



Joint Legislative Budget Hearing Alabama Department of Mental Health

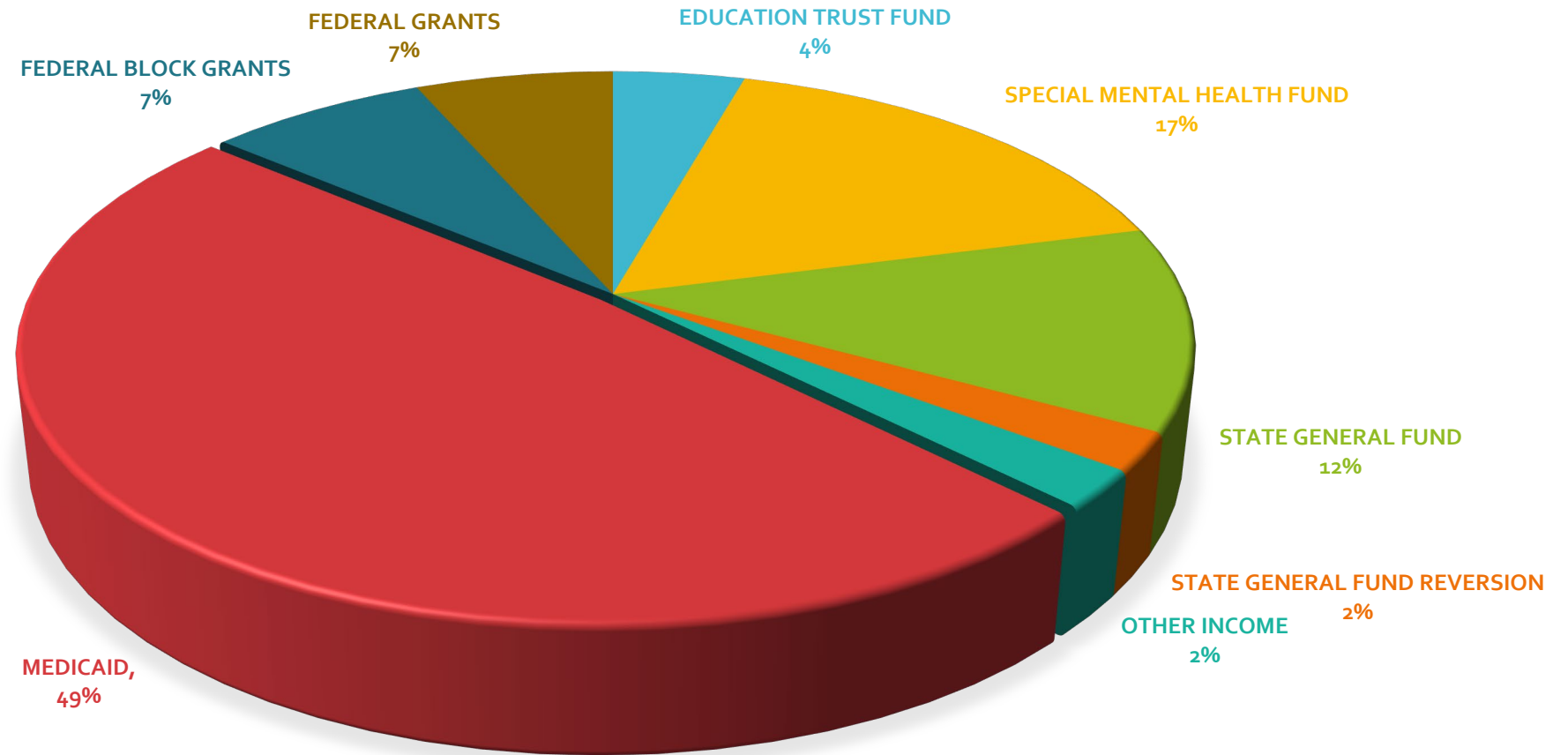
Kimberly G. Boswell, Commissioner

July 7, 2022

Overview

- **Impact a recession will have on funding.**
- **Impact a recession will have on the demand for services.**
- **Impact a recession will have on operational costs.**

FY2022 BUDGETED REVENUE BY SOURCE

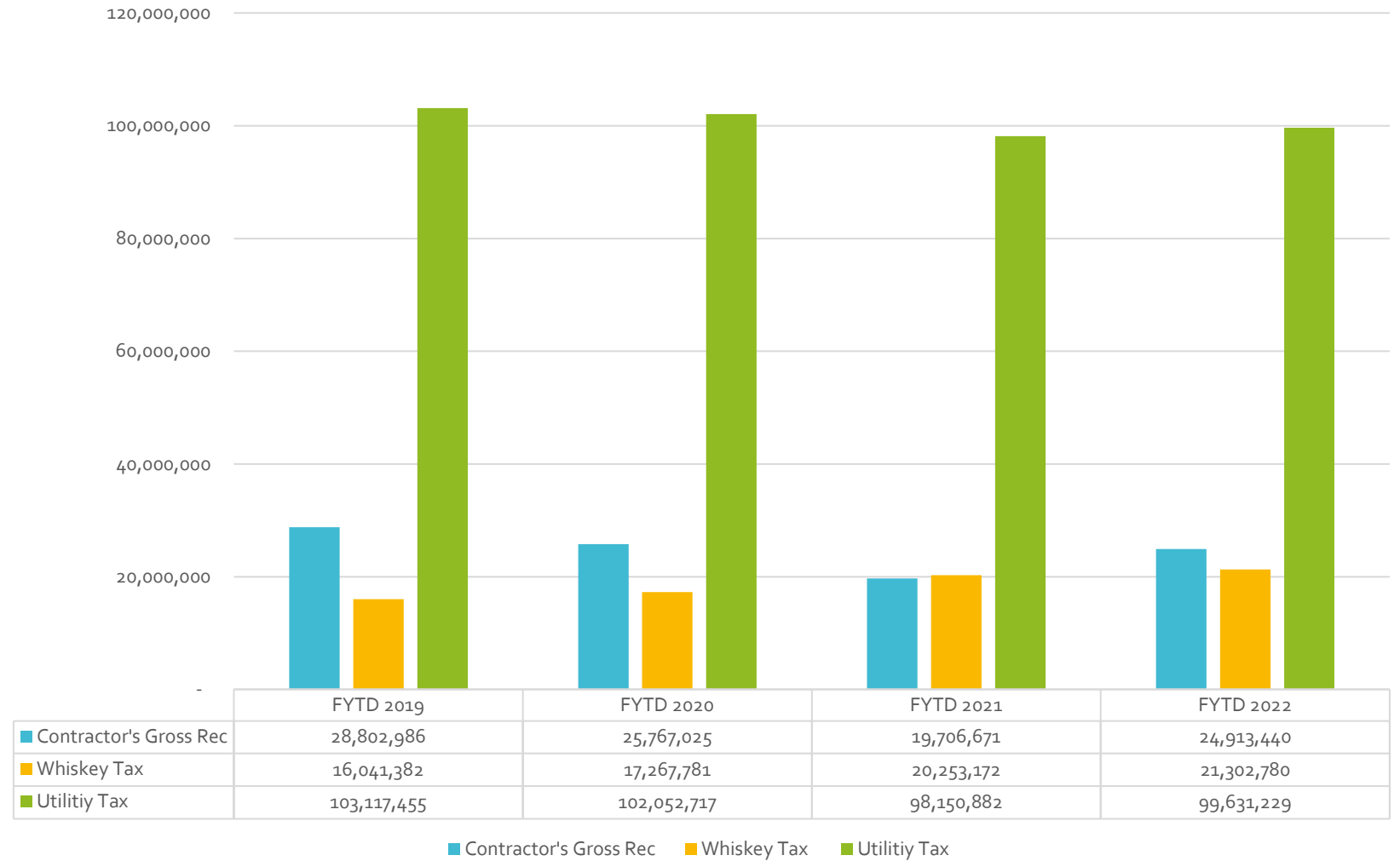


Factors that Impact a Decision to Cut the Budget

- Waiver services provided through the Division of Developmental Disabilities are considered an entitlement.
- Any reduction in state matching funds or maintenance of effort will result in loss of additional federal dollars.
- Most substance abuse services are funded through federal grants and Medicaid with only a small amount of state funding.
- Because our state hospitals are funded primarily through state dollars, they are the most susceptible to decreases in .funding

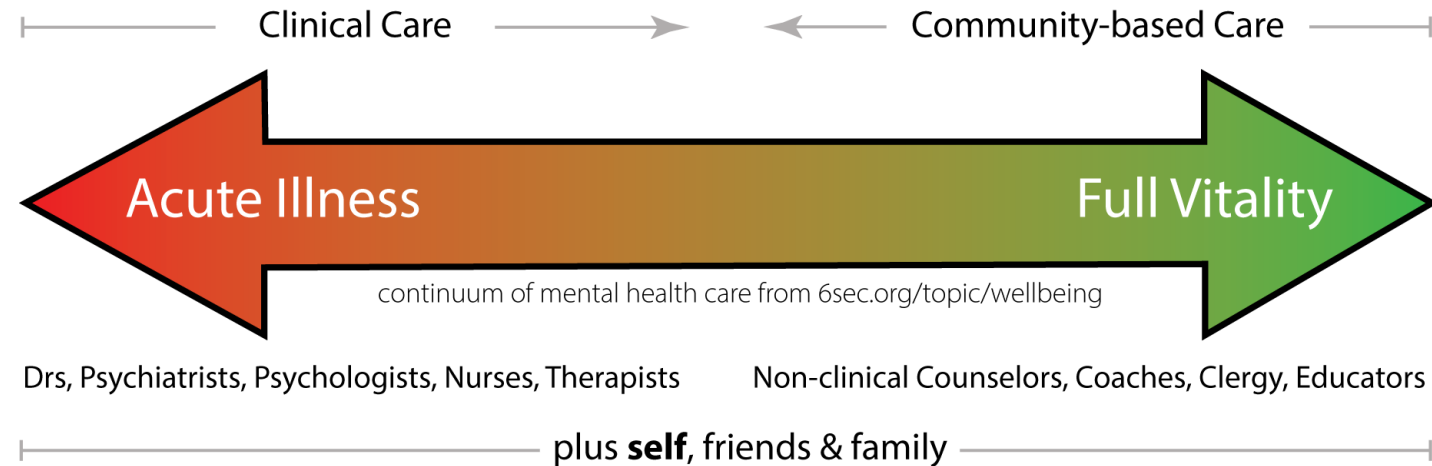
Special Mental Health Trust Fund

SPECIAL MENTAL HEALTH MAJOR REVENUE STREAMS



While COVID is ebbing, its effects on our collective mental health are proving severe and long-lasting.

Mental health problems exist along a continuum from mild time-limited distress to severe mental health conditions. **The COVID pandemic influences where people are situated on that continuum.**



- Now 2 in 5 adults experience a mental health issue in 2020, compared to about 1 in 5 adults before the pandemic.
- In 2021, emergency department visits for suspected suicide attempts were 51% higher among adolescent girls than in 2020

Definition:

Short-term beds do not require a civil commitment.

Long-term beds do require a civil commitment or court intervention for forensic beds.

Short-term Beds

- Temporary Observation beds (23 hour)
- Extended Observation (< 7days)

Long-term Beds

- State Hospital Beds
- Crisis Residential Units
- Forensic beds

Alabama's Crisis System of Care

Short Term Beds: Crisis Centers

Does Not Require Civil Commitment

CMHC Crisis Center	Location	Current Temporary Observation Beds <23hrs	Permanent Temporary Observation Beds <23hrs	Current Extended Observation Beds <7days	Permanent Extended Observation Beds <7days	Projected Opening Date
AltaPointe	Mobile, AL	15	15	6	6	Opened
WellStone	Madison, AL	10	15	10	16	9/1/22
Carastar	Montgomery, AL	8	10	4	16	1/1/23
JBS	Birmingham, AL	0	32	0	16	11/14/22
SpectraCare	Dothan, AL	0	15	0	8	3/1/23
Indian Rivers	Tuscaloosa, AL	0	8	0	16	3/1/23
<i>Total Beds Statewide</i>		33	95	20	78	

Alabama's Crisis System of Care

Crisis Centers:
Number served May
2021 to March 2022

CMHC Crisis Center	Location	Total Evaluations	Total Admissions	Referrals & After Care
AltaPointe	Mobile, AL	629	524	629
WellStone	Madison, AL	333	290	333
Carastar*	Montgomery, AL	0	0	0
JBS*	Birmingham, AL	0	0	0
SpectraCare*	Dothan, AL	0	0	0
Indian Rivers*	Tuscaloosa, AL	0	0	0
<i>Total Number Served May 2021-March 2022</i>		962	814	962

*The CaraStar Health Crisis Center beds were not operational at the time of data collection.

Alabama's Crisis System of Care

SAMHSA 988 Grant
\$1,426,822 (2 years)

Crisis Line Centers:
WellStone (\$153,103)
JBS (\$244,344)
Carastar (\$122,482)
AltaPointe (\$122,482)

911

Medical
Emergency or
Immediate Danger

988

Mental Health
Crisis & Suicide
Hotline

Long Term Beds: State Hospitals Crisis Residential Units

Does Require Civil Commitment

State Hospitals (Tuscaloosa, AL)	Total Number of Beds
Bryce Hospital	268
Harper Center	96
Total Beds	364

CMHC Crisis Residential Units	Location	Total Number of Beds
AltaPointe – EastPointe	Daphne, AL	16
Altapointe – Zeigler	Mobile, AL	16
Carastar – PAC	Montgomery, AL	8
Carastar – Beth Manor	Montgomery, AL	16
Carastar – Montgomery	Montgomery, AL	16
East Alabama	Opelika, AL	11
East Central	Troy, AL	16
Highlands	Alexandria, AL	16
Indian Rivers	Tuscaloosa, AL	10
Northwest	Carbon Hill, AL	16
SpectraCare	Dothan, AL	16
South Central	Andalusia, AL	16
Wellstone	Huntsville, AL	10
Wellstone Wellstar	Huntsville, AL	16
Wellstone Reid House	Cullman, AL	16
Total Current Beds Statewide		215
North Central (projected opening 2024)	Decatur, AL	16
Total Future Beds Statewide		231

State
Operated
Forensic
Beds
Taylor Hardin
Secure
Medical

Hunter v. Boswell

- September of 2016 a lawsuit was filed by ADAP, the ACLU and an attorney.
- Added 24 beds in 2017 and secured additional funding for community beds so we could enter a consent decree in January of 2018.
- The requirements for outpatient days waiting have been met (we are at 22 days waiting).
- Inpatient days waiting are 250+ and the consent decree requires days waiting to be at 34.
- Currently adding 96 beds to address the concerns of the court regarding the number of days waiting for inpatient evaluations.

Community Operated Forensic Beds

Forensic Secured Admissions	Location	Total Number of Beds
JBS – Hillcrest Forensic Secure	Birmingham, AL	30
JBS – Forensic MOM (Meals, Observation, Medication)	Birmingham, AL	12
South Central Forensic Secured	Greenville, AL	16
East Alabama Forensic Therapeutic Group Home	Dadeville, AL	16
East Central Spring Manor Therapeutic Group Home	Union Springs, AL	15
Northwest Marion Forensic Therapeutic Group Home	Hamilton, AL	16
Total Forensic Beds Statewide		105

Annual state General Fund Budget appropriation \$3,715,000 to comply with the terms of Hunter v. Beshear.

FY23 Training and Collaborative Partnerships

School-Based Mental Health Collaboration

- Expand collaborative programs between Community Mental Health Centers and school systems to a total of at least 110 school systems.
- Train and certify all Alabama State Department of Education Mental Health Service Coordinators (currently 146 Coordinators trained statewide).

Crisis Intervention Team "CIT" Training

- Establish regional training model to certify at least 330 law enforcement officers through NAMI-Alabama, APOST Commission, and the Bureau of Pardons & Paroles.
- Crosstrain 9-1-1 dispatchers in preparation for 9-8-8 crisis line rollout.

Waiver Support Coordinators

- Train over 250 Support Coordinators (formerly case management) to improve person centered planning so that community integration and employment outcomes increase.

Infant & Early Childhood Mental Health Consultants

- Expand access for young children and families in Early Intervention and Alabama First Class Pre-K, and pilot new initiatives with the Bureau of Pardons & Paroles Day Reporting Centers and The Lovelady Center of Birmingham.

USDA Farm and Ranch Assistance Network

- Provide mental health training workshops through Alabama Department of Agriculture & Industries to reach all 67 counties statewide.

DHR Supervisor Training

- Crosstrain with DHR State and County Offices, ADMH DD Regional Offices, and Community Mental Health Centers.

Economic Impact on Workforce

Rising inflation has exacerbated the existing labor crisis.

- Inflation has increased the income deficit for healthcare workers, making it even more difficult to recruit nurses and mental health workers.
- Many of our current staff are working two jobs to make ends meet.
- State Hospitals are considering staffing options and developing strategies to recruit and retain critical staff.
 - To maintain patient and staff safety ADMH will be working with a rapid response staffing company to provide 26 weeks of staffing to our hospitals beginning mid-August.
 - At the same time, ADMH will be working with SPD to improve recruitment and retention strategies including:
 - Funding for the 4-step increase in pay grades
 - Appointment at a higher step upon entry for Mental Health Workers
 - Bonus structure for direct care staff
 - Scheduling flexibility through use of part-time staff has proven to be a successful recruitment tool in other states

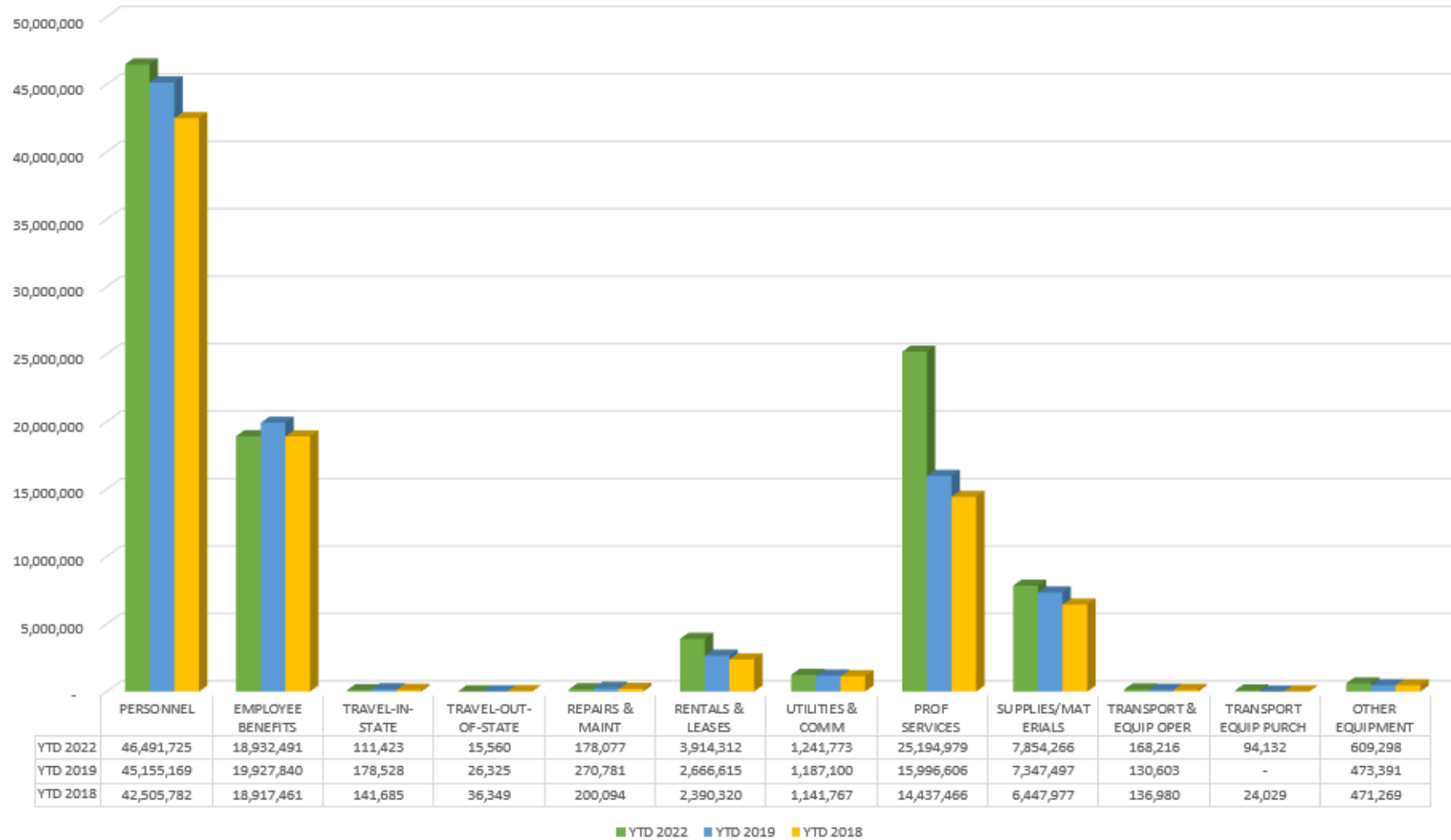
Economic Impact on Operations & Maintenance

- Incremental rise in the cost of drugs and pharmacy expenses over time.
 - Inflation always impacts the cost of drugs. We are reviewing potential impact of combining the purchase of drugs and pharmacy supplies into one account to create cost savings.
- Price set contracts in place for housekeeping (present-2023) and food service (present-2025).
 - If labor costs and food prices continue to rise at a level that is not sustainable by the contractor, we will see early termination of contracts as we did during COVID.
- Travel costs will increase due to gas prices.
 - Regional and statewide travel is required to meet our statutory responsibility to monitor and certify programs.
 - Increased use of virtual meetings which worked well during COVID will decrease travel expenses.
 - The increase in gas prices can be managed.

Economic Impact on the Department

Year over Year Expenses

May Fiscal YTD Expense Comparison (2018 & 2019 base years)



Workforce Challenges & Opportunities

ID/DD Community Providers: Self-Reported Quarterly Wage Data

Q1 Ending March 31, 2022

There is more demand for direct support professionals than there is workforce to deliver the services.

ID/DD Provider Positions	Average Wage (Hourly)	Average Wage (Annual)	Comparable Job Positions (labor.alabama.gov)	Average Wage (Hourly)	Average Wage (Annual)
DSPs	\$11.53	\$25,670.00	DYS Youth Services Aide	\$16.22	\$33,744.00
LPNs	\$19.72	\$33,541.17	LPNs	\$19.97	\$41,540.00
RNs	\$27.00	\$38,520.49	RNs	\$29.77	\$61,920.00
QDDPs	\$20.59	\$34,175.44	Social Worker, Healthcare	\$24.26	\$50,450.00
Support Coordinators	\$18.47	\$36,328.73	Entry-Level Teacher	\$20.85	\$43,358.00

Workforce Challenges & Opportunities

MH/SA Community Providers: Self-Reported Quarterly Wage Data

Q1 Ending March 31, 2022

There is more demand for behavioral health treatment than there is workforce to deliver the services.

MH/SA Provider Positions	Average Wage (Hourly)	Average Wage (Annual)	Comparable Job Positions (labor.alabama.gov)	Average Wage (Hourly)	Average Wage (Annual)
LPNs	\$18.36	\$27,384.14	LPNs	\$19.97	\$41,540.00
RNs	\$24.51	\$30,916.43	RNs	\$29.77	\$61,920.00
Mental Health Techs	\$11.00	\$22,880.00	Mental Health Worker	\$13.64	\$28,360.80
Master's Level Clinicians	\$16.63	\$34,589.00	Entry-Level Teacher	\$20.85	\$43,358.00

Summary of Risks and Flexibilities

- The greatest risk is the workforce shortage.
 - To be competitive in the current market, multiple strategies will need to be employed by ADMH and provider (contract workers).
- Inflationary costs can be absorbed for a brief period of time but cannot be sustained at existing funding levels over an extended period of time.
- Special Mental Health Trust Fund is negatively impacted by inflation, which decreases our flexibility going into a recession.
- FMAP savings and SAMHSA ARPA funding can bridge programs.



Kimberly G. Boswell, Commissioner

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