

Approved: March 15, 2012  
(February 9, 2012)

MINUTES OF THE JOINT CORRECTIONS AND JUVENILE JUSTICE AND HOUSE  
CHILDREN AND FAMILIES COMMITTEES AT 9:00 AM ON THURSDAY,  
FEBRUARY 9, 2012, IN ROOM 546-S OF THE CAPITOL

The meeting was called to order by Chairperson Mike Kiegerl at 9:05 AM on Thursday, February 9, 2012 in Room 546-S of the Capitol.

All members were present except:

Robert Brookens, Excused  
Ward Cassidy, Excused  
Jana Goodman, Excused  
Jim Kelly, Excused  
Lance Kinzer, Excused  
Tom Moxley, Excused  
Gregory Smith, Excused

Committee staff present:

Jackie Lunn, Committee Assistant  
June Christensen, Committee Assistant  
Renaë Jefferies, Office of the Kansas Revisor of Statutes  
Sean Ostrow, Office of the Kansas Revisor of Statutes  
Jason Thompson, Office of the Kansas Revisor of Statutes  
Robert Allison-Gallimore, Kansas Legislative Research Department  
Lauren Douglass, Kansas Legislative Research Department  
Martha Dorsey, Kansas Legislative Research Department  
Jay Hall, Kansas Legislative Research Department

Conferees appearing before the Committee:

State Senator Dick Kelsey  
Dr. Bill Craig, President, Lakemary Center  
Heather Morgan, Public Affairs Officer, United Methodist Youthville  
Mike Hammond, Executive Director of Association of CMHCs (Community of Mental Health Centers) of Kansas, Inc.)  
Gary Haulmark, Interim Deputy Secretary of Disability Behavior Health Services  
Linda Wiles-Davis, Parent

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Unless specifically noted, the individual remarks recorded herein have not been transcribed verbatim. Individual remarks as reported herein have not been submitted to the individuals appearing before the committee for editing or corrections.

## CONTINUATION SHEET

MINUTES OF THE JOINT CORRECTIONS AND JUVENILE JUSTICE AND HOUSE CHILDREN AND FAMILIES COMMITTEES AT 9:00 AM ON THURSDAY, FEBRUARY 9, 2012, IN ROOM 142-S OF THE CAPITOL

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### Written Testimony:

Bruce Linhos, Executive Director, Children's Alliance of Kansas

Melissa Ness, JD, Advocacy Coordinator of St. Francis Center Services

### Others in attendance:

See attached list.

Chairperson Kiegerl called the meeting to order.

Co-chairperson Colloton reviewed the issues to be accomplished with the committee.

Co-chairperson Colloton opened the informational hearing on Psychiatric Residential Treatment Facilities (PRTFs). She introduced Senator Dick Kelsey, who said he had no financial interest in the PRTFs and had not received any financial compensation. He expressed the belief that this issue is a result of managed-care where young people are not being placed in PRTFs or mental health nursing homes but rather in detention, shelters, Youth Residential Center 2s (YRC2s) or neglected altogether. He cited examples of two young women who attempted to take their lives while in the YRC2 and who had not been screened into the PRTFs as they should have been. He said the screenings should be done by an outside party that does not have any financial interest, noting that \$2.9 million dollars was paid to Kansas Health Solutions (KHS). (Attachment 1).

Dr. Bill Craig, President and CEO of Lakemary Center, said that Lakemary is a not-for-profit organization in Paola that focuses on the needs of children with developmental disabilities and acute disabling psychiatric conditions. It has seen a considerable decrease in admissions as a result of the managed-care program that began last year. Children are being returned to the home communities without adequate preparation of therapy services necessary for the safety of the child, family, and community. He recommended:

1. Eliminate the financial incentive link between mental health center funding and PRTF utilization
2. Modify the PRTF Medicaid plan to allow for billing post-discharge support and therapy services
3. Separate DD (developmental disabled) and MI (mentally ill) from the KanCare umbrella. (Attachment 2).

Heather Morgan, Public Affairs Officer for Youthville, presented information regarding the facility. It is a nonprofit agency specializing in foster care, adoption, residential treatment, and counseling and provided programs and services to more than 4500 families in FY 2011. Because

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of the sharp reduction in PRTF referrals since January 2011, the services at the Dodge City and Newton facilities have been severely curtailed. The Newton facility, with the exception of its Secure Care (the only state program for runaway youth offering this level of care) will close, and those services will be moved to Dodge City. Seventy-nine Newton employees will receive 60-day lay-off notices as a result of the screening procedures ([Attachment 3](#)).

Michael Hammond, Executive Director of the Association of CMHCs, which represents 27 licensed CMHCs that provide services to all 105 counties 24 hours a day/7 days a week. It serves adults with severe and persistent mental illness (SPMI) and children/adolescents who have serious emotional disturbance (SED). Because of the high utilization of the PRTFs, the community-based systems were being underutilized, and costs were increasing. The primary goal was to reduce overutilization of services by the PRTFs with estimates of savings for \$6.8 million for 2011 and \$17 million for 2012. ([Attachment 4](#)).

Gary Haulmark, Interim Deputy Secretary of Disability Behavior Health Services, spoke on behalf of the agency. Beginning in June 2011, credentialed SRS mental health staff has reviewed every PRTF screening and discharge to ensure appropriate decisions were made. Since the practice was initiated, no child has been screened out of a PRTF as a result of the decision, and he stressed that they would err on the side of caution and admit children that needed to have the necessary treatment. A letter was sent to the youth service providers that if they believed residential treatment was necessary, they could request screening, which must be done within seven (7) calendar days from the request. ([Attachment 5](#)).

Several questions were asked of the presenters regarding daily cost, what is happening to the children, where they are being referred, and what treatment options are there for those who are not being qualified for the PRTFs.

Written testimony was received from the Children's Alliance ([Attachment 6](#)), and Melissa Ness, JD, Advocacy Coordinator for Saint Francis Community Services. ([Attachment 7](#)).

Linda Wiles-Davis addressed the committee and said she and her husband had been Kansas residents since 1975 and had adopted a daughter in 1982, who was later determined to be mentally ill. The daughter then had a son, born in 1998, who suffered many kinds of abuse in addition to the death of a baby brother. At age 6, he was in their temporary custody, but he was put in SRS custody and reintegrated with his mother. During the time he was with her, some very bad abuse happened to him. He was put in permanent custody with the grandparents and has been diagnosed with multiple disorders for which many kinds of treatment have been

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utilized. He was making good progress in his third PRTF placement, but due to the budget restrictions, did not screen for continued placement and was returned home. No treatment was provided, and after numerous police calls, bizarre behaviors, and ultimately, a sexual attack on her (grandmother), he was finally screened back into a PRTF, where he remains. She said she is concerned that he might be discharged again, and despite people urging them to give up custody, they have acted responsibly to take care of him. She concluded with the hope that there would someday be an integrated child- or family-centered system to provide a continuum of supportive services to those in need. (Attachment 8).

The meeting was adjourned at 10:45 a.m.