

League of Women Voters of Southwest Missouri
Study of Accessibility and Affordability of Mental Health
Services in Greene County
Executive Summary Report

July 2015

View the full 24-page report at www.lwvswmo.org

The League of Women Voters is a non-partisan organization that encourages informed and active participation in government, works to increase understanding of major public policy issues, and influences public policy through education and advocacy.

Members of the League's Mental Health Study Committee (2013-2015) included Maggie Castrey, Lynn Dalton, Judy Dasovich, Diane Davidson, Lisa Cox Hall, Fran Harris, Pat Mort, Randy Hoops, Joye Norris, and Julie Schulze.

About the Mental Health Study

The League of Women Voters of Southwest Missouri conducted a local study of the accessibility and affordability of mental healthcare services for adults in Greene County. In the course of two years beginning May 2013, the League conducted more than 20 informational activities and met with mental health care service providers, members of the law enforcement, correctional and judicial systems, advocacy/support groups, local and state officials, and families of mental health patients.

Study Discoveries

Over the past 50 years, **state hospitals for the mentally ill have been dismantled** with a goal of improving treatment by providing it within local communities. Although a wide variety of services are available locally, funding is inadequate and the supply does not meet the demand. In general, states spend much less today on direct mental health services than we spent 60 years ago; one report puts spending at just 12% of the 1955 investment.

The Missouri Department of Mental Health (DMH) divides the state into service areas. **Burrell Behavioral Health is the Administrative Agent** for Greene County, designated by the Missouri Department of Mental Health. Burrell serves as the primary entry and exit point for dozens of services to thousands of residents with and without insurance. These services are primarily tax-supported but also paid by grants, private insurance, pharmaceutical and other funding.

Mental and behavioral health services are generally less available than physical health services. Social stigma is still a barrier to getting help. People with serious mental illness often experience chronic health conditions, substance abuse and early death. **Mental health care providers serve those with mental illness with great compassion and skill.** However, the combined *system of services* is underfunded, uncoordinated, and afflicted with bureaucratic hurdles. Shortages of service providers throughout the system result from restrictive licensing regulations, high cost of

training, and stringent reimbursement guidelines.

The Greene County jail is, by default, the largest mental health facility in Southwest Missouri. Over 17 percent of jail inmates have a mental illness; many are arrested repeatedly for misdemeanor nuisance behaviors, often made worse by substance abuse. All services provided to these individuals at the jail are funded by Greene County taxpayers. Various community efforts to divert mentally ill persons from jail into mental health services show much promise.

State funding continues to decrease. Legislators refused repeatedly to expand Medicaid; instead some have proposed further expansion of Medicaid managed care. Poverty is a significant factor in a lack of access to mental health help. Tax levies are used in other counties to support mental health services, but Greene County has not yet voted to support such a tax. Approximately \$31,000 in Greene County tax dollars could pay for 19 days in a hospital, 94 days in jail, or 365 days living in subsidized housing receiving treatment.

The closing this year of Forest Institute and the Kitchen Clinic may lead to further shrinkage of mental health services. In the past two years **four major community reports have listed mental health as a top priority needing improvement.**

Overview of Interviewees' Recommendations for Improvement

The individuals we interviewed made dozens of suggestions for improving the current system, falling into the following broad categories. Please view the full report for details.

Greene County Actions

- Educate Community to Change Attitudes and Garner Support
- Increase Coordination Among Service Providers
- Revise Medical and Hospital Practices

Missouri and Federal Actions

- Modify the Culture of Medicine
- Increase Number of Providers
- Require Health Care Plans to Cover More
- Expand Allowable Services and Reimbursement

Community members and providers have been working diligently to address the issues above in a wide variety of ways. Some of these efforts are longstanding; some have begun since the League began this study. These are encouraging steps that our community can build on as it works collaboratively to provide care for all our residents with mental illness.

Moving Forward

The LWVSwMO is now preparing to move into the advocacy phase of the project. In the coming months we will gather more data, study solutions developed in other communities, and continue to develop relationships in the community. We hope for the opportunity to participate in a robust community-wide discussion of these issues aimed at creating solutions that are right for the Ozarks. Our goal will be to determine where the League can best help to fulfill the positions outlined below.

LWVSwMO Position Statement • May 2015

Having completed the two-year study that focused on the accessibility and affordability of Greene County's mental health care services for adults, the results of which are summarized in this document, the membership of the LWVSwMO has agreed to:

- promote mental/behavioral health as a public policy issue on par with physical health and physical disabilities;
- advocate for increased accessibility and affordability of mental health care services[±] for adults in Greene County with treatment based on need and not on the ability to pay;
- support efforts to divert mentally ill people from the Greene County jail and into appropriate mental health treatment;
- advocate for additional funding structures for mental health care;
- encourage and work with other organizations seeking to promote accessibility and affordability of mental health services for all.

[±] Services include, but are not limited to, those specified in the local League's 1987 Health and Human Needs position statement: "...housing...counseling...and outpatient case management such as special employment assistance, job training and/or supervised employment." The 1987 statement is in line with the original 1978 Health and Basic Human Needs position (which did not specifically address mental health) to "support health services especially for the poor and disadvantaged with focus on information and referral guidelines to access city/county health services."