

February 8, 2024

The Honorable Brenda Landwehr, Chairperson
House Committee on Health and Human Services
300 SW 10th Avenue, Room 112-N
Topeka, Kansas 66612

Dear Representative Landwehr:

SUBJECT: Fiscal Note for HB 2669 by House Committee on Health and Human Services

In accordance with KSA 75-3715a, the following fiscal note concerning HB 2669 is respectfully submitted to your committee.

HB 2669 would create the Mental Health Intervention Team (MHIT) Program Act by making changes to the program that has operated in proviso from year to year. The program would be moved from the Kansas State Department of Education to the Kansas Department for Aging and Disability Services (KDADS) and would require KDADS to hire a Program Manager and necessary supplement staff to oversee, coordinate, and fund the program. The bill would also increase the amount of the Community Mental Health Center (CMHC) pass through grant from 33.0 percent to 50.0 percent. The bill would require reports to be submitted semi-annually and annually to the Legislature regarding the program data and outcomes. The bill would also create the MHIT Program Fund.

The MHIT Program would provide greater access to behavioral health services for students enrolled in kindergarten through grade 12 and establish a coherent structure between school districts and community mental health centers to optimize scarce behavioral health resources and workforce. The Program would identify students, communicate with families, and link students and their families to the statewide behavioral health systems and resources within the network of community mental health centers. This connection would alleviate the shortage of staff with specialized degrees or training such as school counselors, psychologists and social workers and reduce the competition for such staff between school districts and other private and governmental service providers to provide broader-based and collaborative services to students, especially in rural districts that do not have enough students to justify a full-time staff position. The Program would provide and coordinate mental health services for students throughout the calendar year, not only during school hours over nine months of the school year. It would also reduce barriers that families experience to access mental health services and maintain consistency for a child to attend recurring sessions and coordination between the child's classroom schedule and the provision of such services. In each school year, the Board of Education of a school district could

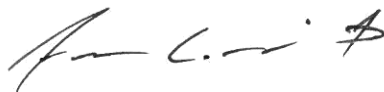
apply to KDADS to establish or maintain a MHIT Program within such school district. Some reimbursement of cost would be available through grant monies.

KDADS indicates that enactment of HB 2669 would have a fiscal effect on expenditures of the agency. The bill would require the establishment of 1.00 FTE MHIT Program Manager, 3.00 FTE MHIT program staff, and 2.00 FTE administrative staff to support the program at KDADS. For FY 2025 and beyond, KDADS estimates the total increase of 6.00 FTE positions at a cost of \$588,705 from the State General Fund. The increased expenditures would include salaries, fringe benefits, and other operating expenses for the six positions. The bill would increase revenues for KDADS based upon the funding passing through the agency to schools, but the amount of revenue is not known at this time.

The Department for Children and Families and the Kansas State Department of Education indicate that enactment of HB 2669 would have no fiscal effect on the respective agencies. Any fiscal effect associated with HB 2669 is not reflected in *The FY 2025 Governor's Budget Report*.

The Kansas Association of School Boards (KASB) indicates that enactment of the bill would not require a school district to implement a MHIT Program with local mental health service providers. The bill would not have a fiscal impact on districts electing not to enter into these situations. If a school district enters into such an arrangement, it is generally required that they employ a school liaison to interface with the CMHC, unless a waiver is granted. There would be the possibility of at least one full-time employee being needed for the school district to implement the program as well as any associated costs. There would be the cost to CMHC to employ one or more therapists and case managers for use in this program, as well. Although grants are available, there is no assurance there will be enough grants distributed to cover costs. The available grants include a MHIT Program grant and a CMHC pass-through grant. The pass-through grant would be 50.0 percent of the amount of the previously mentioned grant, and that money would go to the community mental health service provider instead of the school district. There would undoubtedly be overhead costs involved for all partners in these efforts that would not be covered by grant monies. KASB states that it does not have adequate data to estimate what those costs may be or how many districts would opt-in for such a program.

Sincerely,



Adam C. Proffitt
Director of the Budget

cc: Gabrielle Hull, Department of Education
Kim Holter, Department for Children & Families
Leigh Keck, Department for Aging & Disability Services
Angie Stallbaumer, Kansas Association of School Boards