Mental Health Provider Panel

Joint Legislative and Executive Task Force on Mental Health Financing and Services
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Rick Weaver and Dan Koenig

WASHINGTON COMMUNITY MENTAL HEALTH COUNCIL

Role of Community Mental Health Agencies (CMHAs)

Community Access

CMHAs are the community access point for mental health services for children and families

WCMHC Member Agency Survey

Provides snapshot of children's mental health services across the state

Children's Mental Health Revenues

- Approximately 69% of CMHA funding for children comes from RSN/PIHP dollars
- CMHAs pursue, leverage and integrate other resources from Children's Administration, schools, local government, private insurance, United Way, DASA, JRA and other

Children's Mental Health Revenues

Fund Source	Percent Total Children's Mental Health Revenue
RSN/PIHP mental health revenues	68.50%
DSHS – Children's Admin.	9.0%
Other Misc.	3.2%
Schools	3.1%
Other County/ Local Gov't	2.5%
Private pay/ private insurance	2.5%
United Way	1.8%
Other state revenues	1.7%
Non mental health RSN revenues	1.4%
Federal Block Grant	1.4%
DASA	1.0%
DSHS – Juvenile Rehab. Admin.	1.0%
Other donations	0.2%
DDD	0.02%

Comprehensive Services Provided by CMHAs

Type of Service	% Agencies providing
Wraparound	65%
Other Outpatient	87%
School-based day support	13%
Other school-based services	83%
Therapeutic foster care	2%
Other DCFS services	3.5%
Chemical dependency services	43%
Services for delinquent youth	65%
Other: homeless services, infant mental health, DD, CLIP, E&T	3.5%

Children's Evidence Based Practices

Numerous EBPs and promising practices are in place and/or being planned at CMHAs:

- Wraparound Services
- Functional Family Therapy
- Multi-Systemic Therapy
- Trauma-Focused Cognitive Behavioral Therapy
- Family Integrated Transitions
- Dialectic Behavior Therapy

Quality Mechanisms in Place

CMHAs employ trained mental health practitioners specializing in children's mental health. In the 23 survey agencies:

- 26 Child Psychiatrists
- 11 Pediatric ARNPs/RNs
- 356 Child Mental Health Specialists
- Other specialized staff including DD Specialists, Deaf Specialists, parent trainers and peer support counselors, Minority Mental Health Specialists

Programs that Work

Stories from the Community

Seattle Mental Health

Integrated Services at Seattle Mental Health

- School-Based Mental Health Services
- Co-Occurring Disorders Treatment (Mental Health/ Developmental Disabilities)
- Co-Occurring Disorders Treatment (Mental Health/ Chemical Dependency)
- Therapeutic Foster Care
- Interagency Staffing Team
- Juvenile Justice Project TEAM
- CD Advocacy Team Care

Barriers and Recommendations

Improving Children's Mental Health Services in Washington

Barrier: Current Medicaid Access to Care Standards as they apply to children and youth

Recommendation:

 Direct the Mental Health Division (MHD) to review the Access to Care Standards, identify changes that would work better for children/youth/ families, and assess cost implications

Barrier: Need a mental health benefit package that is specifically designed to meet the needs of children and families

Recommendation:

 Direct DSHS/MHD to include attention to children/youth as part of the System Transformation Initiative which calls for review/ redefinition of the Medicaid benefit package

Barrier: Examples of effective cross-system collaborations are scattered across the state but are not consistently available to children and families

Recommendation:

 MHD Identify and report to the legislature examples of successful programs and replicate to build consistent capacity across the state

Barrier: Current DSHS eligibility requirements and limited flexible funds restrict access to MH services

Recommendation:

- Identify unmet needs/gaps in service; determine priorities
- Additional flexible state dollars may be needed to fill gaps and improve access
- Return to legislature to seek additional funding for implementation