KANSAS MENTAL HEALTH COALITION

.....Speaking with one voice to meet the critical needs of people with mental illness

Prioritize the Behavioral Health Continuum of Care

Position: Kansas should prioritize the Behavioral Health Continuum of Care – identifying gaps and barriers to care that prevent Kansans from accessing life-saving treatment and supports. Kansas should evaluate and support evidence-based programs that achieve desired outcomes – better serving Kansans.

The Problem: Gaps and barriers to care are harmful to individuals and lead to destructive cycles of hospitalization or incarceration that waste public resources.

State policies should be strategic instead of reactive, striking a balance between community-based services and inpatient care.

Why this matters: Behavioral health programs struggle to sustain treatment for mental illness and addictions for a largely uninsured population. Workforce shortages impact every program. The Coalition commends the Legislature, Governor and state agencies for strategic planning and implementation in recent years to address gaps in the continuum.

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The bottom line: Strategic planning and implementation and working with communities to identify and address local needs is the most effective way to responsibly utilize taxpayer funds and achieve positive outcomes for individuals and families who live with or are at risk of behavioral health conditions. Supporting proven strategies will close many gaps in health care.

CCBHC Implementation: The creation of Certified Community Behavioral Health Centers represents the most significant mental health reform in 30 years. Full implementation of the array of CCBHC services depends on building and training workforce and partnerships within communities. CCBHCs are required to fulfill an array of services unlikely to be performed outside of the public mental health safety net — many for difficult to serve populations. It may be a challenge for the Centers to fulfill these comprehensive roles over time, and will require the support of the state and local governments.

Housing: Support additional housing initiatives across agencies. As rental prices skyrocket and affordable housing inventories shrink, more Kansans are at risk of becoming unhoused. Kansas needs bold initiatives in partnership with cities and counties to confront this problem. KMHC supports HB 2723 and the Governor's plan for \$40 million for infrastructure matching grants. Emergency housing, transitional housing and permanent supported housing are key parts of the continuum.

Crisis Centers: Increase the cap on Lottery Vending Machine Funds for Crisis Services. Regional crisis stabilization centers provide treatment for individuals who can be stabilized without hospitalization. The passage of the Kansas Crisis Intervention Act in 2017 allows for establishment of Crisis Intervention Centers (CICs) that provide targeted interventions and emergency care for individuals experiencing crisis. CICs take involuntary admission, which could reduce the level of demand for state hospital beds

while keeping individuals experiencing a mental health crisis closer to home and for shorter stays.

988: The passage of SB 19 by the 2022 Kansas Legislature was a great success and helped create the suicide and mental health crisis hotline. Call and text volumes continue to increase with good outcomes being measured and reported. Sustainable funding will be necessary over time to fulfill the promises of 988 for prompt referral and follow-up, as well as 24/7 crisis response.

Addictions Treatment: Kansas must improve access to addictions treatment and respond to the increases in substance abuse and overdoses that have occurred with the pandemic. Medication Assisted Treatment, recovery programs, and residential placements for women, men, parents and youth require enhanced reimbursement rates and additional funds for treatment for the uninsured.

Reimbursement Rates: KMHC urges the Legislature and KDHE to evaluate and increase reimbursement rates more often. One example is the rates for SED waiver services which were not increased when other behavioral health rates were increased by the Legislature. Outdated reimbursement rates create disincentives for clinical degrees and services that Kansas families need.

Workforce: A multiprong approach can improve staff retention and increase the number of professionals entering the field. Kansas should add out of state students to graduate student loan program for psychiatry, include Licensed Clinical Psychotherapists and Licensed Masters Level Psychologists as covered disciplines, implement a rural psychiatric residency program, expand clinical education programs for key behavioral health disciplines, and create a behavioral health technician program to be offered by community and technical colleges. Support proposals to streamline licensing.

MHIT for K-12: The Mental Health Intervention Teams pilot program provides mental health in schools, while keeping kids in school, providing year-round support for the child and family, and maximizing use of mental health professionals through provider / school partnerships. KMHC supports establishing the program in statute and expanding access to additional school districts. (Currently operating by proviso)

State Hospitals and State Institution Alternatives: The Coalition is eager to see further capacity expansion throughout the state hospital system and partnerships with community hospitals. We applaud the efforts to date – especially bed expansion and improved salaries and wages, but access to hospital admission is still not where it needs to be. We are monitoring the new regional hospital project and support the additional resources to be built in south-central Kansas. These public/private partnerships should be expanded and supported.

Peer Support: Hiring peer support / peer mentors could strengthen our overall workforce in many venues beyond traditional peer work sites. Another way to improve access to peer support is through expansion of Clubhouse Programs and Consumer Run Organizations with additional funding and support. (See Issue Papers)

Competency Evaluation and Restoration: KDADS is pursuing solutions to the shortage of competency evaluation and restoration access – but the overall numbers are still very poor. Support the funding, staffing, partnerships and resources necessary to address this injustice as soon as possible.

Specialty Courts: Kansas is encouraging local jurisdictions to establish specialty courts. Specialty Courts are also known as treatment courts or problem-solving courts. These courts are designed to lead people out of a cycle with the justice system, encouraging improved self-sufficiency with support.