



THE MEADOWS MENTAL HEALTH POLICY INSTITUTE

Mental Health in Texas After the 85th Legislature

RHP 9 Learning Collaborative

August 17, 2017

About MMHPI

■ History

- The Meadows Mental Health Policy Institute traces its origins to the vision of The Meadows Foundation and its philanthropic leadership throughout the state of Texas on mental health and other vital public issues.

■ Mission

- To provide independent, non-partisan, and trusted policy and program guidance that creates systemic changes so all Texans can obtain effective, efficient behavioral health care when and where they need it.

■ Vision

- For Texas to be the national leader in treating people with mental health needs.

■ Key Principles

- Accessible & effective behavioral health care
- Accountability to taxpayers
- Delivery through local systems & collaboration
- Data driven quality outcomes
- Necessary robust workforce

Accomplishments of the 85th Legislature

Address the Needs of Today:

1. Maintain and build on past legislative accomplishments.
2. Begin to address our aging state hospital infrastructure.
3. Embrace a “smart justice” approach to mental illness.
4. Expand mental health care capacity for children with high needs in the foster care system.

Begin to Build the Integrated Systems of Tomorrow:

1. Provide monitoring and enforcement to make parity a reality.
2. Focus on early intervention to get ahead of the curve.
3. Continue to address mental health workforce shortages.

Today #1: Maintain, Build on Past Gains

SB 1 (Nelson) maintained current programs and increased mental health investments, including:

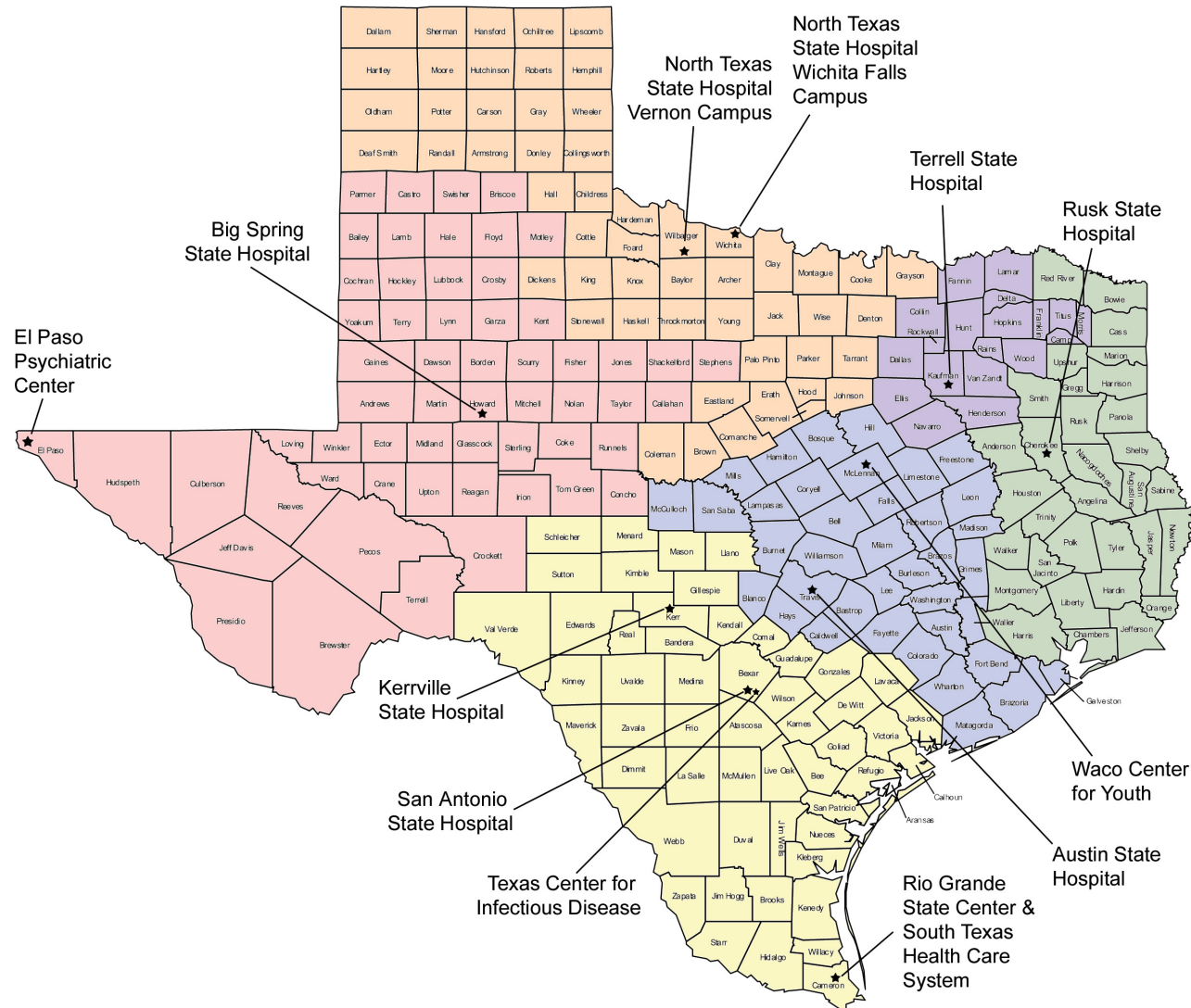
- Major investments in state hospitals – \$300 million for new state hospital construction and \$66.3 million for state hospital critical repairs, plus ongoing funds:
 - \$24.8 million to maintain FY 2017 state hospital services.
 - \$10.2 million to increase maximum security forensic capacity at North Texas State Hospital – Vernon (24 beds).
 - \$10 million to maintain level funding for the purchase of psychiatric hospital beds.
 - \$3.1 million to increase contracted rates for community and private psychiatric hospital beds.
- \$62.6 million to eliminate/prevent waiting lists and address population growth/equity for community mental health services.

Today #2: Begin to Address our State Hospitals

We need to replace aging state hospitals with state-of-the-art medical facilities optimally positioned to serve people well and support transitions out of care back to where they live.

Austin State Hospital (1861)	Big Spring State Hospital (1938)
North Texas State Hospital – Wichita Falls Campus (1922)	El Paso Psychiatric Center (1996)
Rusk State Hospital (1919)	Kerrville State Hospital (1951)
San Antonio State Hospital (1892)	North Texas State Hospital – Vernon Campus (1969)
Terrell State Hospital (1885)	Rio Grande State Center (1962)
	Waco Center for Youth (1919)

State Hospital Catchment Areas



State Hospital Infrastructure

HHSC Rider 221. New Construction of State Hospitals. This rider defines a **three-phased approach** to improve the state hospital system in the current and future biennia.

- HHSC is required to develop a **comprehensive inpatient mental health plan** to expand inpatient capacity over the next three biennia.
- **New construction expenditures** are contingent on approval from the **Legislative Budget Board** and the **Governor**.

HHSC Rider 179. State Hospital Planning. HHSC may partner with public or private entities, including **health-related institutions**, neuropsychiatric care institutions, and other health care providers in the catchment area to develop a master plan.

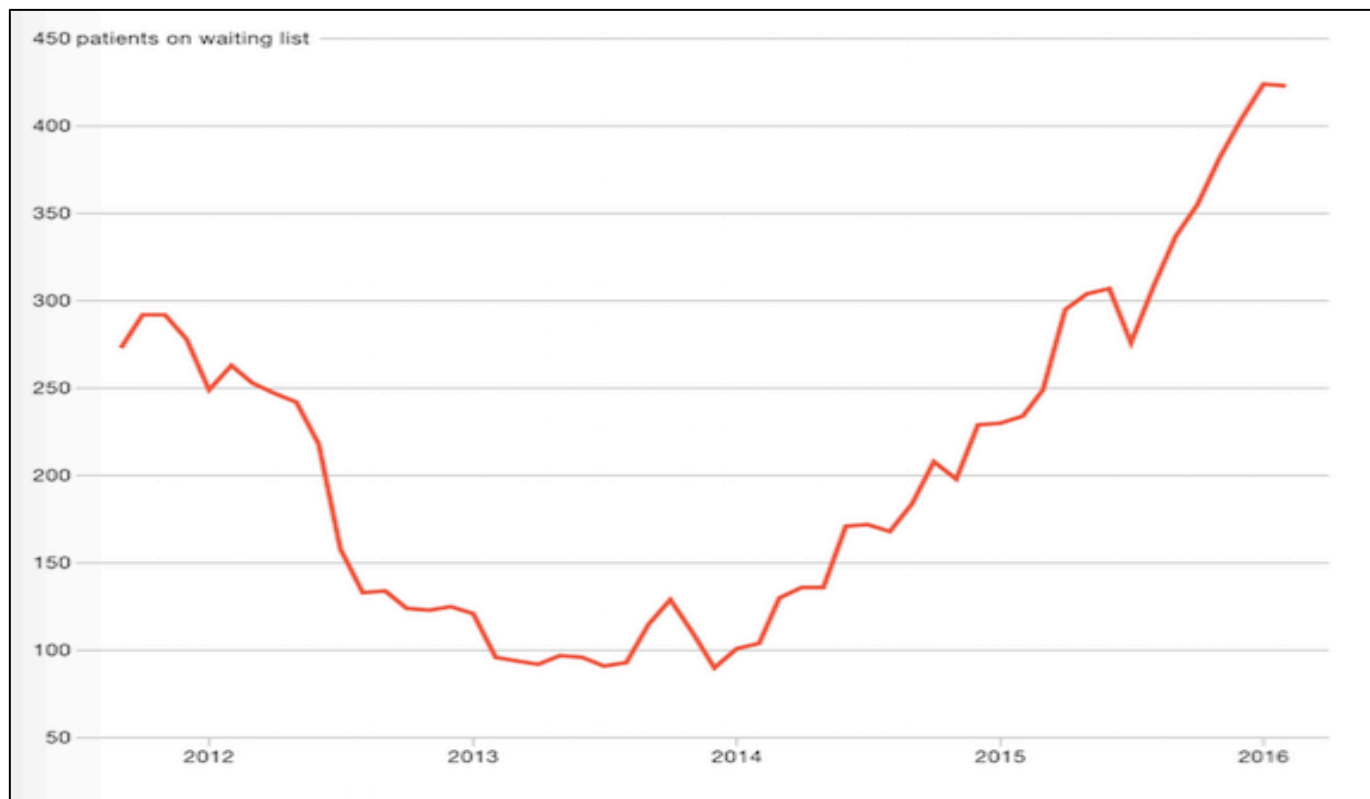
Today #3: Helping Communities Managing People with Complex Health Needs – SB 292

Creates a \$37.5 million grant program to reduce recidivism, arrest, and incarceration among individuals with mental illness, plus \$10 million dedicated to Harris County.

- Collaboratives must include the **county government**, a **local mental health authority** serving that county, and each **hospital district**, if any, located in the county.
- In **FY 2018**, only collaboratives that include a county with a **population of 250,000 or more** may apply.
- Applications are due no later than **September 30**.
- The program requires a **100% match** in counties with 250,000 people or more and a **50% match** for smaller counties.

Forensic Commitment Waiting List

- **Increasing:** The waiting list more than quadrupled since 2013.
- **Aren't we spending more now on treatment?** Yes, but the focus has been on waitlists and overall numbers, not intensive care.



Today #3: Helping Communities Managing People with Complex Health Needs – HB 13

Creates a \$30 million grant program to support community mental health programs that provide services and treatment to individuals experiencing mental illness.

- 50% is reserved for counties under 250,000 people.
- Only nonprofits and governmental entities may apply.
- A letter of support is required from each local mental health authority with a geographic service area covered by the proposed community mental health program.
- The program requires a **100% match** in counties with 250,000 people or more and a **50% match** for smaller counties.

Other Important Supporting Statutes

- **SB 1326** (Zaffirini) implements multiple recommendations from the **Texas Judicial Council, Mental Health Committee**, including:
 - Enhanced timelines for **identifying mental illnesses and intellectual/developmental disabilities** under Article 16.22.
 - Puts additional structure in place for Class B misdemeanants under Article 46B.
 - **Broadens the range of competency restoration options** to include routine use of outpatient competency restoration and allow limited, high-quality jail-based competency restoration.
- **HB 337** (Collier) lets counties **suspend** (rather than terminate) the **Medicaid eligibility** of individuals confined in a county jail.
- **SB 344** (West) enables **EMS personnel to provide transport** to mental health facilities in cases deemed safe by peace officers.

Today #4: High-Needs Children in Foster Care

SB 74 (Nelson) streamlines **credentialing requirements** for providers to improve access to behavioral health services for **high-needs children**.

SB 1 (Nelson) includes **\$2 million** to establish a **grant program** to increase access to targeted case management and rehabilitative services for **high-needs children** who are in the **child welfare system**.

- The purpose is to **cover start-up costs**.
- The grants can help **new providers become credentialed** to provide care, or help **existing providers expand capacity**.
- The program requires a **local match** based on the entity's **geographical location**.

Tomorrow #1: Make Parity a Reality

HB 10 (Price) expands the state's **parity enforcement** authority and designates an **ombudsman for behavioral health care access**.

- Statute includes **mental health and substance abuse services**.
- The statute requires parity of benefits for both:
 - **Quantitative treatment limitations** based on accumulated amount, such as coverage days, visits, copays, deductibles, out-of-pocket expenses, coinsurance, or annual / lifetime limits.
 - **Non-quantitative treatment limitations** that limit the scope or duration of treatment in some other way.

Tomorrow #2: Early Intervention

- **HB 13** (Price) **grant program** can be used to **address local priorities related to early intervention**, including expanding First Episode Psychosis treatment access, school-based services, and integrated care.
- **HB 1600** (Thompson) provides reimbursement for **adolescent mental health screenings** at Texas Health Steps annual medical exams, each year, starting at age 12.
- **HB 2466** (Davis) provides reimbursement under Medicaid and CHIP for a **maternal depression screening** for mothers within their children's first year.

Tomorrow #3: Building Our Workforce

- **SB 674** (Schwertner) creates **fast-track licensure option** for out-of-state **psychiatrists** moving to Texas.
- **HB 1486** (Price) establishes training and certification requirements for **peer specialists** and authorizes Medicaid reimbursement for their services (\$3.4M).
- **HB 3083** (Price) adds **chemical dependency counselors** to the list of eligible mental health professionals under the Loan Repayment Program for Mental Health Professionals.
- **HB 3808** (Clardy) adds **licensed marriage and family therapists** to the list of eligible mental health professionals under the Loan Repayment Program for Mental Health Professionals.

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The truth is: mental illness affects more people than you may think, and we need to talk about it. It's Okay to say..." okaytosay.org
