



KVC Hospitals

Children's Psychiatric Treatment

people matter

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Chairman Waymaster and Members of the Legislative Budget Committee:

My name is Ryan Speier and I am President of KVC Hospitals. I appreciate the opportunity to provide testimony to the committee today.

KVC Hospitals (www.kvchospitals.org) is a nonprofit network of children's psychiatric hospitals and residential treatment facilities in Kansas and Missouri. Each year, we serve thousands of youth ages 6 to 18 who are experiencing depression, anxiety, suicidal thoughts, impacts of childhood trauma, and other behavioral and mental health needs. Our team combines expert and compassionate psychiatric treatment with neuroscience-based resources to help our clients embrace their full potential, build resilience and thrive.

As of October 21, 2019, KVC Hospitals Hays (formerly named KVC Wheatland Hospital) is operating as an all-psychiatric residential treatment facility (PRTF) and has had to discontinue its inpatient acute beds. Inpatient acute hospitalization provides shorter-term treatment and stabilization for youth in a mental health crisis and the average length of stay is 5 to 7 days. In a PRTF, youth receive intensive clinical services in a structured, home-like environment longer-term to practice skills and the average length of stay is 60 to 90 days.

In 2009, the state of Kansas recognized a lack of youth psychiatric services in western KS and was unable to identify a sustainable model for a stand-alone acute hospital. Their solution was to create an RFP for a dually-licensed, Class 1, psychiatric residential treatment facility (PRTF) to serve both short-term acute and longer-term residential patients. KVC Hospitals was awarded this contract in 2010.

This allowed us to combine staff and operational costs as youth in our acute and residential programs participated in separate treatment programs but same-gender youth within appropriate age range were able to share bedrooms at night time.

Two years ago, the State mentioned the Centers for Medicare & Medicaid (CMS) might discontinue dual licensing. At this point, KVC began discussions with the Kansas Department for Aging and Disability Services (KDADS) to determine if there was a solution that would satisfy new regulations, should that decision come to



fruition. KVC was honest with KDADS and local stakeholders that if this new regulation was enacted, we would not be able to sustain a stand-alone acute unit.

Unfortunately, a solution could not be determined and in February 2019, KDADS told KVC that the CMS mandate was being enacted and by April 1, 2019, we had to operate completely separated units, effectively ending our shared operation model. The building upgrades necessary to comply with the new regulations could be in excess of \$1 million and we would need continued funding to help us sustain overhead costs.

If policymakers could create a line item in the State's budget, similar to funding provided for adult state psychiatric hospitals, that would assist with overhead costs and KVC would be open to exploring that as a sustainable operation.

Children in Kansas urgently need more psychiatric treatment options for acute hospitalization and psychiatric residential treatment facilities/PRTFs. As part of a greater state-wide solution, KVC opened a children's psychiatric hospital in Wichita with 54 acute beds that can serve families in southwestern Kansas, due to many of these counties being nearly equal distance to Hays and Wichita. Additionally, our transition in Hays includes plans to add beds for a total of 50 PRTF beds, which will help reduce wait times for the 150 children currently on the wait list for PRTF services.

KVC Hospitals is the only organization in Kansas that will increase BOTH types of treatment options in 2019. Between the opening of KVC Hospitals Wichita and adding PRTF beds at KVC Hospitals Hays, we will have added 42 new acute beds and 38 new PRTF beds in the state. This combined increase of 80 new beds to serve children experiencing mental health challenges will be done 100% through KVC's private fundraising efforts. No state funding or tax dollars have been used to date.

Our mission has always been to serve the most vulnerable children in Kansas, and we will continue to do so in Hays. However, we no longer have the option to do this with acute services due to changes from CMS and the State. While we do not agree with the changes to the dual-licensed facility and are confident that for 10 years we have operated safely and effectively, we must adjust.

Our proven commitment to Kansas children and families has been shown in the past as we have worked without payment at times and relying on private fundraising to add more acute beds in Kansas City and Wichita at no cost to the State. We are hopeful all our efforts to add beds and services in Kansas will continue to show improvements for children in all communities.

Thank you again for this opportunity to provide testimony. I would be happy to answer any questions.