

MINUTES OF THE HOUSE HEALTH AND HUMAN SERVICES COMMITTEE

The meeting was called to order by Chairperson Will Carpenter at 1:30 pm on Thursday, February 06, 2025, in room 112-N of the Capitol.

All members were present

Committee staff present:

Carly Choi, Office of Revisor of Statutes
David Long, Kansas Legislative Committee Assistant
Elizabeth Cohn, Legislative Research Department
Leighann Thone, Legislative Research Department

Conferees appearing before the Committee:

Steven Anderson, Medicaid Inspector General
Kyle Kessler, Executive Director, Association of Community Mental Health Center of Kansas
Tim DeWeese, Director, Johnson County Mental Health Center
Greg Hennen, Executive Director, Four County Mental Health Center
Michelle Ponce, Acting Director, Kansas Behavioral Health Center of Excellence
Dr. Ken Stoltzfus, Vice President of Academic Affairs, Friends University
Dr. Tiffany Masson, President, Health Science University

Others in attendance:

No list available

Presentation on:

Steven Anderson, Medicaid Inspector General, provided a presentation on the Office of the Inspector General (OIG) ([Attachment 1](#)). The OIG is an independent division of the Kansas Attorney General's Office. The Inspector General reports directly to the Attorney General. An overview of the office was presented to the committee. A list of the common Medicaid fraud schemes was reviewed. A list of the types of individuals who commit fraud, waste and abuse was given. The definitions of each was given. Mr. Anderson provided information regarding medical identity theft. A review of the sources of allegations was presented. The types of providers that may be investigated were reviewed. Mr. Anderson explained how audits are selected. Results of audits would include making suggestions and recommendations for improvement of quality and efficiency and confirming an agency is performing with quality and efficiency. Examples of audit reports were provided to the committee. A summary of complaints and investigations were provided to the committee.

Mr. Anderson responded to questions from the committee.

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Presentation on:

Kyle Kessler, Executive Director, Association of Community Mental Health Center of Kansas (ACMHCK), provided information on the organization ([Attachment 2](#)). The association consists of 26 licensed Community Mental Health Centers (CMHCs) in Kansas that provided behavioral health services to all 105 counties in the state, 24 hours a day, seven days a week. CMHCs are required to provide services to all Kansans needing them, regardless of their ability to pay. The goal of the CMHCs was provided. Each CMHC board is required to submit data to the state in order to receive federal mental health block grant funding. The statutory authority was reviewed. A map was provided showing the location of the CMHCs and the counties they cover. A review of the Certified Community Behavioral Health Clinics (CCBHC) was presented. This new model of care focuses on integrated, whole personal care; expands the array of services provided to the community; and provide a sustainable funding mechanism through a prospective payment system (PPS) reimbursement mechanism designed to cover the true cost of services. The additional resources provided through the PPS have allowed the CMHCs/CCBHCs to be more successful in recruiting and retaining staff which has helped with workforce issues. The nine required services that all CCBHCs must provide were reviewed. Kansas has also selected four evidence based practices that all CCBHCs are to provide. These were reviewed. The Association, in partnership with KDADS, is in the process of implementing a data warehouse. A recent report commissioned by KDADS looking at value analysis of CCBHCs in Kansas found that the implementation of CCBHCs may increase costs by 40 percent (as compared to the CMHC system) but increase access by 75%. A link of the report was provided.

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Tim DeWeese, Director, Johnson County Mental Health Center, provided information of his organization ([Attachment 3](#)). The center is an certified CCBHC. The legislation in 2021 to implement the CCBHC model has resulted in increased Medicaid funding that has helped to expand staff, make mental health and substance abuse services more accessible, and provide a link between behavioral health and physical health care for the community. The center also plays a crucial role in the crisis system, assessing community needs, and actively partnering in the local crisis system collaboration and coordination. A review of the Johnson County Community Crisis Continuum of Care was presented to the committee.

Mr. DeWeese responded to questions from the committee.

Greg Hennen, Executive Director, Four County Mental Health Center, provided an overview of his organization ([Attachment 4](#)). In its catchment area, there are approximately 86,000 covered lives and serves an unduplicated count of approximately 6,800 individual patients each year. Over the past 4 years as a CCBHC, the center has been able to add both breadth and depth to the behavioral health safety-net services being made available. A list of those services was provided. All are showing growth and favorable patient outcomes since operating as a CCBHC. A snapshot of the outcomes was provided. In the 4-5 years prior to the implementation of the CCBHC model, the center was severely challenged due to increases in uninsured patients but also flat funding in State grants to fund them. Compounding the issue was that school districts and surrounding states were cannibalizing the staff due to being able to pay higher wages. Employee retention has improved significantly under the CCBHC model. Although wages are one factor in retention, when staff see the data-driven evidence of improved patient health/well being and an enhanced quality of life, their sense of purpose is lit on fire and are inspired to come to work. Making a tangible difference is important to more than just the patient. The model leads to a coordination of care leading to positive outcomes.

Presentation on:

Michelle Ponce, Acting Director, Kansas Behavioral Health Center of Excellence (KBHCoE), provided an overview of the organization ([Attachment 5](#)). The KBHCoE is a consortium of professionals in the field with a mission to promote innovation and workforce development in mental and behavioral health and human services. Kansas is experiencing a workforce shortage across healthcare sectors, particularly behavioral health. The KBHCoE is largely focused on addressing the workforce shortage through education and training opportunities as well as linking academic programs with community based providers to increase the workforce to meet the need of the community. A Center of Excellence is a place of high achievement in a specific area. The characteristics of a successful Center of Excellence were reviewed. The KBHCoE is currently focused on the Wichita area, primarily due to the building of the new state hospital being built there. A review of the advisory committee and its mission was provided. Articles of Incorporation have been filed, as well as having been assigned a tax ID, and a pending application with the IRS for nonprofit status. In year 1, the Kansas Legislature approved \$5.8 million SGF for expansion of psychiatric child/adolescent and addition medicine fellowship programs, development of a forensic psychology program, additional applied learning opportunities in behavioral

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health programs, paid internships and recruitment and retention bonuses. Early accomplishments were provided. An overview of Year 2 was given. Ms. Ponce provided the committee with the projected budgets for FY2025 ([Attachment 6](#)) And FY2026 ([Attachment 7](#)).

Dr. Ken Stoltzfus, Vice President of Academic Affairs, Friends University, provided information regarding the university's participation in KBHCoE ([Attachment 8](#)). Mental health concerns and demand for treatment are skyrocketing. Friends University operates a mental health clinic that is staffed by graduate students in our accredited marriage and family therapy master degrees program. The services are for both students and staff. The clinic has been stretched to the limit the last couple of years and has had to resort to implementing wait lists and limiting free therapy sessions for students in order to serve as many people as possible. Dr. Stoltzfus is delighted to be a part of the core group that has been working the past 15 months to develop the KBHCoE. Funds have been secured and distributed to help retain a nursing facility, develop new educational programs to train future mental health providers, and provide scholarships and stipends to support current students. The vision of the KBHCoE is to provide access to timely and high quality care. A review of the strategic plan was provided.

Dr. Tiffany Masson, President, Kansas Health Science University (KHSU), provided testimony in support of the KBHCoE ([Attachment 9](#)). Kansas faces a shortage of psychiatrists, particularly in child and adolescents, addiction and geriatric psychiatry. Current data was provided. KHSU is committed to addressing this issue. Its mission is closely related with KBHCoE's mission to drive innovation, expand workforce and foster partnerships. The requested funding will allow KBHCoE to expand applied learning programs across various disciplines. This investment will also leverage federal Medicaid Graduate Medical Education (GME) matching funds. This funding represents a commitment to ensure compassionate, high quality mental health care for all Kansans.

The meeting was adjourned at 2:48 PM.