#### SEVERE MENTAL ILLNESS TASK FORCE

# Minutes of the 3rd Meeting of the 2021 Interim

#### August 4, 2021

#### Call to Order and Roll Call

The 3rd meeting of the Severe Mental Illness Task Force was held on Wednesday, August 4, 2021, at 3:00 PM, in Room 131 of the Capitol Annex. Representative Danny Bentley, Chair, called the meeting to order, and the secretary called the roll.

Present were:

<u>Members:</u> Senator Alice Forgy Kerr, Co-Chair; Representative Danny Bentley, Co-Chair; Senators Ralph Alvarado, Karen Berg, and Stephen Meredith; Representatives Ken Fleming, Melinda Gibbons Prunty, and Lisa Willner.

<u>Guests:</u> Ashley Boze, Executive Director, Pennyroyal Center; Gretchen Davis, Chief Executive Officer, Opportunity Center of Muhlenberg County; Ben Jaggers, Peer Specialist, Bridgehaven Mental Health Services; Brad Leedy, COO, Bridgehaven Mental Health Services; Christy Shuffett, Executive Director, New Beginnings, Bluegrass, Inc.; Kathy Dobbins, Chief Executive Officer, Wellspring; Ivan Garr, Peer Specialist, Wellspring; Jacqueline Long, Director of Housing and Grants, Mountain Comprehensive Care Center; Veronica Nunley, Chief Business Development Officer, Pathways, Inc.

LRC Staff: Samir Nasir, Elizabeth Hardy, and Becky Lancaster

## **Approval of July 20, 2021 Minutes**

Senator Alvarado motioned to approve the minutes from July 20, 2021, meeting. The motion was seconded by Representative Willner. The minutes were approved.

### An Overview of the Challenges People with Severe Mental Illness Face

Ashley Boze, Executive Director of the Pennyroyal Center, discussed the limitations and the services provided to individuals with severe mental illness (SMI). Pennyroyal Center is a Community Mental Health Center (CMHC) that provides services such as assertive community treatment (ACT), targeted case management, comprehensive community support services, peer support services, and supported employment services. Individuals who have SMI can be supported by those services but still experience significant barriers such as transportation, affordable housing, stable income, employment opportunities, and access to reasonable resources within the community. CMHCs also have barriers such as the prior authorization process with managed care organizations (MCOs) and recruiting and retaining mental health professionals.

According to Ms. Boze, the legislature can help CMHCs and people with SMI through legislation by creating regionalization of CMHCs as well as standard compliance monitoring of Behavioral Health Service Organizations (BHSO) that will allow for ongoing care and ensuring BHSOs provide all necessary services for individuals with SMI.

In response to Representative Fleming, Ms. Boze agreed that there is a human resource problem because retaining staff is challenging and being able to raise compensation or raise reimbursement rates from MCOs would help.

## **Challenges Establishing New Behavioral Health Clinics**

Gretchen Davis, CEO of the Muhlenberg Opportunity Center, discussed a program started by the previous director that involved the SCL and Michelle P. Waivers, but only six clients were eligible for them. There are around 10,000 people on a wait list for both waivers. Regulation 907 KAR 15 allowed the Opportunity Center to become a Medicaid multi-specialty group but hurdles with MCOs such as credentialing, contracting, and prior authorizations caused issues. The Opportunity Center lost over \$200,000 due to not having prior authorizations. Some companies also refused to cover services even though clients had medical documentation noting the individual has SMI. Ms. Davis testified that the Pennyroyal Center does not have enough staff to accommodate the SMI population in Muhlenberg, so she is in the process of opening a behavioral health agency in the area. Problems in doing this include the length of time it takes to get credentialing completed and contracted.

## Severe Mental Illness: Moving toward Recovery, Stability, and Independence

Bridgehaven has served adults with severe and persistent mental illness since 1958. The Bridgehaven model is a multi-disciplinary and multi-model approach that provides a range of services including clinical group counseling, skill building, peer support, outreach, socialization, supported employment, medication management, and more. Mr. Leedy also said that because of members participating in Bridgehaven after hospitalization, they have saved over 1,300 days of hospitalization over the last five years, equaling about \$1.5 million in savings for Kentucky. With that, for the last several years there has been a 100 percent reduction in incarcerations and an 85 percent maintenance rate for housing. They have also found that many former clients who participated in Bridgehaven services are typically able to maintain stability and do not require the use of more expensive or more restrictive services after leaving.

Ben Jaggers, peer support specialist, discussed his personal struggles with SMI and substance abuse issues and how using Bridgehaven services benefited him.

In response to Senator Alvarado, Mr. Leedy stated that Bridgehaven uses a program called Individualized Placement Support (IPS) which is a supportive employment model

that works with any individual who has a desire for employment and helps them get the skills and support to be able to work regardless of where they are in their recovery. Bridgehaven also has a program that works from a principle of seeking competitive employment. Mr. Leedy stated that he does not have specific information regarding whether any of these individuals are taking a salary less than minimum wage or being offered less than minimum wage. Senator Alvarado stated that he has filed a bill every year for the last several years to ensure individuals with any type of disability are at least offered minimum wage that everyone else is entitled too.

In response to Representative Gibbons Prunty, Mr. Leedy stated that several issues have come up with MCOs but they have been able to have very progressive conversations with the MCOs to raise reimbursement rates for services provided.

# **Recovery-based Housing and Support Services to Adults with Severe Mental Illness**

Christy Shuffett, Executive Director of New Beginnings, Bluegrass, Inc., stated that their mission is to help improve the lives of adults with SMI through quality housing and recovery based services. New Beginnings' primary source of funding is through a contract with the Cabinet for Health and Family Services as well as grants through the Lexington Fayette Urban County Government, the US Department of Housing and Urban Development (HUD), and the Lexington Housing Authority. Permanent supportive housing is an evidence based practice that is used to help adults with SMI obtain and maintain housing. Affordable housing combined with voluntary support services are the two main components for permanent supportive housing to be successful. Key principles to have successful permanent housing includes choice of housing for the individual, functional separation of landlord and support service duties, and ensuring that an individual has safe, decent, and affordable housing.

Ms. Shuffett stated that while the support services are voluntary for individuals to use, staff uses various engagement techniques to do what it takes to help clients connect with services and supports that are necessary. This includes both physical health and behavioral health care services. Ms. Shuffett concluded her testimony by requesting the General Assembly to help increase funding for this service as it is not a reimbursable service through Medicaid.

In response to Senator Berg, Ms. Shuffett explained that their research shows as high as 75 percent of individuals they assist suffer from a dual diagnosis of SMI and substance abuse. She also stated that about 60 percent of people that entered the program in 2020 were homeless.

In response to Representative Gibbons Prunty, Ms. Shuffett explained that New Beginnings receives funds from the Lexington Fayette Urban County Government, HUD grants, and the Lexington Housing Authority to provide funding that is used to subsidize

the rent for clients. To make funding work, Ms. Shuffett said they have to be creative, blend funds, and keep requesting money.

### An Overview of Housing and Rehabilitation Services to People with Severe Mental Illness

Kathy Dobbins, Chief Executive Officer of Wellspring, stated that they were founded in 1982 and is a licensed behavioral health services organization accredited by CARF International. Wellspring provides numerous services for adults with SMI including case management, peer support, therapy, psychiatric stabilization units, and ACT.

Supportive housing is important because most people that have SMI have a very low income, less than \$10,000 a year. The fair market in that area for a one bedroom apartment is \$760, while SSI payments remain at \$794, so rental assistance is necessary. There are gaps in services and funds and Wellspring has to overcome, such as there is not enough highly supportive housing. Some services are not reimbursable through Medicaid, so funds from the Department of Behavioral Health are relied on.

Ivan Garr, peer support specialist for Wellspring, testified how Wellspring helped turn his life around. He had a dual diagnosis of SMI and substance abuse and was able to overcome these obstacles. This allowed him to become a peer support specialist with Wellspring and own his own home and car. He stated that he is optimistic now and looks forward to the next day.

In response to Senator Berg, Ms. Dobbins explained that she does not have an exact number of people that need housing assistance because of SMI, but there are many more individuals with an SMI diagnosis that are in need of housing. She also stated that about 85 to 90 percent of their clients have a co-occurring disorder of SMI and substance abuse.

In response to Representative Gibbons Prunty, Ms. Dobbins stated that Wellspring receives about \$6 million through billing Medicaid. They also get funding from HUD, state funding, a federal grant, and work with their local housing authority for housing vouchers. Wellspring also does their own fundraising and writes grants.

Senator Meredith expressed gratitude to Ivan Garr and his testimony.

In response to Senator Alvarado, Ms. Dobbins explained that with supported employment, minimum wage is a requirement. Many individuals do only work part time to continue to receive SSI benefits. She also stated that she does not know of other organizations that utilize individual placement and support that allow clients to accept lower than minimum wage.

### The Need for Supportive Housing for People with Severe Mental Illness

Jacqueline Long, Director of housing and grants for Mountain Comprehensive Care Center, talked about the need for housing for individuals with SMI. Although not all persons who are homeless have SMI and not all persons with SMI experience homelessness as some persons stay with friends and family. There are not enough affordable housing units in the state to house the homeless SMI population. Although, HUD funds are helpful, it is difficult to find units that meet the HUD housing quality standards. There are concessions in place with Medicaid regarding prior-authorizations and because of this, Mountain Comprehensive Care Center has been able to provide high quality and intensive services to members. However, there is a concern that once prior-authorizations are back in place that targeted case management and therapeutic rehabilitation will again be challenging to get approved through Medicaid.

Ms. Shuffett stated that to encourage the development of affordable housing units, there needs to be more no-debt projects. This way rents can remain affordable, adequate staffing maintained, as well as proper home maintenance. Intensive services with clients will help hesitant private landlords to rent to clients because staff can engage these landlords and provide in-home services to the clients.

#### **Mobile Mental Health Clinics**

Veronica Nunley, Chief Business Development Officer with Pathways, Inc., discussed the mobile mental health RV. Pathways wanted to use the mobile mental health clinic to reach three targeted populations: people of color, rural underserved individuals, and the disenfranchised. Pathways partnered with 16 community partners including two hospitals, eight health departments, and several grants from the University of Kentucky. The mobile mental health clinic goes to 12 locations throughout the region. Since May 2021, the mobile clinic has served over 220 individuals for a range of needs.

Co-chair Bentley stated that having the mobile mental health clinics will take the doctors to rural Kentucky and that it would only cost around \$200,000 to equip a mobile mental health clinic.

The meeting adjourned at 5:02 PM.