



Proponent Testimony of HB 2669  
For the Senate Education Committee  
March 19, 2024  
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Chair Baumgardner and Members of the Committee, thank you for the opportunity to provide neutral testimony regarding HB 2669 on behalf of Community Care Network of Kansas. Community Care is the primary care association for the state of Kansas, representing a network of 28 health clinics delivering care at over 100 sites across Kansas. The majority of our members are federally qualified health centers (FQHCs) or FQHC look-alikes, as designated by the federal Health Resources and Services Administration (HRSA). Together, this network of clinics served nearly 350,000 unique patients through more than 1.1 million patient visits in 2023.

The clinics that make up our network share a vision that all Kansans will be able to achieve and maintain their ideal health. This will only happen when all Kansans have access to high quality healthcare, so increasing access drives what our network does. When our members decide where to locate clinic sites and which services to provide, community needs are considered above any other factor. Access is what drives our advocacy; we only advocate for or against policies when we see an opportunity to preserve or increase access to care.

Behavioral health services are becoming a more significant part of what our members do. The number and share of patient visits to member clinics have grown steadily in the last few years; data reported to the federal Health Resources and Services Administration (HRSA) show that in 2022, more than ten percent of patients' visits to our FQHC members were for behavioral health reasons, with as many as 20 percent addressing behavioral health needs when primary care or other services were being provided, resulting from the health center's integrated care approach. Those same reports shows that health centers employed nearly 100 licensed mental health professionals in Kansas. Our health centers' integrated care model recognizes that physical and behavioral health issues interact, and emphasizes the importance of addressing them simultaneously. Research shows that such integrated care improves both physical and behavioral health outcomes.

That same desire to address unmet community needs has led many of our members to open health center sites in schools. At least nine health centers operate a combined 69 sites that are recognized by HRSA as school-based health centers. Some of these sites are open only a few hours per week and may offer only behavioral health services or dental screenings, but more than half are open at least 40 hours per week and most of those offer a full complement of integrated physical and behavioral health care. Health centers are established mental health providers in a number of schools and trusted physical and behavioral health partners in several school districts in the state.

Our members' presence in so many schools reflects their understanding that having health services—including behavioral health services—in schools is critical. The Mental Health Intervention Team (MHIT) program reflects that same understanding, and our clinics support making it a permanent program.

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There is ample anecdotal evidence of the program's success, and the growing number of school districts that want to participate is also an indicator of its success. We therefore support what this bill intends to do: making it an ongoing program in statutes, instead of a pilot program that relies on budget provisos for its continued existence.

The House Committee on Health and Human Services amended this bill to clarify that in addition to community mental health centers, other organizations are eligible to serve as the "mental health intervention team provider" in partnership with a school district. That amendment specifically named FQHCs within the definition of a "mental health intervention team provider."

House Bill 2669 provides stability for the Mental Health Intervention Team program and ensures that FQHCs will have an opportunity to participate. We support the passage of this bill as amended.