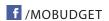


Budget Basics: Mental Health

2017

An introduction to Missouri's mental health services and funding





Mental Health

Mental health services are funded through Missouri's Department of Mental Health (DMH), which plays a critical role in providing access to mental health care for 170,000 adults and children in Missouri who struggle with serious mental illness, substance abuse, or developmental disabilities.

The majority of treatment is provided through a network of more than 1,300 community-based nonprofit partners that contract with DMH to provide care.

Benefits of access to mental health services include:

- Increased employment
- Decreased incarceration
- Reduced strain on families
- Decreased future costs

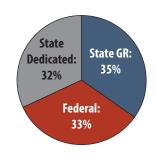
This primer is intended to serve as a guide for Missourians who care about mental health services. These services are funded through the Department of Mental Health budget, which is included in House Bill 10. Amounts included are Appropriated and reflect Gubernatorial vetoes, but not any mid-year restrictions that may have been made.



Budget Basics

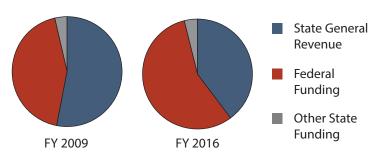
Each year the state takes in and spends approximately \$27 billion.

- About one third of the funds come from the federal government for very specific purposes.
- Another third is state revenue dedicated to specific state purposes, like the fuel tax, which is dedicated to transportation.
- Lawmakers have the most authority to allocate the final third, referred to as General Revenue.



Funding for the Department of Mental Health

Total DMH Budget, by Source of Funding FY 2009 & FY 2016



- In the current state budget year (FY17), just over 7% (\$1.9 billion) of Missouri's total state operating budget is dedicated to the Department of Mental Health (DMH).¹
- Over the last eight years, DMH has been able to leverage increased federal dollars through Medicaid to support mental health services for Missourians.
- In state FY 2009, federal funding comprised about 42% of the total DMH, increasing to over 56% by FY 2016.²
- The vast majority of federal funding for mental health services (84%) comes to Missouri through Medicaid. The remaining portion results from federal grant programs. In the 2016 state budget year, DMH received 23 distinct federal grants to support its services.

DMH services are provided through the:

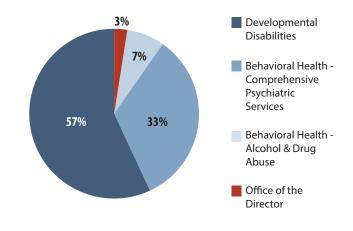
Division of Behavioral Health

- Comprehensive Psychiatric Services
- Alcohol & Drug Abuse Treatment

Division of Developmental Disabilities

In 2013, DMH combined the Divisions of Comprehensive Psychiatric Care and Alcohol & Drug Abuse into one Division of Behavioral Health. However, the state budget still outlines funding under each previous division. As a result, the details in this primer also delineate the components of each previous division as well as the Division of Developmental Disabilities.

Total Mental Health Spending, by Division



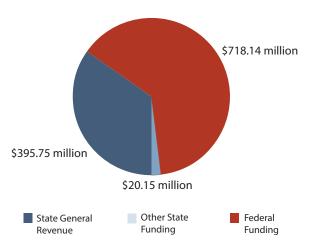
Services for Missourians with Developmental Disabilities

The Division of Developmental Disabilities serves Missourians with developmental disabilities including autism, intellectual disabilities, cerebral palsy, head injuries, epilepsy, and certain learning disabilities.

Although the patients treated through the Division of Developmental Disabilities comprise just 20 percent of the total number of DMH patients, the services provided to these patients, who have chronic conditions that are unlikely to improve, take up 57 percent of the total DMH budget.³

In FY 2015, the Division provided services to 33,315 Missourians, and the number of clients served is expected to increase to 34,666 in FY 2017.

Federal Funds Support 2/3 of DMH Spending for Developmental Disabilities



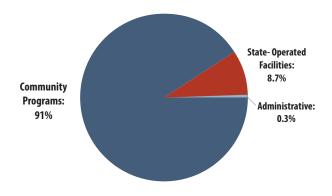
The Division of Developmental Disabilities provides:

- habilitation and rehabilitation services,
- case management,
- care coordination,

 residential and employment supports and other services to Missourians with developmental disabilities and their families.

The Division has five regional offices, six satellite offices, four state-operated habilitation centers and three community support agencies.

91% of the Division of Developmental Disabilities Budget Supports Community-Based Programs



Approximately 91 percent of the Division's budget is dedicated to programs delivered through a network of 800 community providers, which further the ability of patients to remain in their community and live in the least restrictive environment possible.

Community programs include:

- In-home supports
- Residential services
- Support coordination
- Autism

In-Home Supports

Traditional in-home supports provided to individuals who live in their own home or with their family.

Residential Services

For those who are unable to remain in their own home or with family, residential services are provided within group homes, apartments, supported living and Intermediate Care Facilities, and include 24-hour support and oversight of patients.

Support Coordination

Every individual eligible for DD services is assigned a support coordinator who works with the patient and their family to develop a specialized service plan and ensure that services are delivered effectively.

Autism

Through five local parent advisory committees, autism funding is used to provide individual intervention services and parent trainings.

In addition to its community services, the Division operates several state-owned facilities. The majority of patients served through the state-operated facilities are diagnosed with severe or profound developmental disabilities. The goal of the treatment is to help patients prepare for and transition effectively from the facility to less restrictive community settings. State habilitation centers also provide crisis care to patients in need of short-term evaluation and crisis services.⁴

Changing Service Delivery for Clients with Developmental Disabilities

Over the last decade, the Division of Developmental Disabilities has made a fundamental shift in how it provides services, moving from a crisis model to a prevention framework.

The Division has focused its services to be consumerdriven and flexible, and to provide care in the leastrestrictive setting possible, with an emphasis of helping Missourians with developmental disabilities remain in their own homes or with their families.

As a result, the Division has reduced the number of patients served through habilitation centers from 1,011 in 2006 to an estimated 384 today. Not only is this shift in care beneficial for patients and families, it is cost-effective.⁵

Shifting Services to the Least Restrictive Environment is Cost-Effective

Annual Cost of In-Home Supports v. Residential Care, Per Client, FY 2015

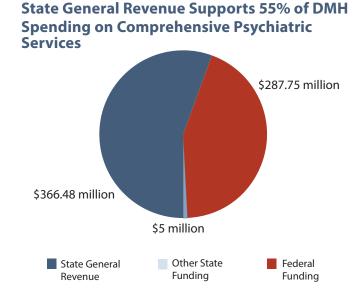
In-Home	Residential	
Care	Treatment	
\$9,795	\$84,972	

Behavioral Healthcare - Comprehensive Psychiatric Services

The largest proportion of DMH clients are served through the Division of Behavioral Healthcare – Comprehensive Psychiatric Services,

The division prioritizes services for:

- people with a serious mental illness
- individuals and families in crisis
- people who are homeless and mentally ill;
- individuals committed for treatment by the court system, and
- children with severe emotional problems.⁶



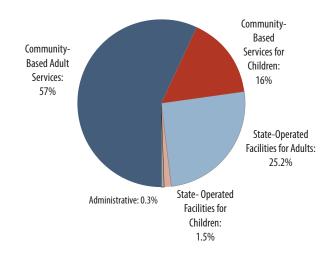
The Division provided services to 77,224 adults and children with severe mental illness in 2015. Approximately 20 percent of the patients receiving Comprehensive Psychiatric Services are children.

Behavioral Healthcare - Comprehensive Psychiatric Services

The Division of Behavioral Healthcare-Comprehensive Psychiatric Services has also transitioned to supporting patients in the least restrictive environment that meets the patient's specific needs, which is often through communitybased care.

- Only 3% of the patients served each year, including children and adults, are served in a residential setting.
- Nearly 3/4 of the spending on comprehensive psychiatric services is used to support community-based care.
- The transition to community-based care not only results in more appropriate care for patients, but the care tends to be much more affordable than in-patient treatment.

Nearly 75% of Comprehensive Psychiatric Services Spending Supports Community-Based Care



Community-Based Services for Adults

Community Mental Health Centers (CMHCs) administer ommunity-based services for adults.

- The community-based nonprofits provide psychiatric treatment and community-based supports, including
 medications, therapy, supported employment, housing and 24- hour crisis intervention services to
 Missourians with serious mental illness.
- Services are prioritized for individuals discharged from state hospitals, individuals under the supervision of probation and parole, individuals eligible for Medicaid and individuals in crisis.
- The community-based residential setting program provides supports that help individuals with severe mental illness maintain their housing in order to successfully live and work in their communities.⁷

In 2015, an estimated 56,556 adult patients were served through these providers.

An additional 2,785 adult patients were served in community-based residential settings, including care facilities, group homes and independent supported housing.

Community-Based Services for Children & Youth

Community programs serving children with serious emotional disorders through the Division of Behavioral Health – Comprehensive Psychiatric Services are designed to promote community and family integration using a comprehensive system of care approach.

- Services include: community treatment, crisis intervention, case management, psychotherapy, respite, day treatment, and medication.
- The Division prioritizes services for children who are at risk of placement outside the home or who are transitioning from a DMH supported placement out of their home.⁸

99% of the 16,321 children served by the division in 2015 were cared for in community-based settings.

State-Operated Inpatient Facilities for Adults:

The Division of Behavioral Health also operates six inpatient hospitals which provide long-term inpatient hospitalization and psychiatric treatment for individuals with serious mental illness who cannot be treated in community settings and require treatment in a secure facility.

The patients served through these facilities are those that are deemed to be a danger to themselves or others and are generally committed by the courts or the Missouri Corrections system, including individuals who are committed by the criminal courts, civilly committed sexually violent predators, individuals committed by probate courts and individuals admitted by guardians.

State-Operated Inpatient Care for Children:

Missouri provides inpatient and residential treatment for children in crisis or at serious risk of harming themselves or others through Hawthorn Children's Psychiatric Hospital.

- Many of the children served are dually diagnosed with intellectual disabilities, requiring enhanced safety measures and staffing.
- Services include behavior modification, counseling, medication management, social services, therapeutic recreation, special education, art therapy, physical evaluation, and other consultations as needed.
- The goal is to return children to less restrictive settings as soon as possible and with the optimal level of functioning.

Behavioral Health – Comprehensive Psychiatric Services Average Annual Cost Per Client, Estimated 2016

Children		Adults	
Community Based Services	\$5,131	Community Based Services	\$5,668
State Operated Facilities	\$58,741	State Operated Facilities	\$95,053

Behavioral Health Care - Alcohol & Drug Abuse Treatment

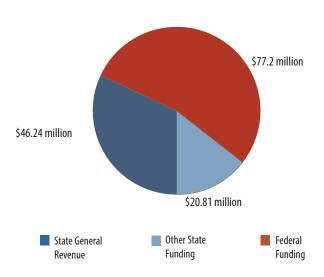
Alcohol and drug abuse treatment is provided through nonprofit community organizations and can include detoxification, assessment, day treatment, individual and group counseling, family therapy, group education, physician services and medications, and community support.

- Residential support and 24-hour supervision are also available when needed.
- Priority is given to pregnant women, intravenous (IV) drug users, and certain referrals from other state agencies.
- The services account for just over seven percent of the overall DMH budget.

The Division of Behavioral Healthcare - Alcohol and Drug Abuse Treatment provides prevention and treatment services to an estimated 61,029 Missourians.

Federal Funding Supports More than Half of DMH Spending for Alcohol & Drug Abuse Treatment

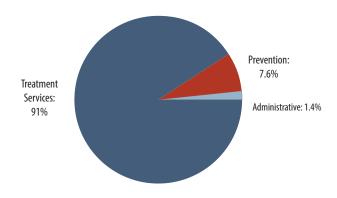
FY 2017 Appropriations



Services are provided through two primary programs: Primary Recovery Plus (PR+) and Comprehensive Substance Treatment and Rehabilitation (CSTAR).

- CSTAR is the only substance use disorder treatment program in Missouri that is reimbursed under Medicaid.
- The following programs for specialized populations are available under the CSTAR model: Women and Children, Adolescents, and individuals with opioid dependence.
- The Primary Recovery Plus (PR+)
 program is modeled on the CSTAR
 Program and provides services to
 Missourians who are not eligible for
 Medicaid.

More than 90% of DMH Alcohol & Drug Abuse Spending Supports Treatment



Notes

- 1. Missouri General Assembly Appropriations Staff, "FY 2017 TAFP Tracking Sheet" and "FY 2017 Conference Committee Worksheets.
- 2. Missouri Department of Mental Health
- 3. Missouri Executive Budget for Fiscal Year 2017, Department of Mental Health Budget Request
- 4. Ibid.
- 5. "Moving the System Forward," Missouri Division of Developmental Disabilities, February 15, 2012; and Missouri Executive Budget for Fiscal Year 2017, Department of Mental Health Budget Request
- 6. Missouri Executive Budget for Fiscal Year 2017, Department of Mental Health Budget Request; DMH maximizes state general revenue by ensuring each consumer's Medicaid eligibility is established in a timely manner and that Medicaid reimbursable services/programs are accessible.
- 7. Ibid 3.
- 8. Ibid 3.