MENTAL HEALTH SYSTEM STATE COMPARISON

TEXAS
Introduction

About NACBHDD

Since 1989, the National Association of County Behavioral Health and Developmental Disability Directors (NACBHDD) has been the leading voice for county and local authorities. Through our unique perspective informed by the critical role counties and county aligned mental health authorities play in caring for people affected by mental illness, addiction, and developmental disabilities, we work to strengthen the nation’s local public behavioral health and I/DD systems. We do this by providing a national forum for state and local collaboration, education, advocacy, and sharing solutions that drive policy.

A Note on the Case Study

Local mental health authorities have been on the frontlines for managing and providing care in community settings since widespread deinstitutionalization in the 1960s. However, there are wide variations in how states organize their local public mental health authorities. Given the increasing demand for mental health services, the launch of 988, a nationwide behavioral health crisis line, and the growing recognition of community-based approaches to whole person health and human services, the role of local authorities is increasing in importance.

Why The Measures?

To better understand the existing landscape of local mental health authorities, we compared two states with robust public systems: Texas and Michigan. This case study succinctly identifies current authorities and structures for the behavioral health systems, their relationship with Medicaid—the largest federal payer for mental health services, and how these systems are positioned to interact with the crisis continuum as 988 is built out.

The goal of this case study is to provide a variety of stakeholders with a better understanding of who their local mental health authorities are, how they came to be, and their relevancy to current behavioral health issues.
Report Authors

Jonah C. Cunningham, MPP
President and CEO
National Association of County Behavioral Health and Developmental Disability Directors

Makana Meyer
Operations Manager
National Association of County Behavioral Health and Developmental Disability Directors

Katie Horton
The George Washington University

Naomi Seiler
The George Washington University

External Reviewers

Lee Johnson
Chief Executive Officer
Texas Council of Community Centers

Rene Hurtado
Chief of Staff
Emergence Health Network

Kristi Daughtery
Chief Executive Officer
Emergence Health Network

Leon Evans
Chief Executive Officer
Three Bears Consulting

Danette Castle
Senior Advisor
Texas Council of Community Centers

David Weden
Chief of System Finance
Texas Council of Community Centers
Highlights

Structure of Public System:

- 37 Local Mental Health Authorities (LMHAs) and 2 Local Behavioral Health Authorities (LBHAs)
- All LMHAs and LBHAs are Certified Community Behavioral Health Clinics
- Deliver needed services in their designated portions of the state

Medicaid:

- State has 5,374,020 Medicaid Enrollees; has not expanded Medicaid for low-income adults
- LMHAs and LBHAs bill Medicaid and other insurance for services
- New Directed Payment Program requires Managed Care Organizations to pay enhanced rates to LMHA and LBHAs

Crisis Response:

- Every LMHA and LBHA runs a crisis call center for patients
- LMHAs and LBHAs also provide other crisis services
- 4 LMHAs serve as 988 call centers covering four regions of the state
In Texas, the state Health and Human Services Commission, or HHSC, delivers mental health services through contracts with 37 local mental health authorities (LMHAs), also known as community mental health centers, and with 2 local behavioral health authorities (LBHAs).¹ All 39 LMHAs and LBHAs have achieved Certified Community Behavioral Health Clinic (CCBHC) status.² Each authority/center serves one or more counties across the state³:
Each LMHA and LBHA must conduct evaluations of the mental health needs in its service area communities and deliver needed services, either directly or by contracting with other providers to offer services.

For adults, LMHA/LBHA provide a broad range of services, including (but not limited to)⁴:

**Statewide:**
- Crisis Hotline (accredited)
- Mobile Crisis outreach Teams
- Crisis Transitional Services
- Intensive Ongoing Services
- Jail Diversion Planning
- Medication-Related Services
- Skills Training (psychosocial rehab)
- Case Management
- Cognitive Behavioral Therapy (CBT)
- Supported Employment
- Supported Housing
- Assertive Community Treatment (ACT)
- Benefits Assistance
- Peer Support Services
- Local Hospital Beds
- Substance Use Disorder Services
- Certified Community Behavioral Health Clinic Services

**Certain Local Service Areas:**
- Crisis Stabilization Units
- Extended Observation Units (23-48 hours)
- Crisis Residential Services
- Crisis Respite Services
- Crisis Step-Down/Local Hospital
- Outpatient Competency Restoration
- Community Hospitals
- Coordinated Specialty Care
- Diversion Centers
- Homeless Services
- Multisystemic Therapy (MST)
- Jail Based Competency Restoration (JBCR)
- Outpatient Competency Restoration (OCR)
Adult services are provided on a sliding-scale basis, with charges assessed based on the recipients’ income, expenses, and household size. Insurance is billed when available.⁵

For youth with mental health conditions and their families, Texas has developed a system of care model that combines networks of providers and social supports. The system includes wraparound planning⁶ and family-to-family support in all 254 counties in Texas.⁷ Combined with a Medicaid waiver (see further info below, under Medicaid), the system is designed to support children with mental health conditions and their families with comprehensive clinical services and social supports.

The state can amend its contracts with LMHAs to implement focused pilot programs in one or more counties. For example, through the Mental Health Peer Support Re-entry Pilot Program, supported by state general funds, three LMHAs provide peer support services for people who are incarcerated, as well as linkages to licensed mental health professionals and community-based mental health services.⁸ Through another initiative, four LMHAs serve as Regional Suicide Care Support Centers, providing technical assistance and training to all other LMHA/LBHAs across the state.⁹

Texas funds behavioral health through general appropriations, supplemental appropriations, and Medicaid funding mechanisms for enrollees and for charity care.¹⁰

Source: Texas Council of Community Centers

**FY 21 Funding Sources**

<table>
<thead>
<tr>
<th>Source</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>General Revenue</td>
<td>32%</td>
</tr>
<tr>
<td>Local</td>
<td>18%</td>
</tr>
<tr>
<td>Medicaid and Medicare</td>
<td>16%</td>
</tr>
<tr>
<td>Other Federal</td>
<td>28%</td>
</tr>
<tr>
<td>Other State Funding</td>
<td>6%</td>
</tr>
</tbody>
</table>
Medicaid

As of November 2022, the Texas Medicaid program had 5,374,020 enrollees, of whom 3,919,895 were children.¹¹ The federal government paid 68% of the costs of the program in 2021. The Texas Medicaid program has not been expanded to serve all low-income adults. The majority of Texas Medicaid enrollees receive their care through comprehensive managed care organizations (MCO), which contract with the state to provide all services, including behavioral healthcare.

If someone receiving care through a local mental health authority or local behavioral health authority is enrolled in Medicaid, the services are billed to Medicaid.¹²

Texas has a statewide 1915(c) Medicaid waiver called Youth Empowerment Services (YES) that provides services for children aged 3-18 with serious mental, emotional and behavioral difficulties who are at risk of being placed outside the home.¹³ The YES Waiver provides a team approach and includes a set of services, as needed, including specialized therapies, community living supports, family supports, employee assistance and supported employment, paraprofessional services; respite services, nonmedical transportation, supportive family-based alternatives, adaptive aids and supports, minor home modifications, and transition services.¹⁴

Under the state’s 1115 waiver, Texas’s Medicaid program maintains a Public Health Provider-Charity Care Pool for qualifying public providers of services, including behavioral health services, when other payment sources for low-income, uninsured individuals are not available. LMHAs and LBHAs qualify to receive reimbursement under this program.¹⁵

Texas’s Medicaid program has recently implemented a Directed Payment Program for Behavioral Health Services (DPP-BHS). This program directs Medicaid managed care organizations to fund eligible public providers with uniform dollar increase and uniform percentage increase payments in addition to contracted rates for provision of behavioral health services, care transitions, and care coordination.¹⁶ The additional payments for the program were determined based on the difference in costs between the Certified Community Behavioral Health Clinic model of care and the established Medicaid rates.
Crisis System

Every LMHA and LBHA runs a local crisis hotline with its own toll-free number. The local authorities also coordinate with the national 988 Lifeline. As of November 2022, the state contracts with four LMHAs that serve as “988 centers” that cover the state through four regions. This work is funded by the state using SAMHSA Mental Health Block Grants. The state also received a SAMHSA 988 planning grant, and was awarded further SAMHSA funding through a cooperative agreement to increase the percentage of calls, texts, and chats that receive a response in Texas (rather than being routed to a national backup center).

In 2007 the Texas legislature began a series of investments to support the development of a crisis response system that would be available statewide. As a result of these investments, LMHAs and LBHAs also provide a range of other crisis services, such as mobile crisis outreach teams (MCOTs) and various types of crisis facilities. Several contract with local law enforcement departments to provide “mental health deputies” and other linkage programs to help individuals in crisis. Many are able to provide crisis facility-based services, including crisis respite services, crisis residential services, extended observation units, and crisis stabilization units. The state also funds all LMHAs and LBHAs to contract with inpatient psychiatric services through locally operated private and public hospitals for stabilization of patients with acute needs.
Conclusion

Texas uses a system of publicly funded local mental health and behavioral health authorities to address mental health needs across the state through 37 local mental health authorities (LMHAs), and 2 local behavioral health authorities (LBHAs). These agencies are funded by contract with the state as well as through local taxing authority contributions, Medicaid, commercial insurance, federal grants, local foundations, and recipient charges.

The Texas Medicaid program had 5,374,020 enrollees, of whom 3,919,895 were children.²⁰ The federal government paid 68% of the costs of the program in 2021. The Texas Medicaid program has not been expanded to serve all low-income adults.

Every LMHA and LBHA runs a local crisis hotline with its own toll-free number.²¹ The local authorities also coordinate with the national 988 Lifeline. The state contracts with four LMHAs that serve as “988 centers” that cover the state through four regions.²² LMHAs and LBHAs also provide a range of other crisis services, such as mobile crisis outreach teams (MCOTs) and various types of crisis facilities.
Thank you to:
Texas Council of Community Centers
Emergence Health Network
Three Bears Consulting

State Resources

Texas Health and Human Services, Mental Health and Substance Use:
https://www.hhs.texas.gov/services/mental-health-substance-use

Texas Medicaid Program:
https://www.hhs.texas.gov/services/health/medicaid-chip

Texas Council of Community Centers, Representing the 39 LMHAs and LBHAs:
https://www.hhs.texas.gov/services/health/medicaid-chip

MENTAL HEALTH STATE COMPARISON PROJECT:
TEXAS NACBHDD
Endnotes

1) https://www.hhs.texas.gov/services/mental-health-substance-use/adult-mental-health
2) https://txcouncil.com/initiatives/ccbhc/
4) https://www.hhs.texas.gov/services/mental-health-substance-use/adult-mental-health
6) https://txsystemofcare.org/initiatives/wraparound/
7) https://txsystemofcare.org/about/communities/
8) https://www.hhs.texas.gov/providers/behavioral-health-services-providers/peer-support-services/mental-health-peer-support-re-entry-pilot-program
13) https://www.hhs.texas.gov/services/mental-health-substance-use/childrens-mental-health/yes-waiver
14) https://www.hhs.texas.gov/services/mental-health-substance-use/childrens-mental-health/yes-waiver
17) https://www.hhs.texas.gov/services/mental-health-substance-use/mental-health-crisis-services
21) https://www.hhs.texas.gov/services/mental-health-substance-use/mental-health-crisis-services