

Legislative and Public Policy

2019 PLATFORM



The Indiana Council of Community Mental Health Centers represents the collective interests of all community mental health centers (CMHCs) currently certified and accredited to provide community-based behavioral health services in Indiana's ninety-two counties. CMHCs in Indiana serve over 120,000 behavioral health consumers every year. CMHCs provide services primarily to those suffering from severe behavioral health and substance abuse conditions which further reduce additional costs to society by directing coordinated care to our most vulnerable citizens.

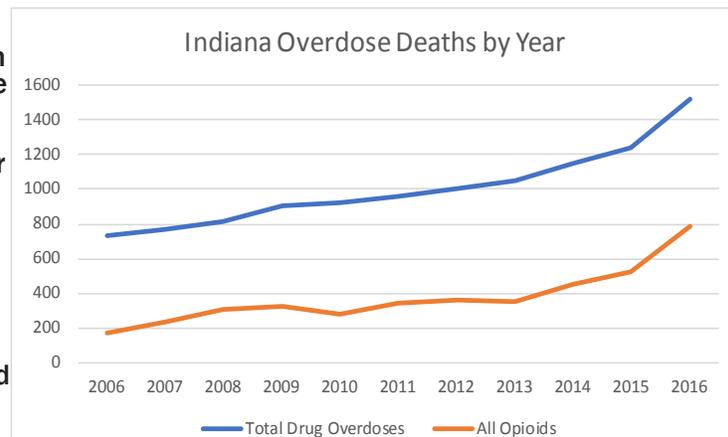
DIRECT FUNDS TO ENHANCE ACCESS TO MENTAL HEALTH AND SUBSTANCE USE SERVICES FOR INDIVIDUALS IN NEED OF COMMUNITY BASED TREATMENT.

As the opioid crisis continues in Indiana, there exists a compelling need to direct funds and resources towards gaps in treatment for community-based services for those with mental health and substance use disorders. Monies dedicated toward the criminal justice system and state operated facilities reduce resources available to treat persons suffering with mental health and substance use disorders in their communities. The Indiana Council supports expanded service delivery to increase access to treatment while reducing the economic burden associated with state-funded service delivery.

ADDICTION TREATMENT TEAMS: Addiction treatment teams act as a community-based service delivery system intended to serve those in an outpatient setting. The Indiana Council supports Medicaid reimbursement for this program via a bundled rate in order to better treat patients in medically underserved areas while enhancing access to care and provide additional treatment options.

PARTIAL HOSPITALIZATION: Partial hospitalization serves as a supervised day treatment to provide patients utilizing an array of intensive services. This important program is a less expensive alternative to inpatient hospitalization, while providing an enhanced level of engagement for those suffering from mental health and addiction disorder. The Indiana Council is requesting this critical service be once again authorized as an billable service under the Medicaid Rehabilitation Option program.

ENHANCING ACCESS FOR SCHOOL-BASED SERVICES: School-based mental health services are critical in meeting the continuum of care for youth suffering with mental health and substance abuse challenges, however gaps exist in the capacity to provide service to these vulnerable youth. A number of school children do not qualify for Medicaid services, yet their parents' commercial insurance does not authorize the level of comprehensive mental health and addiction treatment services required to address their unique behavioral challenges. As a result, the Indiana Council supports legislation enhancing access to school-based services through recommendations in the governor's 2018 school safety plan. Such an approach could have a profound effect in lessening the threat of school-based shootings and other behaviors endangering our most vulnerable Hoosiers, Indiana's children.



Source: Indiana State Department of Health

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Indiana Council of Community Mental Health Centers, Inc.

REDUCING ADMINISTRATIVE BURDENS IN COMMUNITY MENTAL HEALTH AND ADDICTION SERVICE DELIVERY

The current level of administrative burden faced by community mental health providers not only increases administrative expenses for our organizations but also effects the ability to provide direct behavioral health services, as scarce resources are being used to address administration requirements versus meeting the mental health and substance use needs of Indiana's residents. As such, the Indiana Council supports the reduction in governmental and managed care organization administrative burdens for community mental health centers through the following strategies:

PROVISIONAL CREDENTIALING: Authorize 30-day provisional credentialing required by (2018) HEA 1007 for Medicaid.

PROMPT PAYMENT STATUTE: Establishing a prompt payment statute for Managed Care Entities (MCEs) in the administration of Medicaid Program to ensure timely payments for clean claims and holding MCEs accountable for late payments in a manner similar to state and local government.

FEDERAL HOME AND COMMUNITY-BASED MENTAL HEALTH CARE STANDARDS: The Indiana Council supports legislation to postpone the Division of Mental Health and Addiction's implementation of Federal Home and Community-Based Standards until the last date required by federal law to allow Community Mental Health Centers the time necessary to implement the significant changes required through the federal rule. **FSSA Audit Activity:** The Indiana Council supports legislation to limit the "look-back" period for Medicaid audits to two (2) years, require appropriate notice to providers prior to an audit to allow sufficient time to prepare required documents and staff availability, eliminate the utilizing of the extrapolation process to determine possible repayment amounts to the level allowed by the Centers for Medicare and Medicaid, and formally relinquishing any outstanding audits still pending after seven (7) years.

ELEVATING THE STATUS OF ADVANCED PRACTICE REGISTERED NURSES: The Indiana Council supports changes in current law and administrative rules with respect to the ability of APRNs to provide mental health and substance use treatment and integrated primary care. This could be accomplished by elevating their own provider classification status beyond "midlevel" and reimbursing APRNs at a higher fixed percentage of physician pay schedule under Medicaid.

AUTHORIZE BUNDLED RESIDENTIAL TREATMENT RATE: Developing a bundled residential treatment rate under the Medicaid Rehabilitation Option (MRO) for both mental health and substance use treatment based on level of need in lieu of individual fee for services.

LEVERAGING SERVICES TOWARD CRIMINAL JUSTICE MENTAL HEALTH NEEDS

In the wake of the opioid epidemic, criminal justice-involved mental health consumers are actively seeking mental health and substance abuse services through the community mental health center system. Increased federal, state, and local funding is required to meet the demand for these services, in spite of recent efforts to address these challenges. While the State of Indiana should be commended for its efforts in responding to the opioid crisis, more needs to be done to ensure the crisis is addressed in a manner that meets need of Indiana's residents. The Indiana Council supports the creation of additional appropriations in the biennial budget intended to serve criminal justice-involved mental health consumers, especially misdemeanants through the Recovery Works program. We also support changes in the process used by the State of Indiana to allocate federal substance use treatment grant funding, by prioritizing these funds towards the community mental health center system to ensure funding is used for direct treatment and enhancing the substance use treatment infrastructure to adequately respond to the addiction crisis. The Indiana Council also supports the use of county rehabilitation funds, authorized as a local option income tax through HEA 1263-2018, to leverage additional local addiction rehabilitation services toward individuals in need of mental health and substance abuse treatment. Finally, the Indiana Council supports changes to the Indiana code that promote access to substance use treatment versus the criminalization of addicts to address their health conditions.

ACTION REQUIRED TO ADDRESS MENTAL HEALTH AND SUBSTANCE ABUSE WORKFORCE SHORTAGES

Student debt creates a substantial barrier to attracting potential mental health and substance abuse professionals. Given, low reimbursement rates for services provided by the community mental health center system, wages are not meeting the professional requirements of clinicians. This is resulting in a high turnover rate and the inability to attract qualified individuals to provide clinical mental health and substance treatment services. To address these challenges, the Indiana Council supports the creation of a licensure renewal fee for all health professionals to fund a loan forgiveness program specifically directed for mental health and substance abuse professionals. (IC § 21-44-6-4).



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