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Laura Howard, Secretary

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Proponent Testimony HB 2236 – establishing the mental health intervention team program in statute House Health and Human Services Committee March 4, 2025

Chairman Carpenter and Members of the Committee,

House Bill 2236 was requested by the Kansas Department of Aging and Disability Services (KDADS) to establish the Mental Health Intervention Team (MHIT) program in state statute. If enacted, this bill will provide stability and ensure the continued growth of a program that has delivered essential services to Kansas youth by providing incentives for coordination between school districts, qualified schools, and mental health intervention team providers.

In 2018, MHIT was established by the Kansas Legislature through pilot proviso language to address the challenges schools were experiencing due to the increased number of students and families needing behavioral health services. At the time, this proviso authorized nine school districts to enter into agreements with local community mental health centers to provide school-based services. Today, this program has over 130 schools participating and employs over 240 school-based liaisons throughout the state. While the program started with partnerships with only community mental health centers, it has grown and now encompasses over 20 Certified Community Behavioral Health Clinics (CCBHCs), several Federally Qualified Health Centers (FQHCs), and a few private providers of the school's choosing. MHIT allows school districts to employ school-based liaisons (SBLs) who identify students needing intense behavioral health services and work to link them to local mental health providers to access critical services.

On July 1, 2024, MHIT was transferred from the Kansas Department of Education (KSDE) to KDADS. In addition to moving the program, the same proviso amended the funding allowing schools to retain 65% (previously 75%) while the remaining 35% went to the school's choice of mental health provider. This proviso also appropriated \$13.8 million to retain the existing Unified School Districts (USDs) that were participating in the program and added \$4.5 million to expand into new schools with \$3 million of that going toward new USDs and the remaining \$1.5 million going to fund an MHIT program in qualified schools.

HB 2236 contains the same language as the FY25 proviso and outlines MHIT program requirements, including:

- Each participating school district or qualified school will:
 - Work with a mental health intervention team to identify the specific needs of students and families while developing a plan of action to implement a school-based program that is tailored to meet those needs.
 - Employ one or more school liaisons who will help students in need and coordinate services between the school, the student, the student's family, and the mental health intervention team provider.
- MHIT will serve any student who has been adjudicated as a child in need of care or is in foster care in addition to any other student who needs mental health support services
- Each mental health intervention team provider will:
 - Employ one or more therapists licensed by the behavioral sciences regulatory board who
 will collaborate with the school to assist students in need and provide services to such
 students in the MHIT program.

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- Employ one or more case managers who will collaborate with the school to assist students in need and to coordinate services under the program.
- Each school district that receives money from MHIT will utilize the funds to pay:
 - o Salary and fringe benefits of the SBL employed by the school district
 - o Provide payment to each partnering mental health intervention team provider.
- Develop a qualified school board that will establish a qualified school mental health intervention team program and:
 - Establish a plan for the allocation of money to qualified schools.
 - Review the criteria for school district funding.
 - Oversee the implementation of the qualified school's mental health intervention team.
 - Provide resources, training, and support to qualified schools and such school's mental health intervention team.
 - Submit an annual report summarizing the MHIT program for qualified schools by the first day of the regular session of the legislature.
- A qualified school mental health intervention team board will be created and comprised of:
 - o A school psychologist employed by a qualified school
 - A school administrator employed by a qualified school
 - o A mental health professional employed by a community mental health center
 - o A mental health professional employed by a federally qualified health center
 - o A representative of the state board of education
 - o A representative of the department
 - o A parent or guardian of a qualified school student

To date, over 15,000 students have received comprehensive behavioral health services in a school-based setting. During the 2023-2024 school year, KSDE's data portal indicated that the program has served nearly 7,000 students, including nearly 600 students who were identified as being in foster care.

By supporting this legislation, you are not only addressing the immediate challenges Kansas is facing with the youth mental health crisis but also laying the groundwork for sustainable, long-term solutions that will benefit our communities for generations to come. I want to thank you for allowing KDADS to provide testimony on this piece of legislation, and I am happy to stand for questions at the appropriate time.

Respectfully,

Taylor Bremer Assistant Commissioner, Behavioral Health Services Kansas Department for Aging and Disability Services