

MENTAL HEALTH AND SUBSTANCE ABUSE SERVICES FISCAL YEAR 2023-2024 BUDGET HEARING



OUR MISSION:

Creating

COLLABORATIVE PATHWAYS TO

RESILIENCY, RECOVERY, and INDFPFNDFNCF

for Tennesseans living with mental illness and

substance use disorders

OUR VISION:

A STATE

of resiliency, recovery, and independence

IN WHICH

TENNESSEANS

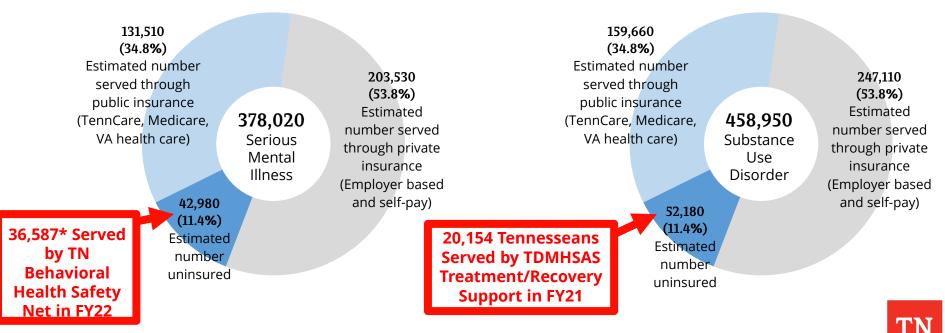
living with mental illness and substance use disorders

THRIVE

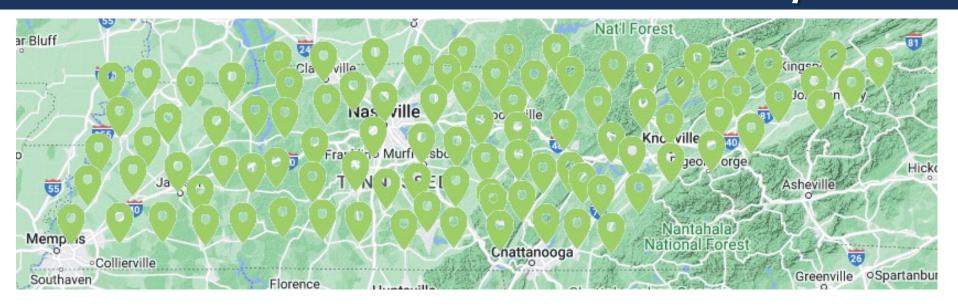
Continued Efforts to Close the Gap

2019 Tennesseans, ages 18+: 378,020 were estimated to have serious mental illness (SMI) (7.1% of 5,324,254 Tennesseans, rounded to nearest 10)

2019 Tennesseans, ages 18+: 458,950 were estimated to have a substance use disorder (SUD) (8.62% of 5,324,254 Tennesseans, rounded to nearest 10)



TDMHSAS Public Behavioral Health System



652,315 Tennesseans Served by TDMHSAS Public Behavioral Health System in FY21.



Based on continued workforce challenges, TDMHSAS is requesting two (2) FY24 cost increases to support the public behavioral health provider network:

1. Provider Rate Increase: \$18,000,000 Recurring

- This funding will support TDMHSAS state-funded, community-based behavioral health providers who have been dramatically impacted by employee turnover, hard-to-fill vacancies, and staff burnout due to increased overtime responsibilities and demand for service.
- Prior to the FY23 increase, TDMHSAS providers hadn't received significant rate increases in more than a decade.
- This FY24 cost increase will account for a 10% increase in provider rates.

2. Behavioral Health Workforce Initiative: \$10,000,000 Non-Recurring

- Key Components: Sign-On Bonuses, Scholarships, Internship Portal
- Expected Outcomes: More students pursuing education in behavioral health related fields, participating in internships with public behavioral health agencies, working for public behavioral health agencies post-graduation, and maintaining employment long-term with public behavioral health agencies long-term.
- Based on HRSA's Bureau of Health Workforce Tennessee data, by 2030 estimated shortages include psychiatrists (780), psychologists (890), addiction counselors (830), and mental health counselors (1,270).

To meet the significant need for infrastructure around treatment and recovery services, we are proposing two increases:

- 3. Substance Use Residential Treatment Bed Infrastructure: \$2,460,000 Recurring (operations), \$12,000,000 Non-Recurring (infrastructure)
 - Tennessee has an 84% higher opioid overdose death rate than the U.S. overall.
 - The demand for residential substance use treatment beds has revealed capacity limitations of the state's public behavioral health system.
 - These funds will add 60 new residential treatment beds across the state and to serve approximately 530 individuals annually.
- Residential Re-Entry Housing: \$6,320,700 Recurring (operations), \$6,748,200 Non-Recurring (infrastructure)
 - This would fund Long-Term Supportive Residential Services for people who would otherwise not be able to successfully live in the community due to the lack of available housing with the capacity to meet their specific needs.
 - Targeted Population: People living with Serious Mental Illness who are currently incarcerated
 - Proposed six (6) facilities total, two (2) in each Grand Division, 108 beds total



We remain proud of our department's ability to put every dollar possible into the community. Currently our overhead is 6%. We respectfully request additional staff in 2 key areas.

5. Licensure Staffing: \$497,900 Recurring

- In the last six years, Tennessee's behavioral health providers have seen a 27% increase in licensed sites and a 46% increase in incidents/investigations, all without any increase in TDMHSAS Licensure personnel.
- The coming implementation of virtual service licensure will further add to the workload.
- This cost increase will allow us to add three investigators and one supervisor, as well as reclassifying three existing surveyor positions to investigators.

TDMHSAS Current Licensure Staffing Rates						
114 Sites per FTE	162.3 Investigations per FTE					
TDMHSAS Proposed Licensure Staffing Rates						
90 Sites per FTE	128 Investigations per FTE					



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6. Contract and Legal Staff: \$341,500 recurring

- 65% of the TDMHSAS budget goes to community-based services requiring more than 1,000 contracts to be drafted, processed, and legally reviewed in a timely and accurate manner.
- TDMHSAS currently only has four attorney positions and two fulltime contract support staff.
- This cost increase will allow us to add two new contract specialists and an attorney.

TDMHSAS Current Staffing Rates

LEGAL

- **4** Attorneys
- **0** Paralegals/Legal Assistants
- **0.67** Administrative

Support

TOTAL 4.67FTES

CONTRACTS

- **2.33** FTEs
- ~1,055 Contracts
- 453 Contracts per FTE
- (317 per FTE including

Contracts Director)

TDMHSAS Proposed Staffing Rates

LEGAL

- **5** Attorneys
- **0** Paralegals/Legal

Assistants

0.67 Administrative

Support

TOTAL 5.67FTES

CONTRACTS

- **4.33** FTEs
- ~1,055 Contracts

244 Contracts per FTE

(198 per FTE including

Contracts Director)



Governor's Budget Hearings, FY 2023-2024

Our department and community-based providers have established a strong track record of diverting youth from deep end juvenile justice interventions over the last few years. We are gratefully requesting additional funding to serve more youth and families.

7. Juvenile Justice Diversion: \$1,332,000 recurring

- This will build on current investments and will allow providers to serve more youth and families alleviating wait list issues.
- Since referrals began in January 2019, more than 3,000 youth and families have received services through this program.
- Among youth served in FY22, there was a 97% reduction in out of home placement and a 95% decrease in recidivism.
- An anticipated additional 300 youth will be served annually.



Mental Health and Substance Abuse Services - Cost Increase Request

	State								
		Recurring		NR	Federal	Other		Total	Positions
1 Provider Rate Increase	\$	18,000,000	\$	-	\$ - 9	5	- \$	18,000,000	-
2 Behavioral Health Workforce Initiative		-		10,000,000	-		-	10,000,000	-
3 Substance Use Residential Treatment Bed Infrastructure		2,460,000		12,000,000	-		-	14,460,000	-
4 Residential Re-entry Housing		6,320,700		6,748,200	-		-	13,068,900	1
5 Licensure Staffing		497,900		-	-		-	497,900	4
6 Contract and Legal Staff		341,500		-	-		-	341,500	3
7 Juvenile Justice Diversion		1,322,000		-	-		-	1,322,000	-
8 Major Maintenance		450,000		-	-		-	450,000	-
Total Cost Increases	\$	29,392,100	\$	28,748,200	\$ - (\$	- \$	58,140,300	8



Mental Health and Substance Abuse Services - 1% Efficiency Plan

	State					
	Recurring	NR	Federal	Other	Tota	al Positions
1 Peer Support Centers	\$ (1,071,100) \$	-	\$ -	\$ -	- \$	
Total Efficiency Plan	\$ (1,071,100) \$	_	\$ -	\$ -	· \$	



THANK YOU

