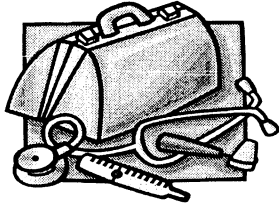


**Mental Health Services
County Responsibility**
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**The President's New Freedom Commission
on Mental Health Report**

***"Our country must make a commitment.
Americans with mental illness deserve
our respect . . . and they deserve
excellent care."***

**President George W. Bush –
announcing the New Freedom
Commission on Mental Health.**

**The President's New Freedom Commission
Mental Health Report**

- Multiple programs exist each with different goals and requirements.
- Services and funding are fragmented across different programs, as well as inconsistent in service provision.

- Systems of treatment and care need to be flexible.
- All systems need to be able to serve consumers who are uninsured or underinsured.
- Steps must be taken to improve the flexibility and accountability of financing in both private insurance and public programs.

Mental Health System

- Jails are becoming the “social service system of last resort”
- Studies indicate that 16% of State prisoners and 7% of Federal prisoners suffer from mental illness.
- These individuals usually average longer lengths of incarceration than other inmates.

Mental Health System

- Direct and indirect costs associated with mental health
 - Indirect Costs
 - Loss of employment
 - Inability to take care of one's family
 - Lack of Insurance Coverage
 - Stigma
 - Lives lost
 - Direct Costs
 - Treatment
 - Rehabilitation
 - Medicaid
 - Medicare
 - SSI/SSD
 - Jails and Courts

Mental Health System State of Idaho

- Idaho has remained in the top 10 states for suicide in the last several years dropping to 12th in 1996 and 16th in 2000.
- Idaho ranked 7th in suicides per capita in 2001 and 8th in 2003
- Idaho is 49th in the nation on spending for mental health care.

Health and Welfare Reports

- Idaho Target Population is:
 - Severe and Persistent Mental Illness
 - 18 years or older
 - Diagnosis under the DSM-IV
 - Schizophrenia, schizoaffective disorder, major affective disorder, delusional disorder, or borderline personality disorder; and,
 - Sufficiently severe to disturb at least 2 of the following: vocational/academic, financial, social/interpersonal, family, basic living skills, housing, community or health.

Health and Welfare Reports

- Services provided by DHW include:
 - Low-income and indigent persons
 - Coordination for involuntary treatment
 - Oversee provision of DE's
 - Gatekeeper for State Hospitals
 - Prescreen Medicaid eligible young adults (18-21) for inpatient services

Idaho Department of Health and Welfare

- DHW responsibility is limited to serving the severe and persistently mentally ill
- Limited funding prevents DHW from serving more people

- Does this stop or reduce the need or request for care and services?

Idaho Department of Health and Welfare

- > The State has not accepted voluntary admissions to either State Hospital North or South since 1998.
- > In some cases a person must decompensate to a level where involuntary hospitalization is necessary before treatment begins.
- > The door to Health and Welfare for Mental Health Services is simply too narrow
 - Limited to SPMI

Are Voluntary Admissions a Counties Responsibility?

- > **Idaho Code 66-318**
 - Allows any individual 18 years of age or older to voluntarily admit themselves to any facility.
 - > Idaho Code 66-317(g) "Facility means any public or private hospital, sanatorium, institution, mental health center or other organization . . ."
 - > Idaho Code 66-320(b) "Notwithstanding any other provision of this chapter, judicial proceedings authorized by this chapter shall not be commenced with respect to a voluntary patient unless release of the patient has been requested . . ."

Chapter 31 Title 39

- > I.C. 39-3123 "Acknowledging that it is the policy of the state to provide mental hospital services to all citizens in need of such care, it is the purpose of this act to delegate to the state mental health authority the responsibility and authority to establish and maintain regional comprehensive mental health services in order to extend appropriate mental health services to her citizens within all regions of the state."
- > I.C. 39-3124 "The Idaho department of health and welfare is hereby designated the state mental health authority."
- > I.C. 39-3125 "Recognizing both the right of every citizen to the best mental health services that the state is able to provide and the disproportionate ability of counties to finance mental health services, the state mental health authority shall designate regions for the purpose of establishing regional comprehensive mental health services for all areas of the state."

County Responsibility for Indigents

- > Prosecuting Attorney
 - Court appointed attorney
- > Courts
- > Indigent Services
 - Medication
 - Medical Care
 - Rent/Utilities
- > Law Enforcement
 - Jail
 - Transportation between facilities
 - Medication
 - Medical Care

Determination of Responsibility for the Cost

- > Length of stay is determined by the admitting facility who seeks county/state funds

- > Payment source is determined
 - Involuntary
 - Voluntary

County Commitment Costs

- > **Idaho Code 66-327**
 - Responsibilities for the cost of **commitment** and care of adult patients shall be the responsibility of the person, their spouse, adult children or if indigent the county of that person's residence.
 - If the **court** determines the individual is unable to pay for their **commitment** costs the **court** puts that responsibility upon the county under Chapter 35, title 31, Idaho Code.
 - The department of health and welfare assumes custody after the person is determined committable by the court.

Voluntary Indigent Costs

- > Counties are responsible for the medical bills of the indigent under Chapter 35
- > The Boards of County Commissioners makes the determination of indigence under Chapter 35
 - The courts make the determination of indigence under Chapter 3
- > Private providers seek payment for indigent mentally ill individuals – voluntary as outlined under Chapter 3
 - Individuals seeking treatment are "encouraged" to enter voluntarily
 - Same individuals are suicidal (danger to self or others)
 - 66-318 (3) "The applicant's welfare or the welfare of society, or both, are better protected by the provisions of section 66-329"
 - 66-329 "Commitment to department director upon court order – Judicial procedure."

Voluntary Patient Costs to the Counties

- > Daily bed rate charges for private facilities for psychiatric admissions varies from county to county.

FACILITY	DAILY RATE	COST
St. Joseph Regional	\$1,615.00 X 61%	\$985.15
Kootenai Medical	\$1,365.00 X 59%	\$805.35
St. Alphonsus	\$ 932.00 X 72%	\$559.20
Portneuf Medical	\$1,070.00 X 59%	\$631.30
Magic Valley	\$1,445.00 X 61%	\$881.45

Daily Hospital Bed Rates

Citizen Mental Health	County Mental Health	State Mental Health	St. North Hospital	County Physical Health	County Physical Health ICU
\$1,523	\$1,523	\$1,523	\$380	\$859	\$1863
27 days \$41,121	6 days \$5,848	16 days \$15,200	27 days \$10,260	27 days \$14,844	27 days \$32,192
	Involuntary 5 days @ \$980 \$4,900	\$950 per day contracted rate		\$10,000 county \$4,844 CAT	\$10,000 county \$22,192 CAT
\$41,212	\$10,748*	\$15,200*	\$10,260	\$14,843	\$32,192
Total \$41,121	Total \$25,948*	(27 days)	Total \$10,260	Total \$14,843	Total \$32,192

*\$25,948 - \$10,260 = difference \$15,688 more for a private facility

The Catastrophic Health Care Cost Program Annual Report of Counties

- > Cost for mental health care reported by the CAT over the last 4 years -\$2.6 million dollars per year.
- > 2004/2005 CAT reporting period totaled \$2.9 million.

Children's Mental Health Services

- > **Idaho Code 16-2431**
 - The counties assume the same costs for **involuntary** admission for children as they do for adults. However, "counties shall have no responsibility for costs of **voluntary** treatment for children under this chapter."
 - The law needs to be consistent for both children and adults.

Problem areas for the Counties

- Counties are working under an antiquated law
 - State no longer accepts voluntary patients at State facilities
 - Longer waiting lists at state facilities do not allow individuals to enter as voluntary patients under Chapter 3
 - Misconception/assumptions of responsibility by all parties
- **Residence**
 - Idaho Code 66-328
 - Cost to be fixed on the person's county of residence
 - County of residence must agree to pay I. C. 66-328
 - Court determines responsibility based upon Chapter 35, title 31 - indigence

Problem areas for the Counties

- Counties are not the Mental Health Authority
 - County indigent staff are not mental health professionals, social workers, nor counselors
 - No staff clinicians or psychiatrists
 - County service workers use financial and investigative techniques to process applications
 - Applicants can enter at anytime as a voluntary patient even though they are a danger to self or others (I.C. 66-317 (k)(1)(2) (m) (a state criteria I.C. 66-329)
 - Applicants can enter as a voluntary patient after having been determined not committable by a DE

Problem areas for the Counties

- Limited to 3% cap on increase on property taxes or maximum levy limit
- Applications are filed after the fact
- Law enforcement is not responsible for transport of individuals unless they have been order by the court, picked up for a crime, or placed on a protective custody hold. I.C. 66-327, 66-329, and 18-211

Mental Health Boards

- Idaho Code 39-3130 Regional Mental Health Boards
 - Code changed the authority of the Regional Boards
 - No longer just advisory
 - Can submit service component plans
 - Identify local gaps in service
 - Make regional changes based on regional input
 - Improved communications between local and state agencies

What is the Solution?

1. More funding?
 2. Is early intervention more beneficial than crisis level services?
 3. Clarify the Law by outlining responsibility?
 4. Consistency in the law for both children and adult mental health?
 5. Is there a need to expand the eligibility criteria to be able to access needed mental health care in Idaho beyond service only for SPMI?
- > "Recognizing both the right of every citizen to the best mental health services that the state is able to provide and the disproportionate ability of counties to finance mental health services . . ."

References:

- > USA Suicide Summary: 1999
- > Idaho Code
- > Catastrophic Health Care Cost Program Summary (2002 – 2005)
- > Mental Health: Report of the Surgeon General – 1999
- > Idaho State Planning Grant Final Report – 2002
- > Idaho Mental Health – Region II and County surveys
- > Substance Abuse and Mental Health Services Administration (SAMHSA)
- > American Association of Suicidology
