



Legislative Agenda 86th Legislature

Integral Care helps people build health and well-being so everyone has the foundation to reach their full potential. We support adults and children living with mental illness, substance use disorder and intellectual and developmental disabilities in Travis County. Our services include a 24-hour helpline for anyone who needs immediate support, ongoing counseling to improve mental health, drug and alcohol treatment to help with recovery, and housing to regain health and independence. Integral Care helps provide a strong foundation for well-being.

Integrated care, substance use and intellectual and developmental disability service capacity, adequate recovery supports, and appropriate diversion from emergency services and jails are among Integral Care's top priorities in behavioral health. Integrated care refers to primary and behavioral health integration as well as integration between substance use and mental health services. Integration is a best practice, offering comprehensive care with no wrong point of entry.

Currently, services for substance use disorder face challenges due to insufficient reimbursement rates and lack of community capacity. In alignment with best practice, we envision a continuum of community based services. These services should include community supports such as employment training and assistance, affordable housing, food security, peer supports and early childhood development to help individuals achieve and maintain recovery.

For individuals involved with the criminal justice system and have a mental illness, jails and emergency rooms are the most expensive places to get care. Post-discharge coordination and an interconnected, evidence-based system helps people access community-based services and avoid readmission.

In order for Integral Care to provide quality services to the people of Travis County, it is important to maintain its authority role with adequate support and flexibility to determine local plan requirements. LMHAs across the state have an important role in planning, developing policy, coordinating and allocating resources for mental health services in their local service areas. Each LMHA faces unique challenges and need to address them in a way that is best suited for their area and population.

1. **Austin State Hospital Brain Health System Redesign:** Support continued legislative investment, innovation and collaboration toward the system redesign of the Austin State Hospital by building a robust, interconnected and evidence-based system of care. Championed by Senator Watson and Senator Schwertner, the planning will include the Comprehensive Inpatient Mental Health Plan as part of the budget and phased approach to rebuilding the state hospital facility. Recommendation for a temporary-group home placement on the Austin State Hospital campus for individuals with severe behavioral challenges who are dually-diagnosed with intellectual and developmental disabilities (IDD) and co-occurring mental illness. Currently, there is no such support in the community, relegating these individuals to institutional care in one form or another. Continued legislative investment will strengthen and improve the mental health care and overall well-being for Central Texans, including a 38 adult and 75 children county region.

2. **1115 Medicaid Transformation Waiver:** Projects undertaken via the 1115 Medicaid Transformation Waiver have measurably improved our system of care and it is important to continue the support of the Waiver as it transitions to new requirements and modifications. The original Waiver is changing from a project focus to a system focus, which impacts funding and the future of projects like the Expanded Mobile Crisis Outreach Team (EMCOT) implemented in Travis County.
3. **Certified Community Behavioral Health Clinics (CCBHC):** The Excellence Act established a federal definition and criteria for Certified Community Behavioral Health Clinics (CCBHCs) and is intended to improve the outcomes of the behavioral health care system. Texas is 1 of only 10 states to adopt CCBHC standards and Integral Care is 1 of 8 CCBHC sites in Texas. Supporting the expansion and scope of this evidence-based care as well as compensation that adequately covers the cost of doing business will transform access to care in our community.
4. **Children's Crisis Services:** Increasingly, local providers report more children in crisis, lack of continuity of care and high utilization of the most intensive levels of care due to a lack of intermediate care options. Supporting coordinated crisis services and system improvements reinforces current systems with the goal of promoting wellness and effectively treating mental health disorders among children, particularly those with a co-occurring diagnoses of intellectual and developmental disabilities and mental health disorders.
5. **Substance Use Disorder Services:** Texas is in the top five states for total number of opioid related deaths and has the second highest opioid abuse related health care costs totaling over \$1.9 Billion. In order to create a robust continuum of effective interventions in Travis County, an increased level of funding and reimbursement rates, service availability and accessible integration with mental health services are necessary. Long-term investments are required in order to determine solutions and truly combat the opioid epidemic. Flexible funding and sufficient reimbursement to providers for cost of care are critical in supporting innovation and further integration of services. Increasing investment in family-specialized substance use treatment programs, expanding access to treatment for co-occurring conditions and improving treatment approaches to prevent and reduce justice involvement will help ensure recovery supports that will benefit our community.
6. **Housing Affordability and Availability:** Austin and Travis County are experiencing a significant increase in homelessness, with a reported 2,036 individuals in need of housing. Over 36% of these individuals are chronically homeless, experiencing long-term homelessness, living with intellectual and developmental disabilities, co-occurring mental health and substance use disorders and not able to access traditional housing. Stable housing and regular access to services are imperative to achieving and maintaining recovery.
7. **Parity:** Strengthen enforcement of and education regarding parity, ensuring that individuals are able to equitably access mental health and substance use services as required in HB 10 from the 85th Legislative Session.
8. **Workforce Development and Capacity-Building:** Increase the behavioral health workforce and encourage more psychiatry residency training positions through academic partnerships with LMHA's, child welfare and juvenile justice providers, and state-funded psychiatric hospitals. Workforce efforts should also focus on expanding the use of peers, as well as the use of technology including telemedicine and telehealth. Strengthen efforts to improve behavioral

health access in underserved populations, encourage diversity and collaboration, and help retain clinicians in rural areas.

9. **Value-Based Payment Equity:** Nearly 20% of Medicaid beneficiaries who have a behavioral health diagnosis account for almost half of total Medicaid expenditures. There is increased recognition that the use of Value Based Payment in Medicaid holds promise to improve quality and slow cost growth. Care should be taken to ensure that the financing models available to LMHA's and other mandated providers are flexible enough to align with the high-needs populations they serve.
10. **Health Equity:** To achieve a transformed, high-value, affordable, and equitable health care system, the communities most affected by inequities must be included in all phases of policy development, decision-making and implementation. Some disparities are clearly due to racial inequality, levels of childhood trauma, income inequality and stress, as well as a lack behavioral health services available to people with intellectual and developmental disabilities in Texas. Health equity is a better indicator of appropriate care and resource allocation.
11. **School Safety:** Texas falls short of the recommended ratios of mental health professionals to students. Workforce shortages should be addressed by expanding telemedicine to remotely screen students for mental health issues as well as increasing availability of school counselors, psychologists and social workers. Effective mental health programs in schools that are evidence-based, trauma-informed and involve different community partners are important in providing adequate mental health resources to students, particularly those with intellectual and developmental disabilities who are at greater risk of voluntary and involuntary institutionalization. Expand Mental Health First Aid training for school personnel with supports to accommodate for 8 hours of missed class time.
12. **Behavioral Health Waitlist:** Increase funding allocation to support efforts to decrease substance use disorder waitlists. Many individuals are on waitlists or receive minimal to no services due to resource limitations.
13. **Community Capacity for Individuals with High Needs:** To further strengthen efforts to ensure that individuals can access care in the least restrictive setting possible, our communities need increased capacity to support services for people with intellectual and developmental disabilities (IDD) and co-occurring mental illness, medical conditions and/or other complexities requiring additional care. Increased capacity in the form of specialized residential options is needed, especially for individuals diagnosed with IDD for whom there is little to no support currently available.
14. **Criminal Justice:** Establish programs that divert individuals with co-occurring mental health and substance use disorders and intellectual and developmental disabilities from the criminal justice system to community-based services prior to arrest. Further expand outpatient capacity to accommodate population growth, promote prevention, ensure ready access to outpatient care when needed, provide alternatives for patients who are diverted from incarceration and ensure access to services for individuals transitioning out of more intensive levels of care. Develop highly structured civil Assisted Outpatient Treatment programs in Travis County as well as jail based competency programs to reduce symptoms of mental illness with medications, nursing and counseling. Jail based competency programs reduce lengthy waits for hospital admission, help maintain ongoing outside support and increase hospital bed availability.