State Budget & Legislative Update: Preparing for the 89th Session

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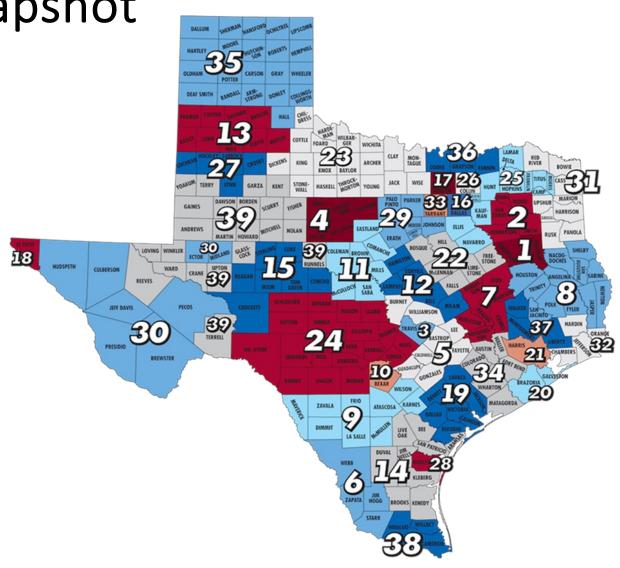
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Local Authority System Snapshot

- 39 statutorily authorized Community Mental Health (CMHCs) and IDD Centers cover all 254 counties
- Most CMHCs and IDD Centers also serve as the Local MH/BH Authority (LMHA/LBHA) and Local IDD Authority (LIDDA) for the local service area
- 60% of adults with serious mental illness and 20% of children with serious emotional disturbance served in the public mental health system are low-income uninsured; [Medicaid: 40% adults, 80% children]
- 95% of Medicaid services are in managed care, including mental health and substance addiction services
- The Texas Legislature has substantially invested in mental health services, although gaps remain
- The 1115 Transformation Waiver (DSRIP Program) created a vital source of funds for the public mental health system for 10 years – new financing strategies are easing but not eliminating the loss





Community Mental Health Act of 1963

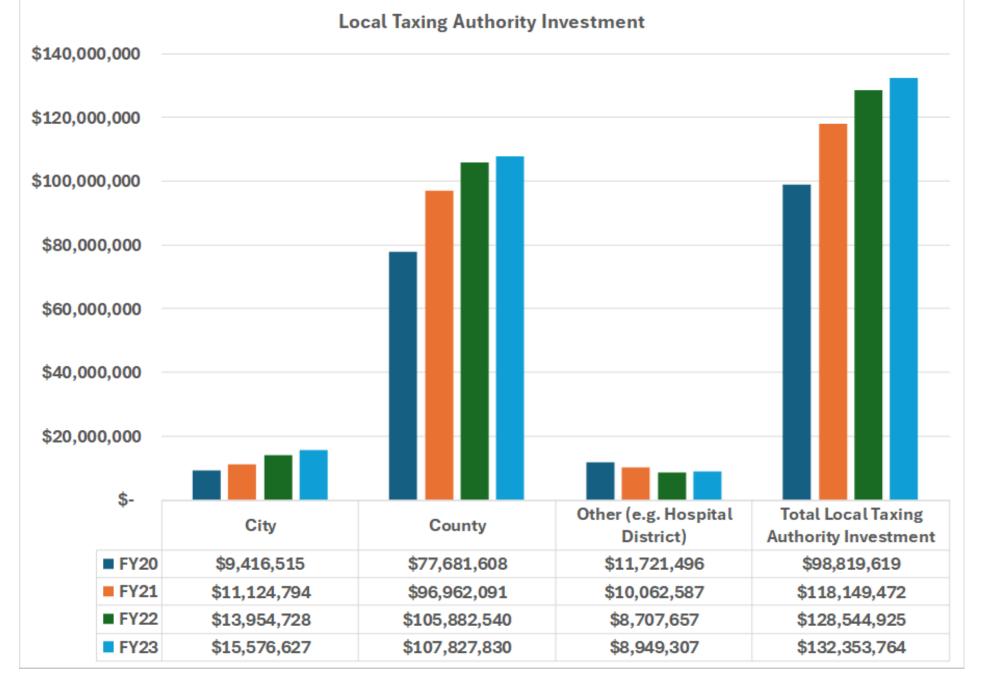
- Federal funding for Community MH Centers
- Community-based service philosophy
- Emphasized natural support systems, new medications, regionalized relationship with state facilities
- Catalyst for state legislation and funding

Texas MHMR Act of 1965 Texas Health & Safety Code 534.001

- Authorized local taxing authorities (counties, cities, hospital districts, school districts) to
 - create local governmental entity
 - appoint local governing board
 - develop community alternatives to treatment in large residential facilities
- Established local, state and federal partnership to create a communitybased system for people with mental illness and intellectual disabilities
- Created the Texas Department of MHMR

LMHA/LBHA and LIDDA Roles & Responsibilities (Beyond Traditional Service Delivery)

- Secure local matching funds
- Leverage resources to enhance services
- Acquire grants and gifts
- Educate the public
- Facilitate local planning, identify service gaps
- Coordinate with local partners & volunteers
- Collaborate with other stakeholders
- Respond to disasters & emerging community needs



Local IDD Authority (LIDDA) Role

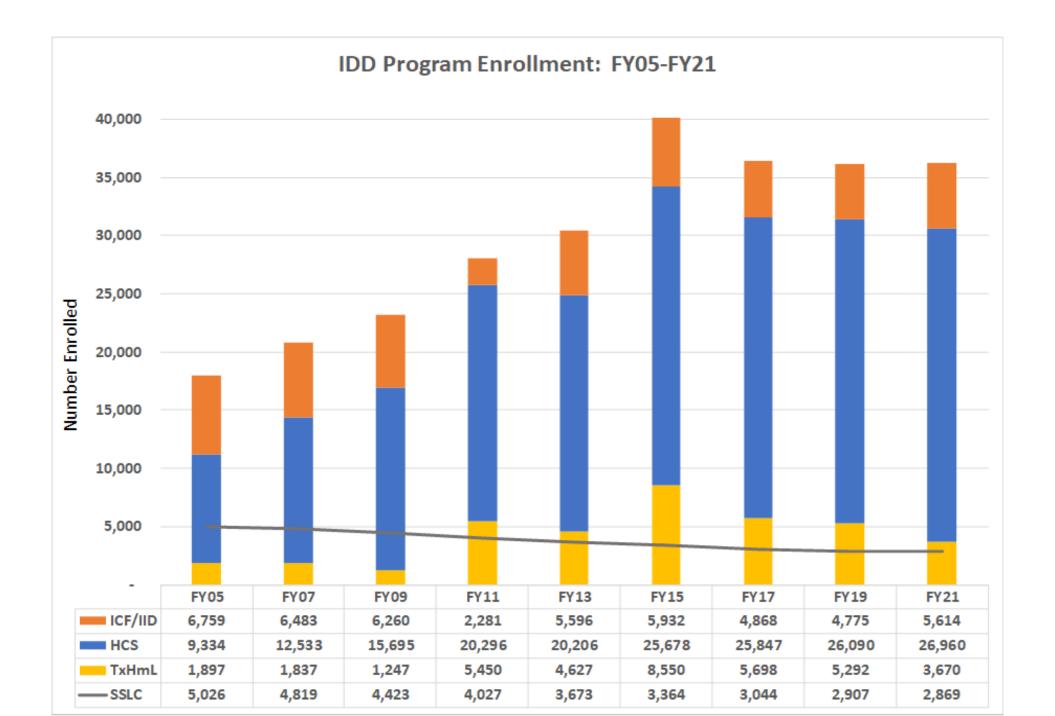
- Single Point of Access (front door) to Intermediate Care Facility (ICF/IID) services and associated community-based waiver programs (Home and Community-based Services and Texas Home Living)
- Service Coordination (Targeted Case Management): for purpose of supporting access to needed medical & social services
- Community Safety Net (GR Funded)



Targeted Case Management (IDD TCM) Per MEI* Cost Reports

		Modeled Rate	FY18	FY19	FY20	FY21
	Monthly Cost per Cost Reports	\$182.80	\$221.58	\$239.89	\$241.58	\$345.36
	Monthly Cost in Excess of Modeled Rate		\$38.78	\$57.09	\$58.78	\$162.56
Times	Individual Medicaid Months of IDD TCM		414,194	423,853	431,367	402,936
Equals	Estimated Medicaid (Shortfall) for IDD TCM		(\$16,062,443)	(\$24,197,768)	(\$25,355,752)	(\$65,501,276)

*MEI – Mental Health, Early Childhood Intervention, and Intellectual and Developmental Disability



IDD Program Snapshot

IDD Programs	Persons Enrolled 2021
Community ICF/IID	5,614
Home and Community Services (HCS)	26,960
Texas Home Living (TxHmLvg)	3,670
State Supported Living Centers (SSLCs)	2,869
GR Community Safety Net	4,942
Total:	44,055

Residential Options

for Individuals with an Intellectual Disability or Related Condition





State Supported Living Centers

SSLCs provide 24-hour residential services in a structured environment for people with intellectual disabilities. Residents live in a safe, campus-based setting where they receive individualized onsite behavioral treatment and health care, including primary and specialty medical care, psychiatry, nursing and dental. Additional on-campus services include:

- Clinical therapies provided by full-time professional staff.
- 24/7 one-to-one supervision as needed
- 24/7 video surveillance of living, dining and day program areas
- Vocational and employment services, skills training and habilitation services
- Custo mized adaptive aids, including seating and positioning devices
- Specialized, quality-controlled meals to fit a wide variety of diets
- Religiousservices for different faiths

SSLCs also provide services such as transportation and staff, so residents may maintain connections with their families and natural support systems. Planned activities, such as shopping, dining out, going to movies and other leisure activities provide recreation in residents' local communities.

There are 13 SSLCs across Texas (Abilene, Austin, Brenham, Corpus Christi, Denton, El Paso, Harlingen, Lubbock, Lufkin, Mexia, Richmond, San Angelo and San Antonio). Each SSLC serves between 60 and 460 residents.

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Community-based Intermediate Care Facility for Individuals with an Intellectual Disability or Related Conditions

Community-based ICFs/IID provide 24-hour residential services for people with intellectual disabilities or related conditions. Residents have access to comprehensive and individualized services and supports in their local communities including:

- Primary and speciality medical care.
- Behavioral treatment
- Clinical therapies
- Nursing
- Dental treatment
- Vocational and employment services, skills training and habilitation services
- Adaptive aids
- Specialized diets
- Planned activities such as shopping, dining out, going to movies and other recreational and leisure activities in their local communities

Most community-based ICFs/IID across Texas serve people in homes that accommodate up to six people; however a few are larger.

Search for a venn (tages / ity-based ICF/IID at https://appchilter.org/action/



Home and Community-based Services Program: Group Home or Host Home and Companion Care

The HCS program can provide 24-ho ur residential assistance for peoplewith intellectual disabilities or related conditions who live in:

- Agroup home where no more than four people receiving services live.
- A host home and companion care setting.

The HCS program provides services across Texas for people to successfully integrate into their local community and have opportunities to participate as citizens to the maximum extent possible, whether they are receiving 24hour residential services or services in their own home or family's home.

A persoin receiving HCS residential assistance has access to :

- Comprehensive and individualized primary and speciality medical care
- Behavioral support
- Day habilitation
- Clinical therapies
- Dental treatment
- Nursing
- Employment assistance and supported employment.
- Adaptiveaids
- Minor home modifications
- Activities designed to provide recreational integration into their local community, including shopping, dining out, going to movies and other leisure activities

Service coordination is provided by the local intellectual and developmental disability μ uthority.

There is an interest live for the HCS program.



For more information about services and supports for individuals with intellectual and developmental disabilities contact your local IDD authority at:

To find the local IDD authority that serves your area go to https://apps.hhs.texas.gov/ contact/search.cfm





Significant Responsibilities for \$10.60/hour!

Staffing	1 community IDD direct care worker in a group home supports 3 – 6 individuals at the same time	
Basic Needs/ Health and Safety	 Preparing special diets, mealtime assistance Showering/brushing teeth/dressing Toileting/handwashing/changing diapers Cleaning, disinfecting common areas Conducting fire drills during the day and night 	24/7
Individualized Support	 Exercising hypervigilance for medical vulnerabilities and behavior triggers Implementing multiple individualized plans of care Intervening in medical and behavioral emergencies Interacting with individuals who are not verbal Transporting to and from appointments, church, jobs, social activities, shopping, etc. 	IDD direct care workers also teach daily living skills to help individuals gain as
Medication Management	 Preparing, administering, and monitoring medications Documenting and maintaining medication 	much independence as possible.
Management	 Documenting and maintaining medication records 	

Average Days Wait for SSLC Admission

Time Period	Total Admissions	Average Days Waiting
FY2022	127	149.8
FY2023-June 30, 2023	106	140.6

Pending Admissions to SSLCs as of September 18, 2023

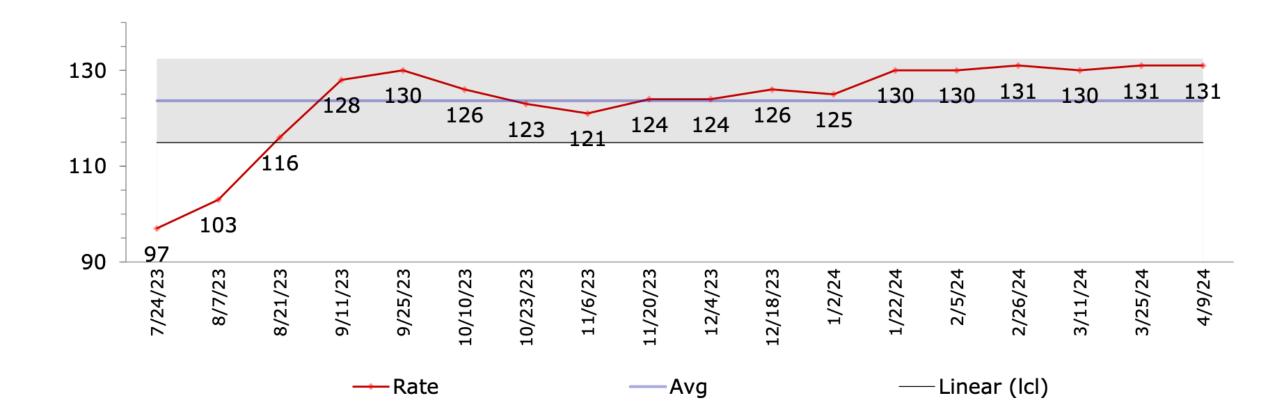
Setting Where Waiting	Number of Individuals		
Jail	32		
State Hospitals	21		
Community	47		
Total	100		



Individuals Served with IDD in State Hospitals



Services





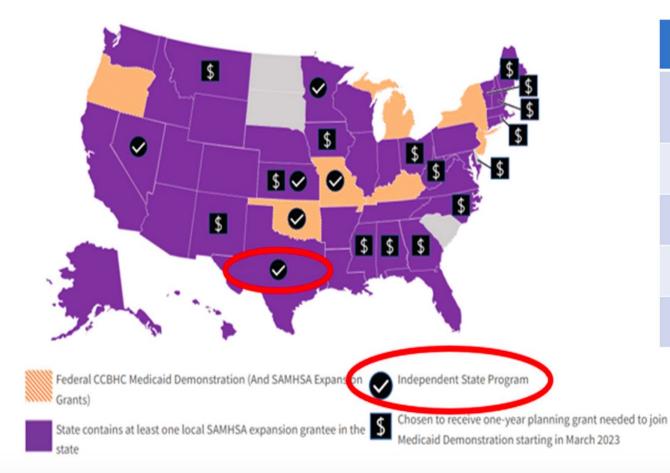


CCBHC Financing Map from SAMSHA Website

Map of CCBHCs Across the United States*

*Current as of March 6, 2023.

Currently, there are over 500 CCBHCs operating across the country, as either CCBHC-E grantees, as clinics participating in their states' Medicaid demonstration, or as a part of independent state CCBHC programs.

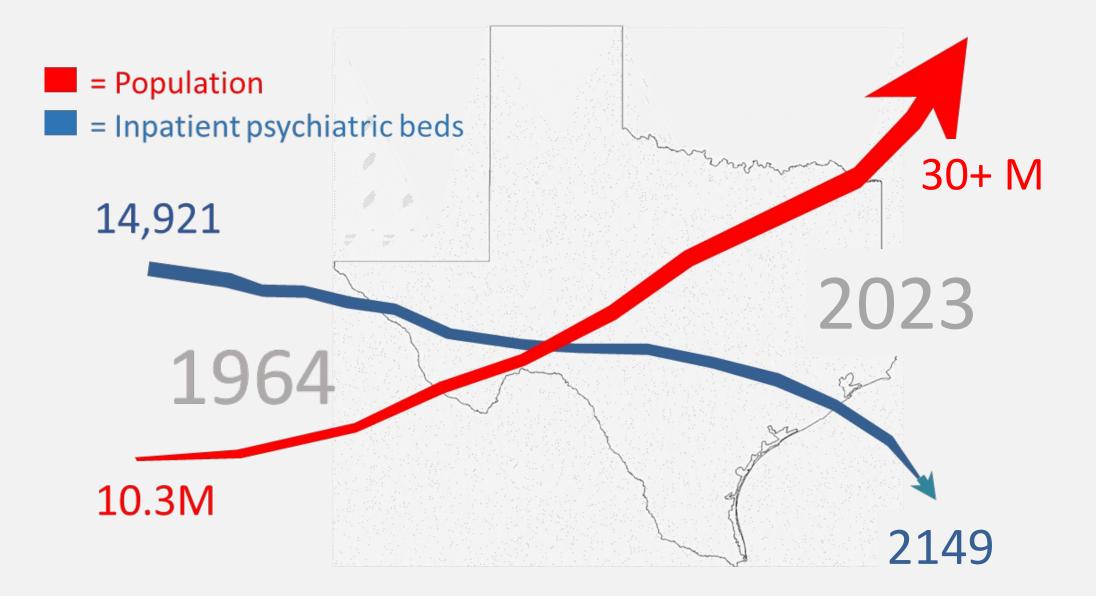


CCBHC Financing Strategies:

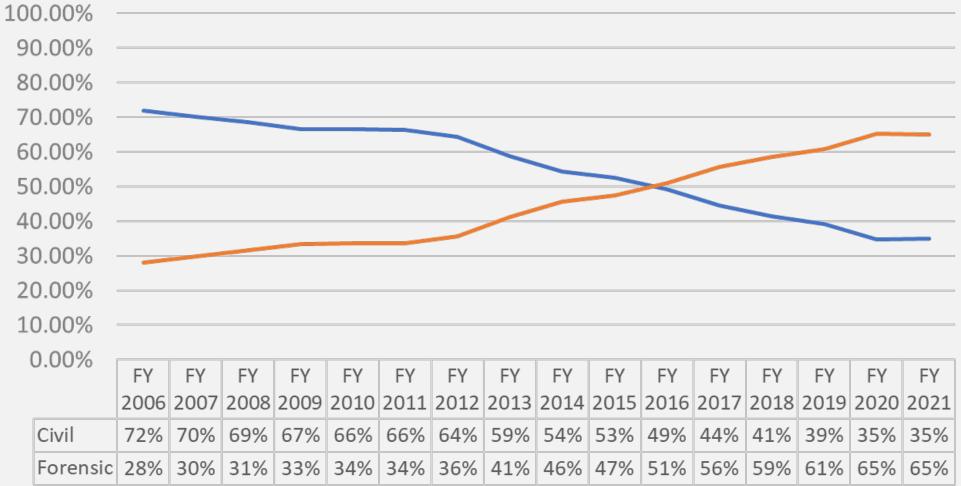
	DPP-BHS	РНР-ССР	Total DPP-BHS & PHP-CCP
Population	STAR, STAR+PLUS, and STARKIDS	Indigent Uninsured	
State Match Supplied By	IGT	CPE	
Fiscal Year	State (Sept-Aug)	Federal (Oct-Sept)	
Net Revenue FY22/FFY22	\$91,585,831	\$286,170,551	\$377,756,382
Net Revenue FY23/FFY23	\$126,033,527	\$294,966,264	\$420,999,791

NOTE: the Directed Payment Program – Behavioral Health Services (DPP-BHS) and Public Health Provider Charity Care Pool (PHP-CCP) are financing strategies within the CMS approved 1115 Waiver for Texas

Texas Council of Community Centers



Percent Civil Vs Forensic Average Daily Census (State Hospitals)





Forensic Waitlist



- 2019: 883
- Dec 20, <u>2021</u>: 1,995
- Dec 23, <u>2022</u>: 2,571
- Dec 22, <u>2023</u>: 1,935
- Apr 16, <u>2024</u>: 1,886 (-26.64%)

Count Breakdown (as of 4/16/2024):

Non-MSU: 1,200 MSU: 686

Local Authority Services

(Highlighted items are Child & Adolescent services and/or services available to both children and adults)

Statewide

Certified Community Behavioral Health Clinics (CCBHC) Texas Resilience and Recovery (TRR) Model Accredited Crisis Hotlines **Jail Diversion Planning Mobile Crisis Outreach Teams** Locally Purchased Psychiatric Beds **Crisis Transitional Services Intensive Ongoing Services Benefits Assistance** Medication-Related Services Skills Training (psychosocial rehab) Case Management Therapy (CBT, TF-CBT, PCIT and Family) Supported Employment Supported Housing Assertive Community Treatment Mental Health First Aid (MHFA) Youth Empowerment Services Waiver (YES Waiver) Peer Support & Family Partner Services

Substance Use Disorder Services

Certain Local Service Areas

Diversion Centers

Community Psychiatric Hospital

Crisis Stabilization Units

Extended Observation Units (23–48 hrs)

Crisis Residential Services

Crisis Respite Services

Crisis Step-Down

Jail-based Competency Restoration

Outpatient Competency Restoration

Homelessness Services

Coordinated Specialty Care (CSC)

Multisystemic Therapy (MST)

School-Based Services

Youth Services Navigators

Youth Crisis Outreach Teams (in process)

Community Health Workers



88th Legislative Session (MH Budget FY2024-25)

Total BH funding is \$9.4B, >15% increase from last session

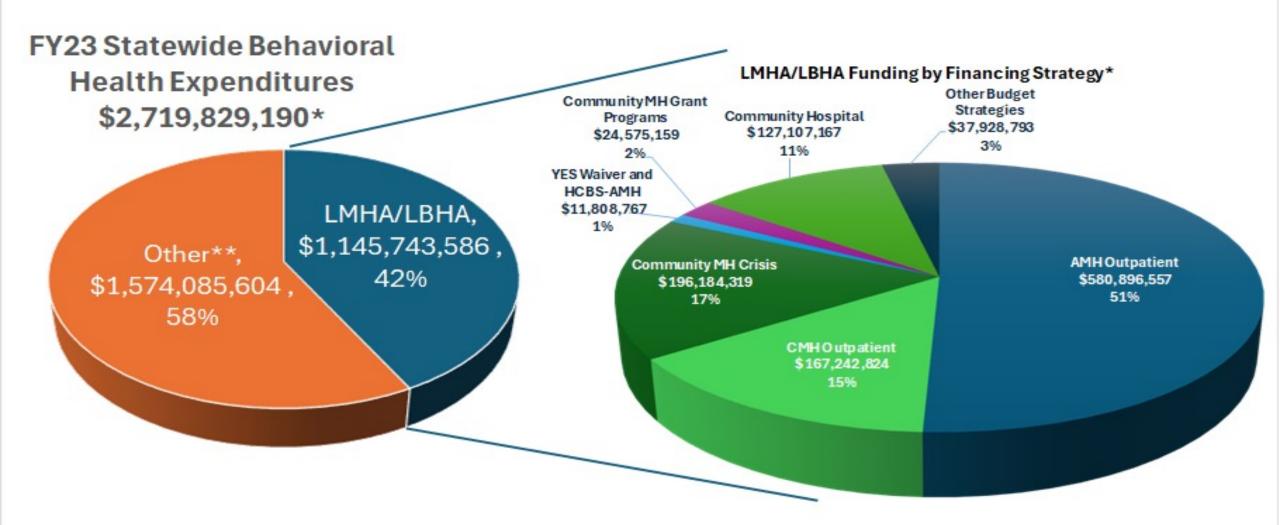
Workforce Grant Programs

Diversion Centers & Inpatient Care

Youth & Intensive Services

CSSB 30 (Supplemental Appropriations Bill)

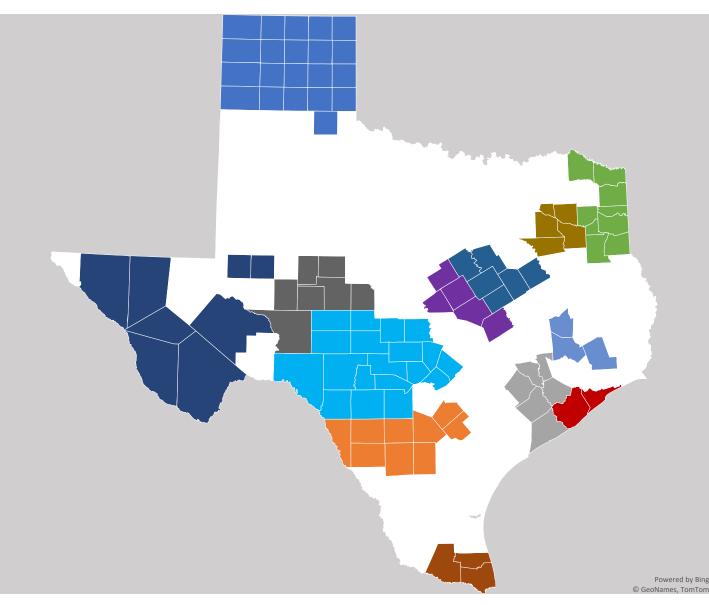




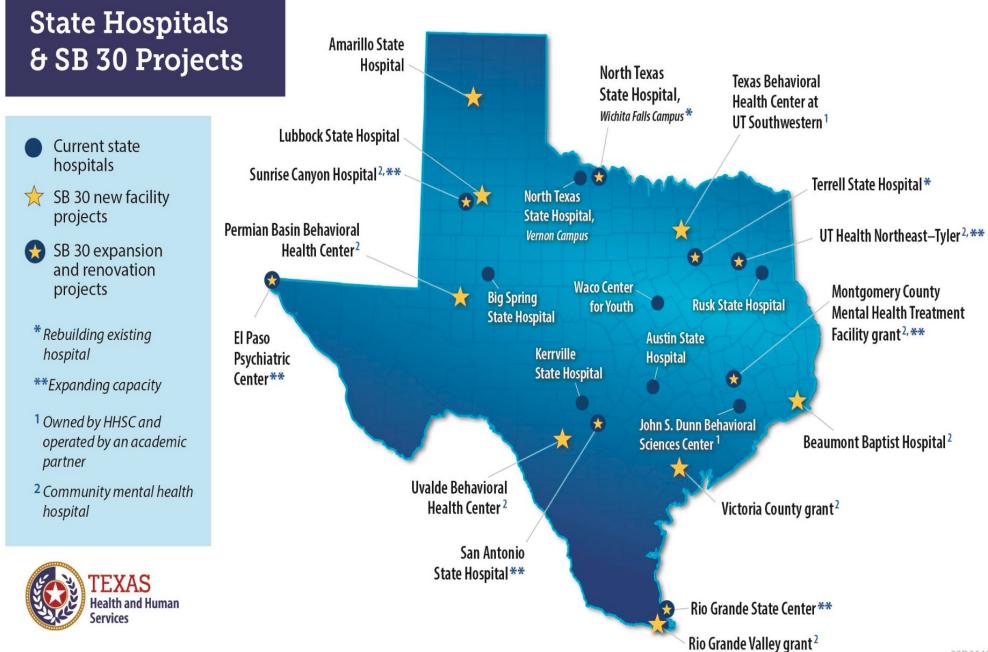
*Includes \$193,837,066 of Federal funds leveraged by Local Mental/Behavioral Health Authorities (LMHAs/LBHAs) through the Public Health Provider Charity Care Pool (PHP-CCP) and Directed Payment Program Behavioral Health Services (DPP-BHS) by leveraging state General Revenue as non-Federal share for Medicaid match through Certified Public Expenditure and InterGovernmental Transfer.

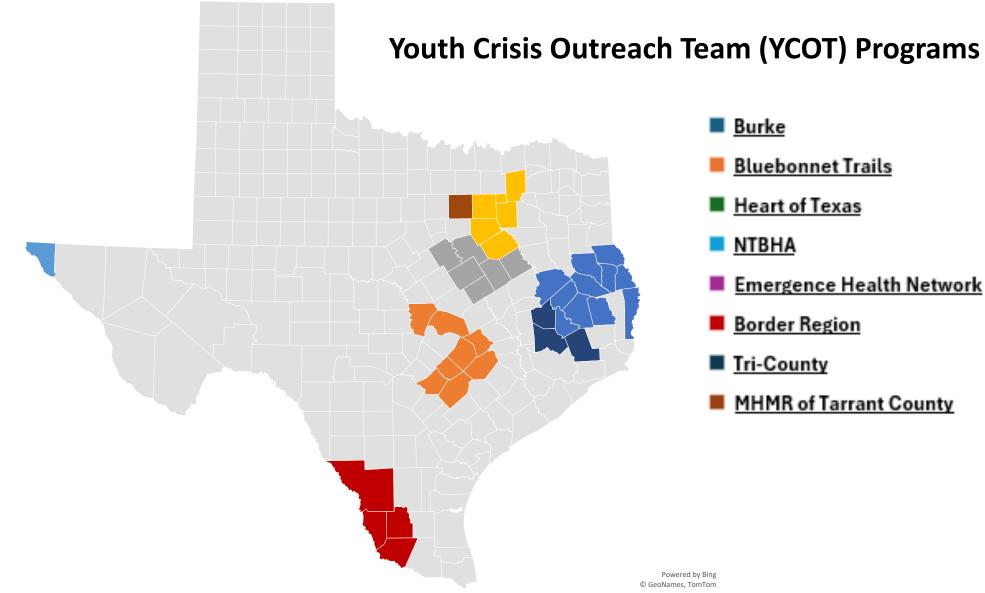
**Includes behavioral health services provided directly by the state or through non LMHA/LBHA providers, such as \$140,277,957 for programs operated under the Texas Child Mental Health Care Consortium

Rider 52: Crisis & Diversion Programs









Burke

- Bluebonnet Trails
- Heart of Texas
- NTBHA
- Emergence Health Network
- Border Region
- Tri-County
- MHMR of Tarrant County

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Sequential Intercept Model (SIM) Mapping Workshops

SIM Mapping Workshops Completed 19

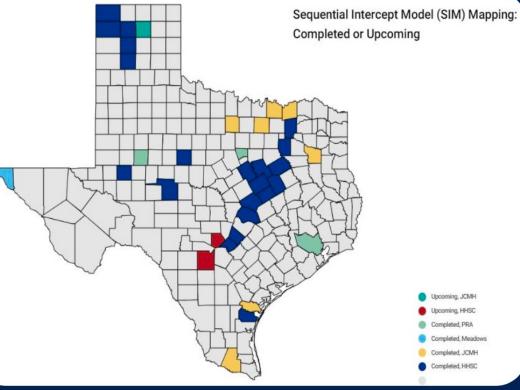
Counties 28 engaged

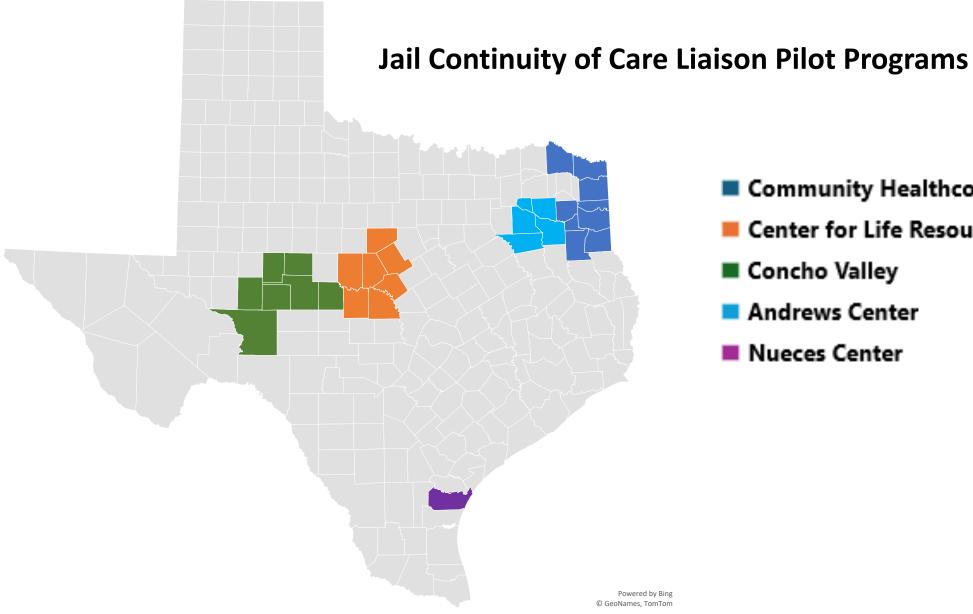
1,000 Local Participants

Behavioral Health 16 Leadership Teams

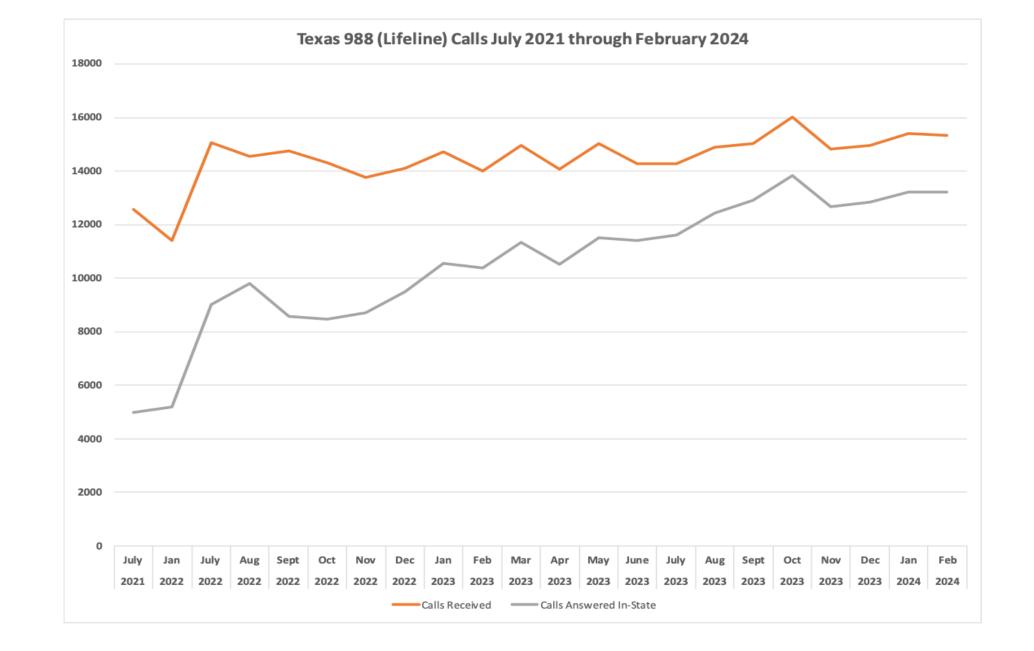








- Community Healthcore
- Center for Life Resources
- Concho Valley
- Andrews Center
- Nueces Center





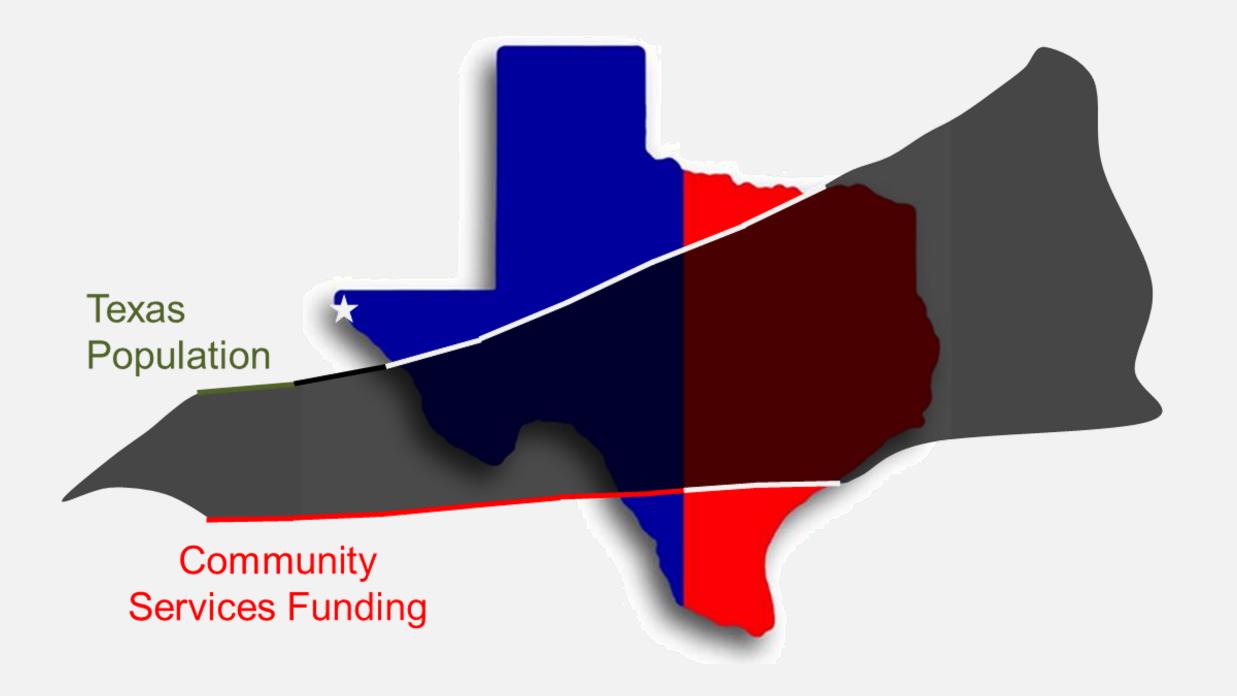
Specialized Youth Services

- YES Waiver: 1915(c) Medicaid program for children and youth with serious mental, emotional and behavioral difficulties (2009)
- Residential Treatment Center (RTC) initiative for "at risk of relinquishment" situations (2013)
- Coordinated Specialty Care (CSC) (2014)
- Multisystemic Therapy (MST) (2022)
- Children's Crisis Respite (2022)
- Youth Services Navigators (2022)
- Youth Crisis Outreach Teams (YCOTs) (2023/2024)

Recommendations

- YES Waiver Improve rates and update rules
- Expand specialty services statewide (e.g., MST, CSC)
- Medicaid coverage for Family Partner services
- Increase opportunity for innovation through continued and enhanced investment in grant programs benefiting children and youth
- Consider presumptive eligibility for high-acuity/high-risk referrals to Local Authority services and TCHATT referrals for longer-term services
- Modernize UM Guidelines for TRR to permit new EBPs and broader curriculum usage
- Strengthen MCO engagement and coordination for children with complex needs
- Strengthen interactions with schools/504 accommodations
- Address ongoing workforce challenges
- Ensure ECI has resources necessary to address the mental health needs of very young children

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Election 2024



- Party Primaries: March 5, 2024
- Party Runoffs: May 28, 2024
- Early Voting: Oct. 21- Nov. 1, 2024
- Election Day: Nov. 5, 2024



89th Texas Legislature begins Tuesday, January 14, 2025

Joe Daniel Price/Moment/Getty Images

Texas House

- 16 members did not seek reelection
 - 9 Republicans 7 Democrats
- 16 members lost their primary or runoff elections
- Total: Minimum of 32 new House members for the 2025 Legislative Session
- Speaker's race is already underway





Texas Senate

- 1 member did not seek reelection (Senator Springer)
- 1 member vacated seat to run for Houston Mayor (Senator Whitmire)
- Total: 2 new members of the Texas Senate

Texas House and Senate Interim Charges

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House Interim Charges

- House Appropriations
 - Implementation and impact of appropriations under Article II for reimbursement rates
- Human Services:
 - Monitoring:
 - SB 24, SB 24 (powers and duties of HHSC and transferring of powers from DFPS)
 - Medicaid Contracting
 - Support for Texans with Intellectual Disabilities
- $\circ~$ Juvenile Justice and Family Issues
 - Juvenile Justice System Outcomes
- Public Health
 - Monitoring
 - SB 26 (LMHA/LMHB audits and reporting, services, and programs)
 - Responses to Mental Health Emergencies: Review and evaluate best practices of procedures for the emergency detention of a person with mental illness.

Senate Interim Charges

• Business and Commerce

• Artificial Intelligence

• Health and Human Services

- Monitoring
 - SB 24 (powers and duties of HHSC and transferring of powers from DFPS)
 - SB 26 (LMHA/LMHB audits and reporting, services, and programs)
- Children's Mental Health
- Access to Health Care
- Health Insurance

Veteran Affairs

• Veterans' Mental Health

Upcoming Committee Interim Hearings

- House Youth Health and Safety, July 9th and 31st at 10:00am
 Charge: Behavioral Health Services for At-Risk Youth
- Senate Finance, Sept. 9th at 9:00am
 - Charge: Mental Health Services and Inpatient Facilities
- Regularly check Capitol.Texas.Gov for the latest updates on committee hearings.

Opportunities & Threats

Budget Items:

- Crisis Response Infrastructure (MCOT, YCOT, Diversion Centers, JBCR, EOUs, Crisis Respite)
- Children and Adolescents MH
 Services

With Legislative Voices:

- Mental Health Case Loads
- LIDDA TCM Capacity
- IDD Group Homes Workforce

Policy Items:

- Managed Care for IDD Waiver Programs
- Future of the Local MH/IDD Authority System
- Mental Health Code Changes: Emergency Detention

What Can **YOU** Do to Build Champions?

- Educate your community that mental health and substance use disorders are treatable public health problems that affects us all;
- Educate your community that people with intellectual disabilities can and do live successfully in the community with varying levels of support;
- Share the strides made and the challenges we continue to face particularly the cost of the gap between need and service availability;
- Encourage people to tell their own success stories; and
- Nurture community champions who will support the effort.