

SESSION OF 2026

**SUPPLEMENTAL NOTE ON HOUSE BILL NO. 2639**

As Amended by House Committee of the Whole

**Brief\***

HB 2639, as amended, would change the name of juvenile crisis intervention centers to juvenile stabilization centers throughout the Revised Kansas Code for the Care of Children (CINC Code) and the Revised Kansas Juvenile Justice Code (Juvenile Code) and would modify the intake criteria for, and the treatment and services provided by, such centers. The bill would also transfer money from the Evidence-based Programs Account (EBPA) in the State General Fund (SGF) to the Department for Children and Families (DCF) to provide juvenile stabilization services.

***Juvenile Stabilization Centers***

Under current law, a juvenile crisis intervention center is a facility that provides short-term observation, assessment, treatment and case planning, and referrals for any juvenile who is experiencing a behavioral health crisis and is likely to cause harm to self or others. The bill would rename this type of center a juvenile stabilization center.

***Services Provided***

The bill would specify that such stabilization centers must provide services to the juvenile and the juvenile's family, including, but not limited to, parent skill-building, family and individual communication skill-building, and case management supports as necessary to address the immediate needs of the juvenile and the juvenile's family. The

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\*Supplemental notes are prepared by the Legislative Research Department and do not express legislative intent. The supplemental note and fiscal note for this bill may be accessed on the Internet at <https://klrd.gov/>

bill would also provide that such centers allow access to faith-based services.

The bill would also allow such centers, as needed to support the safety and stability of the juvenile and the juvenile's family, to:

- Be available to serve juveniles 24 hours a day, seven days a week;
- Provide short-term stabilization services for continuous stays; or
- Provide respite periods throughout the day or night.

#### *Admittance Criteria*

Under current law, a juvenile may be admitted to a juvenile crisis intervention center when:

- The head of such center determines such juvenile is in need of treatment and likely to cause harm to self or others;
- A qualified mental health professional from a community mental health center has given authorization for such juvenile to be admitted to a juvenile crisis intervention center; and
- No other more appropriate treatment service is available and accessible to the juvenile at the time of admission.

The bill would provide that admittance to a juvenile stabilization center would occur when the head of such center determines a juvenile is in need of stabilization services and would benefit from treatment provided by such center. The bill would further require that priority for admission be given to cross-over youth. "Cross-over youth" would be defined by the bill as a young person 10 years of age or older who is at risk

of being adjudicated as a child in need of care due in whole or in part to conduct or involvement in the juvenile justice system or allegations that could result in involvement in the juvenile justice system.

The bill would allow a juvenile to be admitted to a juvenile stabilization center for not more than 90 days and no more than three times within a 12-month period.

### *Discharge*

The bill would amend law on procedures involving the discharge of a juvenile to require that a juvenile stabilization center coordinate discharge planning and facilitate timely referral and connection to appropriate community-based services for ongoing care.

### ***Rules and Regulations***

The bill would require the Secretary for Children and Families (Secretary) to promulgate rules and regulations to implement the bill's provisions on or before January 1, 2027, and would prohibit such rules and regulations from containing any requirement:

- That the juvenile stabilization center have a licensed physician, dietician, clinical director, psychiatrist, advanced practice registered nurse, or any other medical professional on staff;
- Prohibiting juveniles who are admitted to such centers from sharing rooms or being placed in rooms that are in the basement of such facility;
- That a juvenile stabilization center notify or obtain approval from a local school district prior to obtaining licensure;

- Related to gender-based staffing; or
- Staffing ratios beyond the levels for youth residential facilities as defined in the CINC Code.

### ***Report to Legislative Committees***

The bill would require the Secretary to annually report information on outcomes of juveniles admitted into juvenile stabilization centers to the J. Russell (Russ) Jennings Joint Committee on Corrections and Juvenile Justice Oversight and the Joint Committee on Child Welfare System Oversight.

### ***References in CINC Code and Juvenile Code***

The bill would replace references to “juvenile crisis intervention centers” with “juvenile stabilization centers” throughout the CINC Code and Juvenile Code. The bill would also remove references to “written authorization by a community health center” throughout the CINC Code and Juvenile Code to reflect such authorization is not needed for a child to be admitted to a juvenile stabilization center under the bill.

### ***Evidence-Based Programs Account Transfer***

The bill would require on July 1, 2026, July 1, 2027, and July 1, 2028, or as soon thereafter as moneys are available, the Director of Accounts and Reports to transfer \$4 million from the EBPA to a Special Revenue Fund of the DCF designated by the Secretary for juvenile stabilization services.

### ***Referral and Transport to Juvenile Stabilization Center***

The bill would amend law concerning juvenile intake and assessment to provide that if a child is conditionally released to the child's parent or guardian, such conditions could include a referral of the child to a juvenile stabilization center.

The bill would also amend law concerning juvenile intake and assessment to specify that upon request of a parent, guardian, custodian, or juvenile intake and assessment worker, law enforcement could assist with the safe transportation of a juvenile to an appropriate placement, including a juvenile stabilization center, when such assistance is necessary to ensure the safety of the juvenile or others. The bill would state such assistance could not be construed as an arrest, detention, or criminal custody.

### **Background**

The bill was introduced by House Committee on Child Welfare and Foster Care at the request of Representative Howerton.

### ***House Committee on Child Welfare and Foster Care***

In the House Committee hearing, Representative Howerton, the Child Advocate, and representatives of the Children's Alliance of Kansas and Gathered provided **proponent** testimony on the bill. Proponents generally stated the purpose of the bill is to provide services to youth who are currently not receiving them and to prioritize those youth who are involved in both the juvenile justice system and the child-in-need-of-care system.

The Sedgwick County Sheriff and representatives of O'Connell Children's Shelter and Project Heaven provided written-only proponent testimony.

**Neutral** testimony was provided by representatives of DCF and the Kansas Department for Aging and Disability Services, who suggested amendments to provide consistency across statutes and to ensure the centers created by the bill could bill Medicaid for covered services.

Written-only neutral testimony was provided by representatives of the Juvenile Justice Oversight Committee and Kansas Appleseed.

**Opponent** testimony was provided by a representative of the Kansas Community Corrections Association, who expressed concerns with the mandatory detention provisions of the bill.

No other testimony was provided.

The House Committee amended the bill to:

- Reinstated the definition of “behavioral health crisis” in the CINC Code and Juvenile Code;
- Removed language that would have allowed law enforcement to take a child into custody when such officer reasonably believes that the child is in need of stabilization;
- Reinstated references to a “child experiencing a behavioral health crisis” throughout the bill;
- Modified language concerning how long and how frequently a juvenile may be admitted to a juvenile stabilization center;
- Modified the services that are provided by juvenile stabilization centers;
- Removed language concerning annual funding of juvenile stabilization centers;

- Modify the definition of “cross-over youth”;
- Remove language that would have modified the definition of “behavioral health crisis” in law concerning parental consent for minors receiving health care at school;
- Modify the amount of money to be transferred from the EBPA to DCF’s Special Revenue Fund for juvenile stabilization services;
- Remove language that would have required the court to approve an override function of the detention risk assessment tool in certain circumstances; and
- Add language allowing law enforcement to assist with the safe transportation of a juvenile to an appropriate placement when necessary.

### ***House Committee of the Whole***

The House Committee of the Whole amended the bill to specify the \$4 million transfer from the EBPA to the DCF Special Revenue Fund would occur on July 1, 2027, and July 1, 2028, in addition to July 1, 2026.

### **Fiscal Information**

According to the fiscal note prepared by the Division of the Budget on the bill, as introduced, DCF and the Office of Judicial Administration indicate that enactment of the bill would have no fiscal effect on the agency or the courts.

The Kansas Department of Corrections indicates that enactment of the bill would not have a fiscal effect on the department as the transfer is currently ongoing. With continued lapses and statutorily directed funding from the EBPA, this account is projected to have a negative balance

starting FY 2028. Funding may not be available for these purposes in the next few years. There would be an impact on local communities, as detention per diem costs are assessed in the counties where the youth reside or where detention is being ordered. Most detention centers charge between \$120-\$150 per day per youth. A policy requiring mandatory detention would mean higher costs for county governments.

Children and minors; juvenile crisis intervention centers; juvenile stabilization centers; Evidence-Based Programs Account; Department for Children and Families