

KENTUCKY CABINET FOR HEALTH AND FAMILY SERVICES

Severe Mental Illness (SMI) Task Force

SMI Population and Hospitalizations
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Western State Hospital



Eastern State Hospital



Lakeland State Hospital (CSH)





Newest Facility Eastern State Hospital





Kentucky State Psychiatric Facilities

Acute Psychiatric Hospitals

- State-owned and operated
 - Central State Hospital (Louisville) *ADC 59
 - Western State Hospital (Hopkinsville) ADC 119
- State-owned and contracted for operation
 - Eastern State Hospital (Lexington) ADC 127
- Contracted
 - Appalachian Regional Healthcare (ARH) ADC 77
 - ARH Hazard
 - ARH Harlan
 - Highlands Regional

Forensic Services - Pretrial assessments and treatment (202C)

- State-owned and operated
 - Kentucky Correctional Psychiatric Center (LaGrange) ADC 30



^{*}ADC= Average Daily Census

Psychiatric Hospital Expenditures

Facility	2019	2020	2021	2022 Budget
Central State Hospital	\$ 21,227,100	\$ 21,798,400	\$ 21,003,500	\$ 21,800,000
Eastern State Hospital	\$ 52,223,200	\$ 51,076,500	\$ 50,865,700	\$ 51,119,300
Western State Hospital	\$ 44,205,700	\$ 45,266,500	\$ 42,401,100	\$ 43,191,000
Total	\$ 117,656,000	\$ 118,141,400	\$ 114,270,300	\$ 116,110,300

Note: ARH is funded through a supplemental payment by Medicaid. DBHDID provides \$1.8 million General Fund for match.



Psychiatric Hospital Fund Sources 2019-2021

Fund Source	%
General Fund	44%
Disproportionate Share Hospital (DSH)	32%
MCOs	9%
Medicare	7%
Private Insurance/Payors	3%
Federal	4%
Medicaid	1%

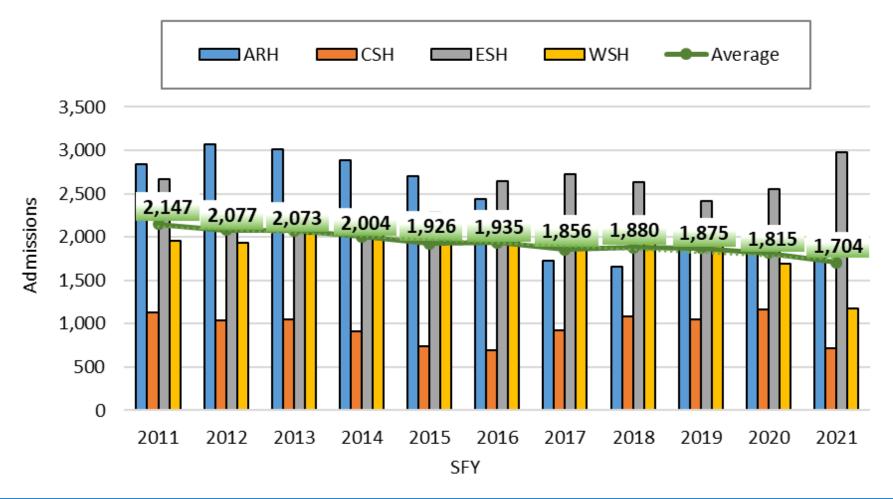


Individuals Served

- Primarily serve adults who are involuntarily hospitalized under civil commitment proceedings (202A).
- Criteria include:
 - Have a mental illness
 - Are a danger to self or others
 - Cannot be cared for in less restrictive setting
 - Can benefit from hospitalization
- State psychiatric hospitals do not serve primary substance use disorder (SUD) but treat co-occurring SUD
- Individuals with developmental or intellectual disability (DID) only served if have mental health (MH) diagnosis
- Kentucky does not operate state hospitals for children

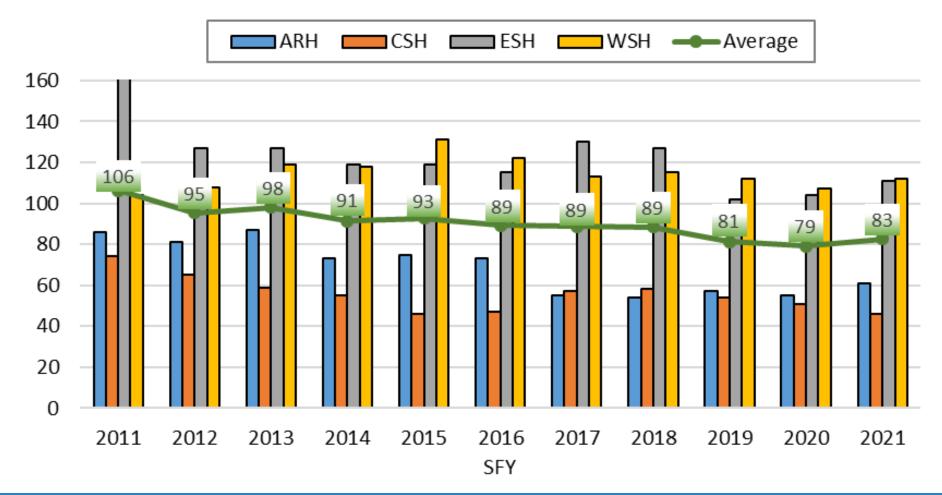


State Psychiatric Hospitals Admissions per SFY 2011-2021



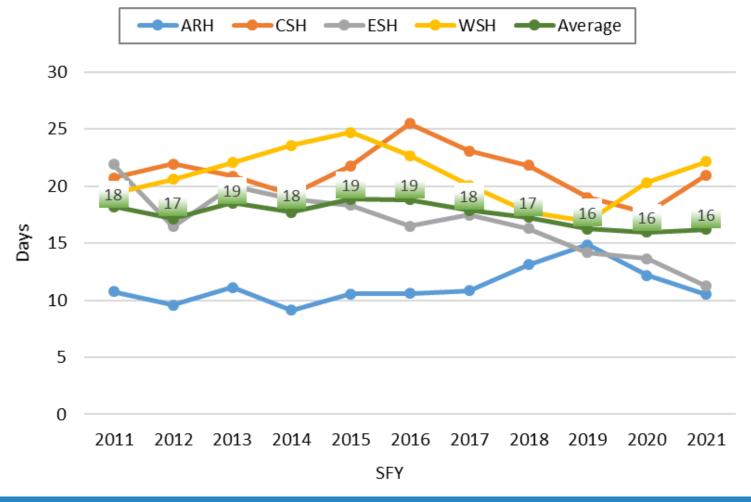


State Psychiatric Hospital Average Daily Census per SFY 2011-2021



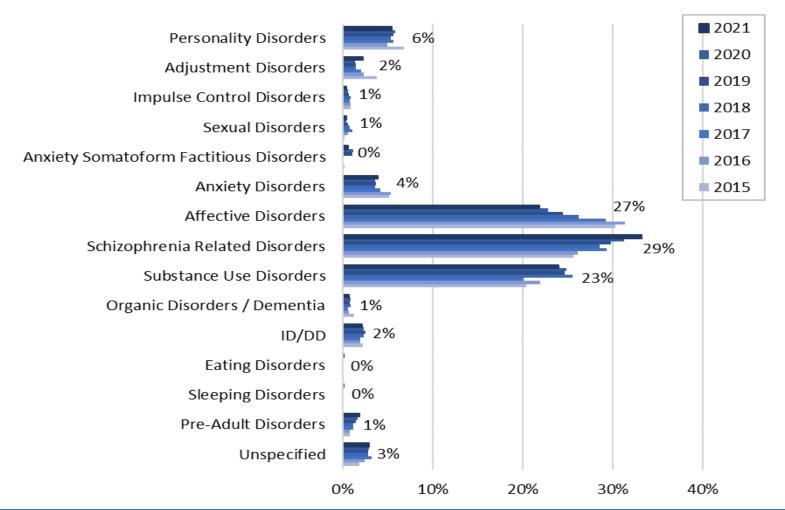


State Psychiatric Hospital Average Length of Stay per SFY 2011-2021



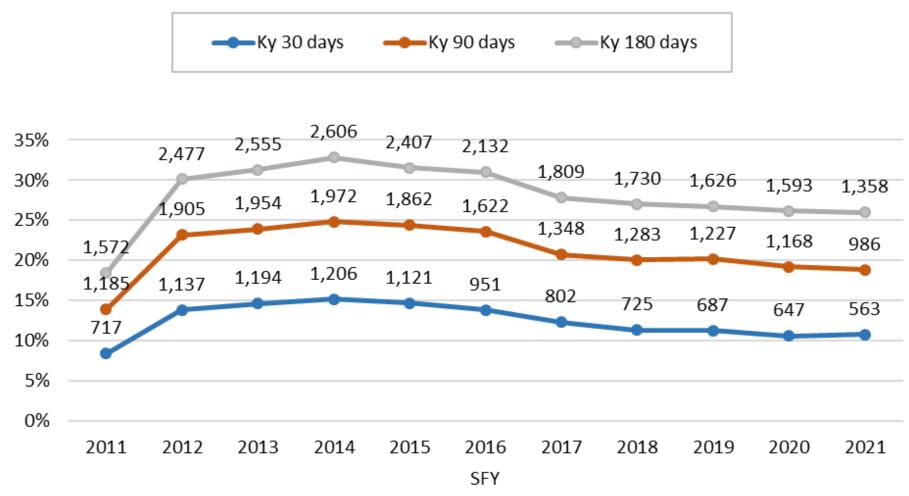


State Psychiatric Hospital Admissions by Diagnosis 2015-2021



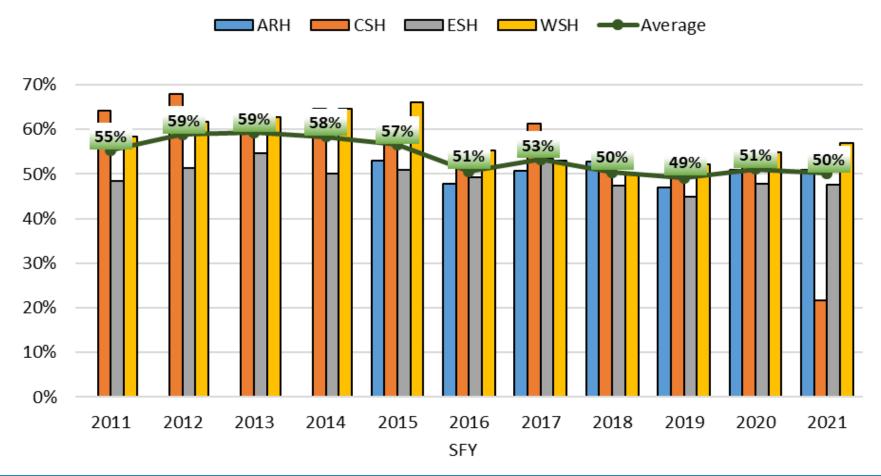


State Psychiatric Hospital Discharges - Readmissions per SFY 2010-2020

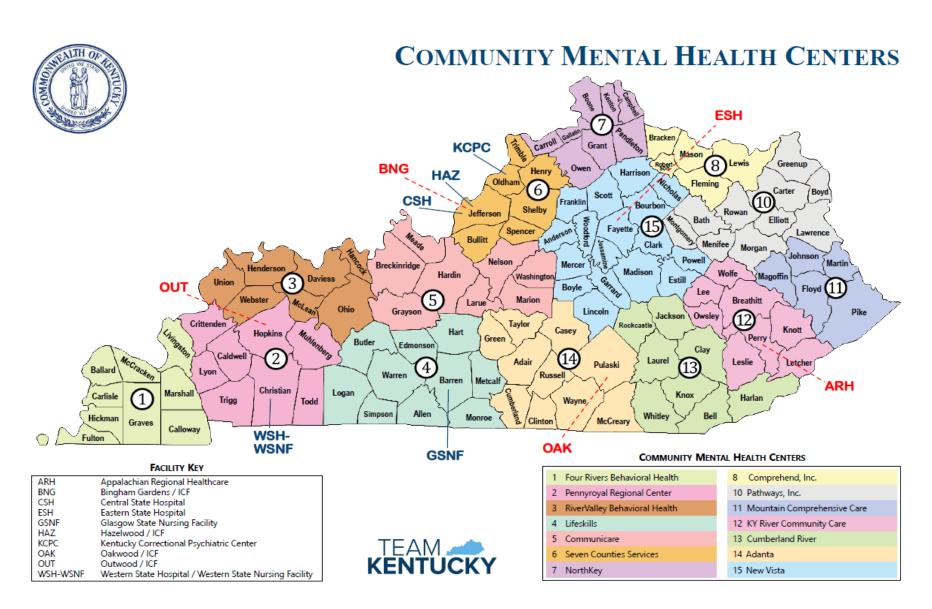




State Psychiatric Hospital Discharge Aftercare within 14 Days









Efforts to Improve Outpatient Follow-up

- In-reach by community mental health centers (CMHCs) staff to hospitals prior to discharge (in person or telehealth) for "warm hand-offs"
- Discharge with supply of medications and preauthorizations for managed care organization (MCO) benefit
- Transport to outpatient appointment at day of discharge
- Available Assertive Community Treatment (ACT) teams
- Coordination with MCO for their enrollees
- Use of "agreed order" and Tim's Law
- Referral to primary SUD treatment when appropriate

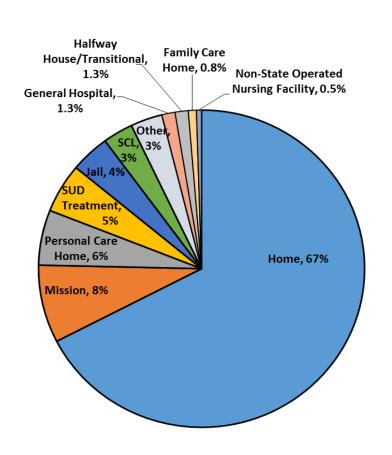


Challenges in Discharge Follow-up

- Involuntary nature of hospitalization
- Transportation a huge barrier
- Frequency of unstable housing
- Access to fully staffed ACT teams



State Psychiatric Hospital Discharge Living Arrangements 2021



Discharge Living Arrangement	Number of	% of	Total
Discharge Living Arrangement	Discharges	Disch	arges
Home	3,2	l51	67%
Mission	3	372	8%
Personal Care Home	2	264	6%
Substance Use Treatment	2	235	5%
Jail	<u> </u>	183	4%
Supports for Community Living	<u>-</u>	154	3%
Other	2	L48	3%
General Hospital		61	1%
Halfway House / Transitional		61	1%
Family Care Home		36	0.8%
Non-State Operated Nursing Facility		25	0.5%
TOTAL	. 4,0	690	100%



SMI Task Force Recommendations

- Focus on early intervention in high risk or first episode psychosis can change trajectory of an individual's life
- Enforce mental health parity
- Create/fund a recovery focused system of care
- Expand alternate payment models (Certified Community Behavioral Health Centers - CCBHCs)
- Divert individuals from justice system
- Maintain individuals in school/work setting (supported employment)
- Ensure individuals are stably housed (supported housing)

