

KANSAS MENTAL HEALTH COALITION

An Organization Dedicated to Improving the Lives of Kansans with Mental Illnesses

2020 SUMMARY OF KANSAS LEGISLATIVE ISSUES

Each year, the Kansas Mental Health Coalition takes positions on policy issues that advance its mission to improve the lives of Kansans with mental illness. These positions reflect the consensus of our members—over 50 organizations, professionals, and consumers.

Kansas is working to create a stronger public mental health system, and to build an effective continuum of care - one that will no longer struggle to meet the high demand for timely behavioral health care and treatment. 544 Kansans died by suicide in 2017. Too many people are unable to access behavioral health treatment because of a lack of available services or denials by insurance. Youth and families tell us that we have a long way to go to provide the connections and the support close to home that they need. The Coalition commends the 2019 Legislature for beginning to re-invest in behavioral health. Kansas has expanded access to crisis stabilization services and partially restored funding to our community mental health centers. The K-12 Schools Mental Health Pilot is showing positive results. Family First programs are just getting started to provide interventions for families in jeopardy. Peer services will be expanded under new plans by KDADS. There is so much more to do.

This year, the Legislature should finally pass Medicaid Expansion – providing much needed health coverage for hard-working Kansans who fall in the coverage gap – wages too high to qualify for Medicaid and too poor to afford ACA Healthcare premiums. Now is the time to end the moratorium on admissions at Osawatomie State Hospital that has left individuals in crisis on a waiting list. Law enforcement agencies and advocates across the state are calling for an end to this injustice which began June 21, 2015. Our jails house too many people with mental illness, while most communities don't have 24/7 crisis centers or housing programs. Solutions will take time, but we must begin today.

Outpatient Mental Health Services: Community based services must be restored and expanded across the State to improve a mental health system that has significant gaps in the continuum of care for people with mental illness and substance use disorders. The Coalition endorses the 2018-19 Mental Health Task Force Report recommendations including additional diversion and crisis services at the community level; new Medicaid codes for tiered community-based services, including residential, supportive housing and intensive outpatient treatment; ending the practice of Medicaid termination when individuals are hospitalized or incarcerated; building more community partnerships for adult and youth services; expanding the opportunities for peer support programs and specialists; developing professional training and accreditation for staff across programs; and creating academic partnerships. ***The Legislature must fulfill the promise to restore mental health reform grants and implement integrated programs for housing, employment and addictions treatment. We must address the needs for youth and children ranging from inpatient beds, to crisis services and meaningful community supports throughout the state.***

Inpatient Psychiatric Services – State Hospitals Crisis: The Kansas Legislature should support and fully fund high-quality psychiatric inpatient services to meet the needs of all Kansans who require this care. Specifically, the Legislature should: 1. End the moratorium by immediately increasing inpatient

psychiatric capacity for voluntary and involuntary admissions as recommended by the Mental Health Task Force Report (36-60 beds within 24 months). 2. Invest in the current state hospitals to stabilize staffing, expand education and training, and restore certification. 3. Fund Regional Crisis Locations and fund them into the future. 3. Provide for continued public/private partnerships for local psychiatric inpatient beds to alleviate the growing demand for state psychiatric hospital beds. 4. Submit Federal Waiver Application for the federal Institution for Mental Disease (IMD) exclusion rule to increase federal reimbursement for inpatient treatment. 5. Implement the recommendations of the 2018 and 2019 Mental Health Task Force Reports which assert that inpatient capacity must expand community-based programs, including crisis stabilization services, substance use disorder treatment and detox services (inpatient and outpatient), and housing resources.

Children and Families: The Kansas Legislature should fund affordable services for ALL children who need health, mental health, and substance use disorder treatment. The federal Family First program matches State funds to achieve better prevention interventions. Whether inpatient or outpatient, Medicaid or private pay, parents must be able to access the services they need at times and locations that work for families. This is imperative to keep children at home and in school, which reduces the need for expensive out-of-home placements - but most importantly, keeps families together. When adults in the family access housing, employment, health and substance use treatment, children need fewer long-term interventions. See the Mental Health Task Force Report and the Children's Continuum of Care Report for more details.

Expand Medicaid: Kansas should adopt the recommendations of the 2018 and 2019 Mental Health Task Force Reports and the Governor's Substance Use Disorder Task Force to expand KanCare eligibility to more Kansans. Expanding Medicaid will close some of the gaps in our behavioral health continuum of care. Inpatient beds, transition programs, and community-based crisis centers struggle to sustain treatment programs for mental illness or addictions for a largely uninsured population. Expanding Medicaid will improve access to behavioral health care statewide for the Kansans who need it most.

Workforce: Kansas must research and develop strategies for building the behavioral health workforce statewide, including following up with 2017 legislation that was passed to add psychiatry to the Medical Student Loan Act as well as amendments to the Nursing Service Scholarship Program to assure that the programs are benefitting behavioral health students and graduates. Kansas should pursue a Workforce Study as recommended by the 2019 Mental Health Task Force Report and invest in peer support – see below. Telemedicine is an important piece of the puzzle and requires additional study, as reimbursement rates must sustain the service.

Peer Support: Kansas should expand access to peer support specialists and peer mentors throughout Kansas. As Kansas invests in services and programs for behavioral health, peer support should be a part of those plans. Whether through Medicaid or agency contracts, Kansas should encourage integration of peer support services (MH) and certified peer mentoring services (SUD) into multiple levels of service, including throughout the public behavioral health system for youth and adults, in our state hospitals, and community based programs for mental illness and substance use disorder treatment. Peer mentoring is a proven service throughout mental health and addictions treatment venues. Youth are asking for peer services as an effective tool to fight the ever-increasing rate of suicides. **Expanding peer services will immediately aid our workforce crisis and create accessible options for families and individuals.**

Mental Health Parity: The recent *Wit v. United Behavioral Health* federal court decision proves what individuals and families have known. Insurance plans routinely deny access to lifesaving treatments for mental illness and addictions. It is time for the State and Federal Governments to provide meaningful oversight in order to assure that Kansas policyholders receive the coverage required by parity statutes.

Medicaid Medication and “Step Therapy”: The Kansas Legislature should protect patients’ access to mental health medications in the Medicaid program by requiring transparent, effective policy development by the Mental Health Medication Advisory Committee. KDHE should reform the Mental Health Medication Advisory Committee process to provide transparency and public access and expand the Committee’s advisory role to include step therapy policies and processes to assure safe and effective prescribing. Additionally, the Coalition supports legislation to establish safety parameters for private insurance step therapy policies. Step therapy requirements are also known as “Fail First” pharmacy restrictions – requiring the individual to first “fail” on other medications. Kansas should follow the lead of states that have adopted safety rules for insurance medication restrictions.

Mental Health and Criminal Justice: The Kansas Legislature must adopt public policy that focuses on: (1) Mental health diversion programs that connect youth and adults with serious mental illness with treatment resources that keep them out of the criminal justice system, including a long-term commitment to Juvenile Justice System Reform passed in 2016; (2) Therapeutic care for offenders who are living with mental illness; and (3) Effective discharge planning to ensure that individuals with serious mental illnesses receive community-based services upon their release. The Coalition supports the efforts of KDHE to expedite Medicaid access after discharge from state hospitals and incarceration.

Housing: The Kansas Legislature should continue to allocate funds for supportive housing options through Medicaid and develop new community partners through supportive and permanent housing grants using the principles of Housing First. Implement recommendations from the Mental Health Task Force Report to maximize federal funding and alternative housing opportunities. Supportive housing is an evidence-based intervention that combines non-time-limited affordable housing assistance with wrap-around supportive services for people experiencing homelessness, as well as other people with disabilities. Stable housing helps vulnerable Kansans achieve recovery and avoid re-hospitalization.

Clubhouse Program Funding: The 2018 Legislature established state funding for Clubhouse Model mental health services that support the Clubhouse Model Program (Wichita Breakthrough Club) as an effective part of the continuum of care, and allow for expansion to communities across the state that determine both a need and capacity to develop Clubhouse model services for people with severe and persistent mental illness. These and other innovative community programs should be expanded and supported with grants or contracts in order to fill in the gaps in our continuum of care.