvement coaching session.
5. Describe how your community or service region would invest in or expand local perinatal navigation services through IMPACT BH, including coordination across partner organizations and the types of navigation providers involved (e.g., peer support specialists, doulas, home visitors, etc.)
6. Tell us about how your lead perinatal navigation provider(s) and outpatient clinic(s) currently collect and track perinatal behavioral health SBIRT practices. How would you meet the IMPACT BH data requirements, and what approaches would you use to handle challenges in reporting data to CPCQC?
7. Describe how your organizations collectively serve vulnerable populations, including mothers and infants with higher social, economic, or health-related risk factors.



### ACKNOWLEDGMENT OF PROGRAM CONTINGENCIES AND REQUIREMENTS

Please indicate in your EOI submission that your collective understands and acknowledges the following:

- **Contracting:** Participation in IMPACT BH, access to perinatal navigation grant funding, implementation of learning collaboratives, and all related program activities are contingent upon CPCQC maintaining the IMPACT BH backbone contract with the Colorado Behavioral Health Administration (BHA) and the availability of program funding.
- **Timeline:** Program launch and related activities are contingent on the BHA contracting process, and the start of the FY27 grant cycle may be delayed depending on BHA's timeline.
- **Funding:** IMPACT BH funds are federal dollars, and all activities must comply with applicable Office of Management and Budget (OMB) requirements.
- **Reporting:** CPCQC submits monthly, quarterly, and annual reports to the BHA. Data collection requirements are subject to change prior to the FY27 grant cycle launch. CPCQC anticipates requiring perinatal navigation providers and outpatient clinics to submit designated perinatal behavioral health SBIRT data on a quarterly basis.
- **EOI Submission:** Submission of this EOI does not guarantee selection, funding, or participation. All program activities are subject to BHA and CPCQC decisions regarding funding, contracts, reporting, and federal compliance. Selected communities will be invited to participate in a subsequent RFP process to procure the local entity responsible for managing IMPACT BH funds, including monthly invoicing and reporting on funds spent in accordance with OMB requirements.

### SIGNATURES & CONTACT INFORMATION

Please include signatures and contact information from all local entities interested in participating in IMPACT BH in your community or service area. *Note: Applicants may continue to strengthen local perinatal continuum of care connections after submitting an EOI*

#### Perinatal Continuum of Care Signatures - Required

- Perinatal Navigation Services
- Outpatient Clinic Provider(s)

#### Perinatal Continuum of Care Signatures - Encouraged

- Public Health Department & Human Service Department
- Hospitals: Emergency Department and L&D
- Midwives and local homebirth providers
- Local Certified Community Behavioral Health Clinic
- Local perinatal, infant, and early childhood mental health provider(s)
- Local patients with lived experience
- Local substance use provider(s) and peers
- Local Tribal governments and/or Native leaders
- Additional local perinatal health providers
- Additional local Health Related Social Needs (HRSN) services providers
- Additional local providers supporting women and families disproportionately impacted by perinatal behavioral health complications

## EOI REVIEW PROCESS

EOIs will be reviewed by a CPCQC committee of staff with expertise in quality improvement, perinatal behavioral health, community partnerships, and rural health.

CPCQC may request clarification, additional information, or follow-up conversations with submitting communities.

Selection for invitation to the subsequent RFP process will be based on demonstrated alignment with the IMPACT BH program, readiness and capacity to participate across the local perinatal continuum of care,

---

## RFP PROCESS

Communities selected through the EOI process will be invited to respond to a formal Request for Proposals (RFP) to identify the local entity responsible for managing IMPACT BH perinatal navigation grant funding.

The RFP will not select learning collaborative participants; those participants will be determined by the community in partnership with CPCQC.

The RFP will outline requirements for grant management, service delivery, data collection, and reporting in alignment with federal OMB requirements and CPCQC program expectations.

Applicants will be asked to demonstrate organizational capacity, staffing, and plans for implementing perinatal navigation services, including coordination across clinical and community partners.

Selected entities will enter into a contract with CPCQC to receive and manage grant funds, with monthly invoicing and reporting on expenditures and program activities.

Award of funding through the RFP is contingent on BHA funding and contracting decisions, as well as CPCQC review and approval.

---

## CONTACT INFORMATION

For additional information, please contact:

Kylie Hibshman, LCSW, PMH-C  
Director of Integrated Behavioral Health  
Colorado Perinatal Care Quality Collaborative  
[khibshman@cpcqc.org](mailto:khibshman@cpcqc.org)