

NARRATIVE INFORMATION – DA 400
Division of the Budget
State of Kansas

AGENCY NAME: Social and Rehabilitation Services
PROGRAM TITLE: Disability and Behavioral Health Services
SUBPROGRAM TITLE: Mental Health Administration

EXPENDITURE JUSTIFICATION - Mental Health Administration - 32100 (STARS 32200)

Program Overview: Mental Health (MH) Administration manages Kansas’ public mental health service system and purchases needed mental health services for persons who do not have the means to pay, especially adults with severe and persistent mental illnesses (SPMI) and children with a serious emotional disturbance (SED). MH Administration purchases services through grants and contracts (see also program 32200), and Medicaid funding (see program 32400). This funding is provided to community mental health centers, private community mental health providers, consumer run organizations, advocacy groups, and universities. Through its oversight, management, and funding, MH Administration ensures a safety net of public mental health services is provided to those who need them.

MH Administration manages and purchases mental health services based on the vision that persons with mental illness will experience recovery and live safe, healthy, successful, self-determined lives in their homes and communities.

Key life outcome measures for adults include increasing the percentage of persons:

- Competitively employed; and
- Residing in an independent-living setting.

Key life outcome measures for children include increasing the percentage of persons:

- Residing in a family home; and
- Attending school regularly.

MH Administration contracts for assistance with its management and purchasing of Medicaid funded community mental health services through a contract with a managed care organization - Kansas Health Solutions (KHS). KHS contracts with a variety of community mental health providers, including community mental health centers (CMHCs) and other private mental health practitioners, to provide Medicaid funded community-based services. KHS is responsible to ensure persons with mental illness who are Medicaid eligible receive a comprehensive array of timely, quality, accessible, and effective mental health services in all areas of the state. KHS also assists MH Administration by arranging for pre-admission screening reviews for placement requests in psychiatric residential treatment facilities (PRTFs – program 32500), state mental health hospitals, and private in-patient mental health hospital services funded by Medicaid.

In addition to purchasing services, MH Administration strives to improve the lives of persons with mental illness by supporting the development and implementation of person-centered, evidenced-based practices; furnishing direct technical assistance to providers; and utilizing a continuous quality improvement process. MH Administration also establishes and ensures compliance with licensing standards for CMHCs, private freestanding psychiatric hospitals, PRTFs for youth, and adult residential care facilities. MH Administration is responsible for the budget, oversight, and management of nursing facilities that serve persons with mental illness (NFs/MH). MH Administration strives to coordinate mental health services

across all service systems including, but not limited to the juvenile, criminal justice, and child welfare systems. MH Administration provides support for the Governor's Mental Health Services Planning Council role of providing providers independent oversight and recommendations for Kansas' mental health system. MH Administration also works closely with the State mental health hospitals, NFs/MH, PRTFs, private acute care hospitals, and CMHCs to ensure that individuals ready for discharge are provided appropriate community-based services.

MH Services has established the Hospital and Home Initiative to engage providers, advocates, consumers, and family members in developing a strategic plan that focuses on the necessary components of a comprehensive array of mental health services. Some of the action steps identified in this strategic plan and brief progress on these action steps are summarized below:

- Development and implementation of a comprehensive housing plan:
 - A FY 2010 budget enhancement request was submitted for this item. However, due to declining state revenue, the request was not considered. This item was not requested again this year due to limits in state revenue and the need to prioritize enhancement requests to reinstate budget reductions made in FY 2010.
 - A SOAR Training Initiative (SSI/SSDI Outreach, Access, and Recovery) has been implemented to increase and improve mental health consumer access to federal disability, Medicaid, and public/subsidized housing benefits.
 - MH Administration is assisting CMHCs and their local agencies to access Rapid Re-housing funding made available through the American Recovery and Reinvestment Act.
- Paying community hospitals inpatient psychiatric programs to provide more comprehensive inpatient mental health services closer to the person's home community:
 - A FY 2010 budget enhancement request was submitted for this item. However, due to declining state revenue, the request was not considered. This item was not requested again this year due to limits in state revenue and the need to prioritize enhancement requests to reinstate budget reductions made in FY 2010.
 - SRS FY 2010 enhancement request was in keeping with the recommendation from the Governor's closure and re-alignment commission that SRS pursue public/private partnerships with community hospitals to provide inpatient psychiatric treatment.
 - Due to changes in the community hospital Medicaid payment system, reimbursement rates for community hospital inpatient psychiatric programs have declined in recent years. Several more community hospital inpatient psychiatric programs closed in FY 2009 and FY 2010 in favor of more profitable services.
 - The census at SRS's three state mental health hospitals has occasionally reached dangerously high levels where it is no longer safe to take voluntary admissions. SRS has entered into agreements with two community hospitals to accept and serve persons when their admission to the state mental health hospital is delayed. (See 32200 Mental Health Grants for details)

- Improving reimbursement for NFs/MH and establishing a new vision for their role in the mental health service system:
 - A new vision has been finalized (see 32700 NF/MH for details).
 - A new program opportunity for providing small Medicaid funded residential treatment facilities for adults is being explored. If this new program opportunity appears promising, added funding will be needed to make it a reality.
- Developing a more comprehensive system of care coordination:
 - Kansas Health Solutions is working with community mental health centers to improve overall care coordination.
- Developing a continuum of crisis mental health services:
 - An assessment of existing crisis mental health services has been completed.
 - Based on the findings of the assessment, SRS is exploring where crisis mental health services can be improved without additional resources.
 - Some crisis services found lacking in the assessment, such as hospital based outpatient crisis services, cannot be implemented without additional resources.
- Ensuring persons with multiple complex needs receive comprehensive services upon discharge from hospital treatment:
 - SRS is working to replicating successes experienced in a Southeast Kansas pilot project in Sedgwick County. The original pilot project has been very successful at keeping youth with extremely challenging behaviors living successfully in family settings.
 - SRS has begun an initiative with CMHCs, their Association, and KHS to improve the effectiveness of intensive services for persons with extraordinary needs.
- Update the assessment and screening process:
 - The assessment and screening process is being updated. The goal is to ensure persons receive the services they need and ensure, if inpatient treatment is needed, the hospital has the information necessary to effectively treat the patient from the very beginning of their stay.
- Increase funding for consumer run organizations, advisory councils, and advocacy groups that allow for an expanded role for these groups in policy development, community supports, and provider oversight:
 - Kansas has a robust mental health consumer and advocacy program. The consumer run organizations, Consumer Advisory Council, Keys for Networking, National Alliance for Mental Illness Kansas, and others provide valuable advocacy, supports, and services that greatly contribute to mental health recovery in Kansas. But funding for these programs is minimal. The Hospital and Home Initiative recommends increased funding for these efforts, but increased resources are needed to implement this recommendation.

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- Develop and implement a plan that improves the availability and affordability of preventative and ongoing physical health treatment for persons with mental illness:
 - Research indicates that persons with severe mental illness die, on average, 25 years sooner than persons in the general population due to untreated physical illnesses. KHS and the Association of Community Mental Health Centers of Kansas (ACMHCK) are implementing a pilot project to improve the physical health care of persons with SMI. Additional funding would add greatly to the success of this effort.
 - SRS is working with KHS and ACMHCK to ensure case managers coordinate physical and mental health for persons with an SPMI.

Object Codes 5100: Salaries and Wages:

Summary: Includes 30.5 FTE and 4.5 non-FTE Unclassified Permanent positions who carry out the administrative and oversight activities for the Mental Health Program and the Kansas Infrastructure Grant. Due to realignment within SRS, MH Administration has assumed budgetary responsibility for Quality Assurance Field Staff. Several positions are kept vacant to provide savings necessary as a result of budget reductions.

Current Year FY 2011: \$1,809,052 – The salary request includes funding for longevity bonuses and shrinkage at 18.2 percent. All fringe benefit rates conform to the indices issued by the Division of the Budget.

Allocated Budget FY 2012: \$1,847,109 - This amount continues funding for the current staffing level. The request includes funding for longevity and shrinkage at 18.3 percent. All fringe benefits conform to the indices issued by the Division of the Budget.

Object Codes 5200: Contractual Services:

Summary: Includes travel of \$120,871, communications of \$21,537, and professional fees of \$23,603,967 which includes the university certified match contracts and administration for the Medicaid Funded Community Mental Health Managed Care program (i.e., Prepaid Ambulatory Health Plan - PAHP), and other services. Funds are also provided to Consumer Run Organizations (CRO) that provide critical peer assistance to persons with SMI. Consumer grant funds are used to support 21 local consumer-run/self-help programs and two statewide organizations. Currently, the statewide organizations receive funding to provide coordination for local organizations and technical assistance. Mental Health is working with the various grantees to enhance accountability and to assure activities are outcome oriented. Several programs that were grants last year are now showing up as contracts. This shift resulted in some SGF savings that is now being used to pay for the added cost of the Private Inpatient Agreements (See 32200 Mental Health Grants).

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Mental Health Administration Contracts

Contract	All Funds	SGF	Purpose
Wichita State University	\$2,675,000		Provide training and resource support to providers of MH services to Medicaid eligible youth with SED and their families. State General Funds eliminated as a result of budget reductions.
Wichita State University	\$1,063,618		Provide technical assistance to providers of Medicaid eligible adults. State General Funds eliminated as a result of budget reductions.
University of Kansas-SED	\$1,684,532	\$20,000	Technical support, training and consultation on SED. State General Funds greatly reduced as a result of budget reductions.
University of Kansas-Adult MH	\$2,216,802		Provide quality improvements in service delivery for Medicaid eligible adults. State General Funds eliminated as a result of budget reductions.
Kansas State University	\$230,352		Core Training to CMHC for Home-Based Service
Keys for Networking	\$150,000	\$103,035	Provide for help, guidance and assistance to families with children who have an SED
NAMI	\$150,000	\$103,035	Provide for help, guidance and assistance for adults with an SPMI and their families
Community Psychiatry Residents	\$81,000	\$55,639	Help fund the cost of medical student psychiatric residency programs in the CMHCs
Mental Health Assoc of the Heartland	\$68,400	\$46,984	Peer support and education
Consumer Run Organizations	\$1,169,500	\$803,330	Provide support, mentoring, and training for adults with an SPMI
Consumer Advisory Council	\$290,500	\$199,545	Ensure persons with an SPMI have an effective voice in mental health policy development and implementation
Mental Health Association of SC KS	\$82,775	\$56,859	Youthlink provides leadership growth for adolescents with an SED
KU SE KS Project	\$109,433	\$75,170	Project to keep youth in family homes
UMY Best Program	\$100,000	\$68,690	Replicate SE KS project
MHCRONK	\$120,000	\$82,428	Peers support and technical assistance
Heartland RADAC	\$221,000	\$151,805	Intensive Case Management for co-occurring Substance Abuse and Mental Health
Mercer	\$36,975	\$18,488	Cost Report Analysis for PRTF program
Revel	\$70,000	\$35,000	Registered Nurse needed to assist with PRTF surveys
Kansas Health Solutions	\$12,800,000	\$6,450,000	Administration for the Medicaid Funded Community Mental Health Managed Care Program (PAHP)

Current Year FY 2011: \$23,779,446 - Contractual obligations are adequately funded.

Allocated Budget FY 2012: \$23,779,446 - Continues estimates from FY 2011.

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Object Codes 5300: Commodities:

Summary: Includes office and data processing supplies of \$6,356.

Current Year FY 2011: \$14,366 - Commodities are adequately funded.

Allocated Budget FY 2012: \$14,366 - Continues estimates from FY 2011.