



Testimony to the House Committee on Federal and State Affairs on House Bill 2517

534 S. Kansas Ave, Suite 330, Topeka, Kansas 66603

Telephone: 785-234-4773 / Fax: 785-234-3189

www.acmhck.org

February 15, 2018

Mister Chairman and members of the Committee, my name is Colin Thomasset. I am the Associate 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 mental health needs.

Research shows an increase in mental health treatment needs across the country and Kansas is no exception. CMHCs treated over 135,000 Kansans last year that ranged in acuity from moderate mental health treatment needs to adults with Severe and Persistent Mental Illness such as schizophrenia and children with Severe Emotional Disturbance. This is an increase of more than 10,000 patients than the previous year.

Our Association appreciates the opportunity to testify today in support of House Bill 2517 which would provide funding for community crisis stabilization centers across Kansas.

We feel that having robust crisis intervention options available in our communities can lead to positive outcomes not only for our patients, but also for their families, in addition to our community partners. Being able to avoid an involuntary commitment and receive treatment in one’s own community is the direction we should be heading in the public mental health system. Given the ongoing moratorium on voluntary admissions to Osawatomie State Hospital, and the potentially unsafe conditions that may arise from psychiatric boarding of individuals in inappropriate treatment settings, we stand in strong support of being able to get people the right care, in the right place, and at the right time.

We currently have community crisis stabilization centers operating in Wyandotte and Johnson Counties through Rainbow Services Inc. (RSI), as well as Sedgwick, Shawnee, and Saline Counties. In addition, Douglas County is planning a large expansion, and there are three other CMHCs currently doing feasibility studies. In summary, we are trying to serve our local communities with the best array of services possible.

As the Governor mentioned in his speech last week to both chambers, we are in the process of rebuilding our community mental health center system. Additionally, he noted that RSI has been a model of providing crisis services through a partnership between the State, mental health centers, and local law enforcement. House Bill 2517 would be a big advancement in the goal of ensuring that these services are available to all Kansans by providing a dedicated revenue source.

Thank you for the opportunity to appear before the Committee today and we urge your support of House Bill 2517.