



Adoption  
 Asian American Family Services  
 Avondale House  
 Bering Omega Community Services  
 Care for Elders  
 Career and Recovery Resources, Inc.  
 Catholic Charities of the  
 Archdiocese of Galveston-Houston  
 ChildBuilders  
 CHILDREN AT RISK  
 Christ the Good Shepherd Catholic Church  
 Coalition of Behavioral Health Services  
 Collaborative for Children  
 Council on Alcohol & Drugs Houston  
 Communities In Schools  
 Cypress Creek Hospital  
 DePelchin Children's Center  
 Family Services of Greater Houston  
 Fort Bend Regional Council on  
 Substance Abuse, Inc.  
 Gateway to Care  
 Good Neighbor Healthcare Center  
 Gulf Coast CHIP Coalition  
 Harris County Healthcare Alliance  
 Healthcare for the Homeless-Houston  
 Houston Area Association for the  
 Education of Young Children  
 Houston Area Women's Center  
 Houston Endowment  
 Houston Food Bank  
 IntraCare Hospitals  
 Jewish Family Service  
 Justice for Children  
 Legacy Community Health Services, Inc.  
 MHMRA of Harris County  
 Memorial Hermann Healthcare System  
 Mental Health Association of  
 Greater Houston  
 Montrose Counseling Center  
 NAMI Metropolitan Houston  
 Neighborhood Centers Inc.  
 Northwest Assistance Ministries  
 Rockwell Fund  
 San Jose Clinic  
 SEARCH  
 South County Community Clinic,  
 DBA The Community Clinic  
 Spaulding for Children  
 Target Hunger  
 Texas Children's Hospital  
 The Arc of Greater Houston  
 The Arrow Project  
 The Center for Success and  
 Independence  
 The Menninger Clinic  
 The Women's Home  
 United Way of Greater Houston  
 Wesley Community Center  
 West Oaks Hospital  
 YMCA of Greater Houston

## Behavioral Health: Expansion of Community-Based Mental Health Services

Position Statement approved by One Voice: September 8, 2006

**Issue/Concern:** Lack of funding for community-based mental health services under the Resiliency and Disease Management (RDM) model has barred the majority of Texans with mental illness who need public services from accessing this much-needed care.

### Specific Policy Recommendation(s):

- ★ Fully fund the Department of State Health Services' Exceptional Item for Crisis and Community Services in the amount of \$82.3 million over the biennium.
- ★ Increase the state's General Revenue funding on top of the Exceptional Item to provide additional RDM, community-based services for individuals with mental illness.

**How does this issue/recommendation relate to prevention and early intervention or maximizing federal funds for health and human services?** Though the RDM model is based upon the integration of evidenced-based practices (e.g., Assertive Community Treatment, Supportive Housing and Supported Employment) into community-based mental health treatment—which has been proven to be effective at hospital and jail diversion—lack of funding has impeded this process and created a system whereby access is often restricted at the community level and more readily available after an individual has already reached a crisis.

For instance, while the population in Harris County increased by approximately 20% from 1995 to 2005, state GR appropriations for community mental health services provided through Harris County MHMRA increased from only \$29.4 million to \$30.9 million. Adjusted for inflation, this represents a funding decrease of almost 28%. As a result, only 24% of children and 18% of adults with mental illness who need services from the public mental health system are able to receive them. The impact of these unmet mental health needs reverberates throughout the community and negatively affects other public systems (e.g., emergency rooms, jails, child welfare system), at a far greater cost than addressing and meeting these needs early.

At an average cost of approximately \$3,000 per individual per year—compared to an estimated \$5,850 for 90 days in county jail (housing alone) and \$5,400 for 10 days in an inpatient treatment facility--community-based services provide the most effective, efficient use of taxpayer dollars.

### Supporting Facts/Research/Resources:

- ★ An estimated 4.3 million Texans have a diagnosable mental illness. (Based on prevalence. "Mental Health: A Report of the Surgeon General", 1999)
- ★ Texas was ranked 47<sup>th</sup> in per capita funding for mental health services in 2003. (National Association of State Medicaid Directors)  
<http://www.nri-inc.org/RevExp/RE03/tables/03t8.pdf>
- ★ The economic impact of mental illness in Texas was \$16.6 billion in 2003; that same year, the economic impact to state and local governments was \$1.5 billion. (Mental Health Association in Texas, "Turning the Corner", 2005)

## **Behavioral Health: Expansion of Community-Based Mental Health Services**

**Position Statement approved by One Voice: September 8, 2006 (cont.)**

### **Supporting Facts/Research/Resources:**

- ★ Among Texas Medicaid clients who needed community-based mental health services, monthly emergency room costs were 27% lower (an average of \$25 lower per individual per month) for those who received them than for those who did not; potential savings for the 13,642 untreated individuals in the study would be \$341,050 per month. (Texas Department of State Health Services, Behavioral Health News Brief, June 19, 2006)
- ★ A cross-sectional study found that 37% of inmates (3,189 of 8,744) housed at the Harris County Jail had some previous history of mental health treatment. (Nguyen, Harris County MHMRA, "Consumer Status And Demographic And Clinical Characteristics of Jail Inmates In The Harris County Jail On December 15, 2005", 2006)

**Legislative Outcome:** The Department of State Health Services Exceptional Item for Crisis and Community Services was fully funded. The general revenue budget contained \$9.6 million for waiting list reduction, targeting part of these funds for child and adolescent services. The Rider contains provisions for allocation of this funding with a portion to mental health equity, a portion to per capita and a portion to a competitive process.

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