

# End of Session Report

## July 2021

The last year and a half has been a collectively challenging time for our communities, leading to increased mental health and substance use needs since the Covid-19 pandemic began. In recent data from the Centers for Disease Control and Prevention, drug overdose deaths rose close to 30% in the United States in 2020, hitting the highest number ever recorded. Considering the impact on the behavioral health needs of both adults and children over the past year of isolation, Integral Care, the Local Mental Health Authority (LMHA) and Local Intellectual and Developmental Disability Authority (LIDDA) for Travis County, is committed to ensuring that everyone has access to the mental health and substance use disorder resources they need.

Texas Legislators responded to the mental health needs of Texans through legislative action this session, appropriating **\$8.44 billion** to behavioral health across 25 state agencies, an increase of roughly \$350 million over the previous biennium. Telehealth flexibilities, collaborative care and children's mental health were just a few of the priorities for lawmakers this session. Like previous sessions, the Texas Legislature continues to invest resources to improve the quality of and access to behavioral health supports for communities across the state.

### Austin Brain Health System Redesign

In 2017, the Legislature directed the Texas Health and Human Services Commission (HHSC) to develop the Comprehensive Inpatient Mental Health Plan, which provided a six-year framework for rebuilding five of the ten state psychiatric hospitals. That plan included funds for Dell Medical School at The University of Texas at Austin to examine mental health care and treatment across the 38-county Austin State Hospital (ASH) service area. The systemic redesign that began with initial funding passed by the 85th Legislature and carried forward by the 86th, provided \$165 million for the biennium to construct the first phase of the replacement hospital.

This session, **HB2** – the supplemental budget bill – provides **\$124 million** from the Economic Stabilization Fund for Phase III of the ASH System Redesign. With full funding, the redesigned ASH is scheduled to open in June 2023. Continued innovation and collaboration toward the system redesign of ASH will create a more robust, interconnected and evidence-based system of care.

## Children's Services

The impact on the mental health of children over this past year of isolation, including increased risk of depression, anxiety and sleep disorders, added urgency to this year's session in addressing the well-being of youth. The legislature passed two bills that support student Social Emotional Learning (SEL) within schools:

- **HB 332** allows school districts to use compensatory education funds to provide programs that build skills related to managing emotions, establishing and maintaining positive relationships, and making responsible decisions.
- **SB 123** ensures SEL skills are integrated within state curriculum standards.

Emergency room visits for adolescent suicide attempts in the US soared this past summer and winter, especially among girls aged 12 to 17. Between February 21st and March 20th of this year, emergency department visits for potential suicide attempts were up **50.6%** compared to the same period in 2019, data showed.

- **HB 4074** requires the Statewide Behavioral Health Coordinating Council to prioritize data-informed suicide prevention efforts in its strategic planning and interagency coordinating efforts.
- **SB 279** requires student ID cards in grades 6-12 and higher education to include the contact information for suicide prevention crisis services.
- School counselors will now be able to focus more time on counseling with the passage of **SB 179**, reducing the time they spend on administrative duties.

**SB 1** increases the Texas Child Mental Health Care Consortium's funding by **\$19.5 million**, which will maintain funding levels for the Child Psychiatry Access Network (CPAN), Texas Child Health Access Through Telemedicine (TCHATT) and other key initiatives, including research areas crucial to understanding mental illness and improving care. **\$42 million** was appropriated to fund the state's ongoing shift to Community-Based Care for children in the foster care system. The passage of **HB 290**, after being added to **HB 2658** will help children keep their Medicaid health coverage by reducing midyear eligibility reviews from four reviews to just one, and provide 30 days, rather than 10 to gather and submit the requested documentation.

## Housing and Homelessness

Individuals experiencing homelessness were one of the hardest hit during the winter storm and Covid-19 pandemic. Latest figures show that in 2020 there were 27,229 individuals experiencing homelessness in Texas, a jump of about 5% from the previous year. There were a number of missed opportunities in the area of housing and homelessness this session including: prohibiting source of income/voucher discrimination, prohibiting housing discrimination based on gender identity and sexual orientation, expanding access to identification for individuals experiencing homelessness, requiring law enforcement to receive trauma informed care training, the George Floyd Act, and centralizing Texas' homeless data systems.

**HB 1925** created a statewide Class C misdemeanor criminal offense for sheltering in public without consent, punishable by a fine of up to \$500, making no exception for inclement weather events, individuals who lack access to housing and adequate shelter, nor individuals with disabilities that cannot be accommodated in emergency shelter settings. This legislation presents challenges for local governments and law enforcement in maintaining targeted solutions that best address their community's needs.

The Healthy Community Collaborative (HCC) has been a significant source of state funding for individuals experiencing homelessness and mental illness and/or substance use disorders, through collaborations between public and private sectors. Lead by Integral Care, the Austin HCC program has resulted in the implementation of coordinated and effective service delivery in homeless services.

**HB 3088** now allows for HCC recipients to receive funds beyond the original 7-year funding period and opens additional sources for match requirements.

## Criminal Justice

This session, there was key legislation passed in the area of criminal justice, particularly for individuals with intellectual and developmental disabilities (IDD). Children with IDD end up in the juvenile justice system at nearly three times the rate of children without IDD.

**HB 2107** addressed this issue by helping to ensure that children who are unfit to proceed in juvenile court proceedings as a result of an intellectual disability receive appropriate services or treatment in a private inpatient psychiatric facility, including outpatient services as necessary. Additionally, **HB 2831** establishes an advisory committee tasked with monitoring and gathering data regarding the detention of individuals with IDD and providing recommendations and guidelines on their detention.

**SB 49** enacts a series of recommendations from the Judicial Commission on Mental Health to improve the court system's interactions with defendants who have mental health issues, including rules requiring inmate access to prescription medication that is determined necessary by a health professional for the care, treatment, or stabilization of an inmate with mental illness.

## Substance Use Disorder Services

Amid the inclement weather and closures during the Texas winter storm, one of the challenges providers faced during the weather crisis involved the statewide database, the Central Registry. This statewide database is managed by HHSC and maintains a confidential central registry of Narcotic Treatment Clinic patients to prevent multiple clinic enrollment.

Currently, the registry holds client demographics without dosing information. This slowed down services as emergency staff had to contact providers to verify dosing information for individuals seeking substance use disorder treatment during the closures. Including dosing information allows other clinics to provide take home medication for individuals during emergency situations so that they do not miss their medication due to closures. Integral Care worked closely with Representative Donna Howard to pass **Rider 56**, which directs HHSC to evaluate the feasibility and costs associated with including patient dosage information in the opioid treatment program Central Registry.

**HB 707** will require HHSC to conduct a study to evaluate the current status of needs related to recovery housing and any related opportunities and challenges.

During the interim, Integral Care recommended allocation of 15% of funds to be appropriated by the Legislature from recent opioid lawsuit settlements toward expanding access to treatment, particularly to support efforts to decrease substance use disorder waitlists. This session, **SB 1827** created the Texas Opioid Abatement Fund Council to ensure that money recovered through opioid settlement agreements is allocated fairly and spent to remediate the opioid crisis using efficient and cost-effective methods directed to areas experiencing opioid-related harm.

## Telehealth

Due to social distancing precautions to reduce the spread of Covid-19, healthcare systems had to adjust the way they triaged, evaluated, and cared for individuals using methods that did not rely on in-person services. Telehealth services helped provide necessary care to individuals while minimizing the transmission of COVID-19. Starting in March 2020, HHSC authorized certain behavioral health services to be reimbursed in Medicaid when delivered by telemedicine, telehealth, or telephone. **HB 4** makes these flexibilities permanent which allows for easier access to mental health services. **HB 5** establishes a Broadband Development Office within the Comptroller's Office charged with creating a broadband development map, state plan and development program to incentivize the expansion and adoption of broadband -- critical to leveraging telemedicine and telehealth access for remote and underserved areas.



## Adult Mental Health

One of the most significant solutions to the increased need for mental health services due the pandemic is the integration of mental and physical health care in the primary care setting. The Collaborative Care Model (CoCM) integrates mental and physical health care under the supervision of a primary care provider (PCP) with an emphasis on early intervention and measuring outcomes. Under this model, a person is treated for mental illness at their PCP's office, the same as any physical illness, with the PCP collaborating with a team of professionals that includes a mental health specialist tracking each client's case. CoCM improves patient outcomes, lowers total costs of care, and delivers better care at scale. CoCM means mental illnesses are identified and effectively treated more quickly than the current average wait of 8-10 years before a person gets help.

**SB 672** authorizes Collaborative Care reimbursement in Texas Medicaid, for both children and adults, to increase access to behavioral health services integrated in primary care. Since early intervention is more effective, it means significant long-term cost savings. Baylor Scott & White has committed to implement this in all their primary care settings in the next 2 years, which serve at least 2M people within their system.

## 1115 Medicaid Transformation Waiver

Since 2012, the Delivery System Reform Incentive Payment Program (DSRIP) under Texas' Medicaid 1115 Waiver has provided \$18.9 billion to incentivize providers to collaborate regionally to innovate health care delivery. DSRIP has been key to meeting the unique health care needs of communities across Texas and improving health outcomes. The loss of 1115 Waiver funding as planned for September 2021, will drastically reduce the ability to maintain advances in behavioral health made during previous demonstration years. Texas has applied for a 1115 Waiver extension which includes financing strategies including a **Directed Payment Program for Behavioral Health Services (DPP-BHS)** which would add supplemental reimbursement for Medicaid Managed Care services, as well as a **Public Health Provider Charity Care Pool (PHP-CCP)**, a reimbursement mechanism through federal funds for individuals with low-income who do not have insurance.

## Intellectual and Developmental Disabilities

This session, **SB 1** provided funding for an additional **1,549** Medicaid Waiver interest list slots over the biennium. Opening additional waiver slots will provide individuals with IDD more opportunities to live meaningful lives outside of institutional settings. Additionally, **SB 50** requires HHSC to develop a process for a competitive, integrated employment initiative for Waiver recipients.

**HB 785** requires a review at least annually, of behavioral improvement or intervention plans for students with disabilities who are receiving special education services.