



Association of Community Mental Health Centers of Kansas, Inc.

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Testimony to Senate Public Health and Welfare Committee on HB 2578

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Chair Gossage and members of the Committee, my name is Kyle Kessler. I am the Executive Director for the Association of Community Mental Health Centers of Kansas, Inc. The Association represents the 26 licensed Community Mental Health Centers (CMHCs) in Kansas that provide behavioral health services in all 105 counties, 24-hours a day, seven days a week. In Kansas, CMHCs are the local Mental Health Authorities coordinating the delivery of publicly funded community-based mental health services. As part of licensing regulations, CMHCs are required to provide services to all Kansans needing them, regardless of their ability to pay. This makes the community mental health system the “safety net” for Kansans with behavioral health needs.

We appreciate the opportunity to testify in strong support of HB 2578.

In 2021, the Kansas Legislature approved monumental legislation to transform the community mental health system through implementation of the Certified Community Behavioral Health Clinic (CCBHC) model. This is truly a game-changer for Kansas CMHCs. At this point, 25 CMHCs have achieved at least provisional certification status as CCBHCs, and the last one is expected to do so this year.

The additional resources provided through this model of care have allowed CMHCs to address workforce challenges by becoming more competitive employers with the ability to more effectively recruit and retain scarce human resources. Even more importantly, they have been able to implement desperately needed new services to their communities including additional prevention services, expanded substance use disorder treatment, and mobile crisis response.

The Substance Abuse and Mental Health Services Administration (SAMHSA) outlines the requirements of the CCBHC model in great detail in the “CCBHC Certification Criteria,” which include everything from expectations for governance, to staffing requirements, to care coordination and scope of services. In addition, the model requires implementation of specific evidence-based programs; reporting on encounter, clinical outcomes, and quality improvement data; and a comprehensive crisis response system.

In order to achieve CCBHC certification, CMHCs must complete a needs assessment, a thorough cost report, attest to the fact that they can meet the CCBHC criteria, and successfully pass an in-person, formal site review. These increased standards are commensurate with the increased resources and

accountability for CCBHCs. HB 2578 would allow for a streamlined approach to recertification for existing CCBHCs for those clinics who have previously achieved certification from the Kansas Department for Aging and Disability Services (KDADS) and have also been accredited by the commission on accreditation of rehabilitation facilities, the joint commission, or another national accreditation body as approved by the secretary of KDADS. This bill will keep our CCBHCs up to date with changes at the national level for CCBHCs and mirrors what we have in statute for CMHCs already.

Furthermore, the bill would clarify what we believe to have been the original legislative intent to allow only licensed CMHCs to be certified as CCBHCs. This could be deduced from both the discussions in the Mental Health Modernization and Reform Committee (MHMRC) in 2020 as well as the fact that CMHCs were the only providers that testified on the enabling legislation in 2021. The legislation also was recommended by three other legislative interim committees in 2020 including the Legislative Budget Committee, Child Welfare Oversight Committee, and the Robert Bethell Kancare Oversight Committee. At no time, did any standing or interim committee suggest or study the addition of non-CMHCs to be certified as CCBHCs.

Thank you for the opportunity to provide testimony, and I will stand for questions at the appropriate time.