

*“Help for Today,
Hope for Tomorrow”*

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Testimony to Senate Public Health and Welfare on HB 2578

Chair Gossage and members of the committee, my name is Matt Atteberry, and I am the Exec. Director of the Labette Center for Mental Health Service, Inc. Labette Center is located in Parsons, Kansas, and is a licensed Community Mental Health Center, a provisionally Certified Community Behavioral Health Clinic, and the recognized public mental health authority by the Labette County Commission. We are a single county CMHC/CCBHC, serving the citizens of Labette County since 1979. In becoming a CCBHC, Labette Center has been able to develop an Assertive Community Treatment team, an Individual Placement Support-Supported Employment team (which helps consumers find competitive employment. To date Labette Center has received 50 unique referrals, over 270 face to face visits with 93 area employers, and 17 successful job starts), Medically Assisted Treatment for opioid addiction, and Same Day Access to services. Anyone can begin receiving care at Labette Center literally the same day they decide to do so.

I appreciate this opportunity to provide written testimony in support of HB 2578.

In 2021, the Kansas Legislature took the bold and bipartisan step of approving legislation to move the Kansas mental health system of CMHCs to the Certified Community Behavioral Health Clinic model. This action was after a long process of study and recommendation, part of which was the acknowledgment and understanding that this process would require not only dedicated effort, but also a number of years to study and evaluate this investment. While significant change is already occurring through the move to CCBHCs in the types of services, the amounts of service being provided, and the number of Kansas citizens being served throughout the State, it is too soon to be able to assess the total success of this investment. Due to this, I would say that the intent of HB 2578 to limit certification of CCBHCs to CMHCs for the next three years is a wise and prudent way to monitor the State’s investment and commitment to the CCBHC model.

A risk of not limiting CCBHCs to CMHCs during this three-year period is that some areas of the State may become over saturated, resulting in unnecessarily increased costs financially, and unintended, undue and problematic work force issues. When the legislation to establish CCBHCs was first passed, it was based on the understanding that it would be CMHCs making this transformation, and did not envision others seeking to enter this, to them, new area of health care and public safety.

With the passage of the Mental Health Reform act in 1990, CMHCs have developed robust crisis services that all community partners have come to not only trust, but understand how to access. While improvement is always possible in any system, law enforcement, child welfare providers, hospitals and primary care clinics in Kansas know that 24 hours a day, 7 days a week, 365 days a year crisis behavioral health services are accessible by calling their local CMHC/CCBHC. CMHCs/CCBHCs are a vital part of the public safety net, and are recognized as such by first responders, hospitals, clinics and County Commissions. Were other entities to become CCBHCs, the “ramp up” period to providing this same level of crisis service, which is a requirement to be a CCBHC, will lead to increased pressures on work force, and will lead to confusion in the public safety net. When minutes, and sometimes seconds, count in the middle of the night, “which crisis provider/CCBHC do I call” should not be a decision point for the public safety net. An analogy would be “which Sheriff’s department do I call?”

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To conclude, Kansas via the Legislature made the emboldened decision to move Kansas to the Certified Community Behavioral Health Clinic model after much thought and study. That decision included processes to evaluate the effectiveness of this decision. Time is needed to adequately understand the clinical, operational, and financial impacts inherent in this model as set out in 2021. HB 2578 further strengthens this process, and I urge you to support and pass this piece of legislation.

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