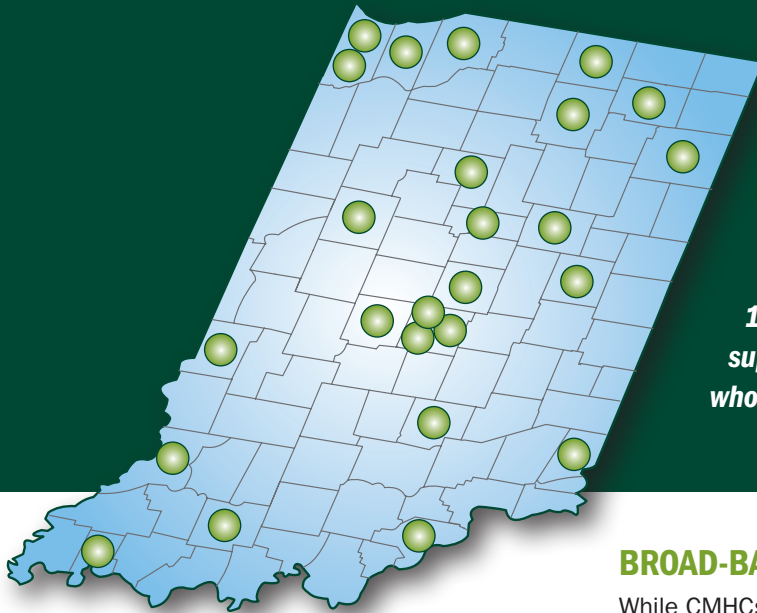


**Indiana Council of Community Mental Health Centers, Inc.**

# **Legislative and Public Policy PLATFORM**



**The Indiana Council of Community Mental Health Centers represents the collective interests of all 25 community mental health centers (CMHCs) currently certified and accredited to provide community-based behavioral health in Indiana. CMHCs in Indiana provide services to over 120,000 individuals every year. They provide services in support of local community needs, primarily to individuals who are uninsured, non-Medicaid and homeless.**

**We represent  
all 25 community  
mental health  
centers in Indiana**

## **BROAD-BASED FUNDING**

While CMHCs receive state funding, Medicaid billing specifically for Medicaid Rehabilitation Option (MRO) services is the primary funding mechanism in Indiana to ensure adults and children have access to critical behavioral health treatment. In addition to MRO services, CMHCs provide Medicaid Clinic Option services for individuals, Medicaid behavioral health services through the Hoosier Healthwise Program and Care Select and child-based services through a partnership with the Department of Child Services.

**Current programs and rules regarding the MRO changes need additional modification in order for CMHCs to maintain and promote mental health and recovery**

## **Community Mental Health Centers Challenged by Changes to Medicaid MRO Eligibility, Services and Funding**

**Beginning in July 2010, the Family and Social Services Administration (FSSA), the Office of Medicaid Policy and Planning (OMPP) and the Division of Mental Health and Addiction (DMHA) instituted a number of changes in MRO aimed at improving the integrity of the existing program and promoting recovery for children and adults with mental illness.**



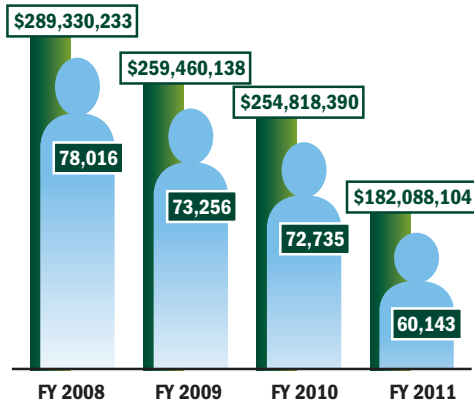
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The Indiana Council supports public policies that ensure the continuation of programs and services authorized by the Centers for Medicare and Medicaid (CMS) that promote evidence-based practices. However, the current programs and rules regarding the MRO changes need additional modification in order for CMHCs to maintain and promote mental health and recovery, especially for long-term and persistently mentally ill consumers.

# Legislative and Public Policy PLATFORM

## Indiana Council of Community Mental Health Centers, Inc.

**Exhibit A**  
TREND BETWEEN MRO PAID AND CONSUMERS SERVED  
DMHA ADMINISTERED PROGRAMS 2008 - 2011

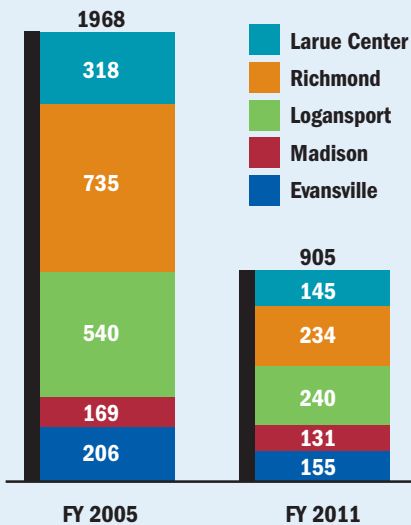


### AFTER THE MRO CHANGES WERE ADOPTED, IT BECAME APPARENT THAT:

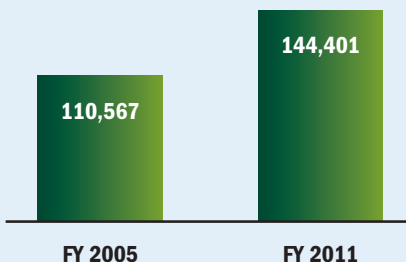
- the rate structure is inadequate to support clinically required services;
- mental health consumers are not currently able to access beneficial group ADL services; and
- the reduced case management rate is limiting access to this evidence-based service that is critical to mental health recovery.

The Community Mental Health Center system in Indiana experienced dramatic decreases in the utilization of MRO services following the implementation of the FSSA's changes on July 1, 2010. (See Exhibit A)

**Exhibit B**  
TREND IN SOF ENROLLMENT FY 2005 VS. FY 2011



NUMBER OF INDIVIDUALS SERVED THROUGH  
DMHA FUNDING



### We Ask for Your Full Support for These Legislative Goals

As a result of these dynamics, the Indiana Council has developed specific public policy items we ask legislators to consider in the 2012 Indiana General Assembly to ensure community-based mental health services are able to be effectively administered within your legislative districts.

- 1** The Indiana Council requests that the Indiana General Assembly support flexibility in the use of non-match funds used by community mental health centers to support local program needs and services.
- 2** The Indiana Council supports the submission of a Medicaid State Plan Amendment that provides for community-based habilitation services for high level of need mental health consumers.
- 3** The funding saved by the State of Indiana from the reduction of mental health consumers served in State Institutions should be provided to the Community Mental Health Center system to ensure those individuals moved out of state hospitals and into the CMHC system receive continuous and on-going services. (As Exhibit B illustrates, while the number of the individuals served in a state mental institution has decreased, the number of individuals receiving services in a CMHC has increased.)
- 4** The Indiana General Assembly should support the residential needs of mental health consumers by aligning multi-state agency programs that target semi-independent and independent housing programs.
- 5** The Indiana General Assembly should support efforts to integrate primary and behavioral healthcare through the utilization of Medical Homes and other community Safety Net services in a CMHC setting.