



Intellectual and Developmental Disability and Behavioral Health Services

Fiscal Year 2022 In Review



TEXAS
Health and Human
Services



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DEPUTY EXECUTIVE COMMISSIONER MESSAGE



I am delighted to present to you our third annual report, Intellectual and Developmental Disability and Behavioral Health Services Fiscal Year 2022 In Review. This report highlights and reflects on our department's accomplishments throughout the past fiscal year.

There is no doubt that these are incredibly trying times for everyone involved in health care, from frontline workers to administrative staff to patients and all Texans. Despite the challenges, our department, in collaboration with our provider partners, continued consistently making a difference in the lives of Texans by providing services to support their intellectual and developmental disability (IDD) and behavioral health needs. In the spring of 2022, our department quickly rallied to respond to a terrible mass tragedy in Uvalde, immediately mobilizing Disaster Behavioral Health Services to assist with counseling, establish an emotional support line, and coordinate a mental health needs assessment to plan for the community's long-term needs. More assistance will continue in 2023 to help the community heal.

All the while, we have also moved forward on strategic initiatives to expand our service efforts in reaching Texans across the state. Intellectual and Developmental Disability and Behavioral Health Services (IDD-BHS) Contract Operations performed a phenomenal job in achieving close to 100 percent contract execution by the end of the fiscal year. The unit achieved this outcome by rapidly distributing supplemental federal funds to providers in order to expand mental health and substance use services.

We saw successes in key areas, including new initiatives aimed at suicide prevention and campaign awareness on opioid misuse; the continuation of IDD Services initiatives; the creation of the Office of the State Forensic Director, which was instrumental in assisting local communities in decreasing the state hospital waitlist through a partnership with the Health and Specialty Care System (HSCS); and positive developments in the rural mental health crisis and response outcomes through the All Texas Access initiative. You will find more detail about these and other efforts in this report.

Of course, we could not do this alone. We greatly appreciate the support from the Texas Legislature, Office of the Governor, Substance Abuse and Mental Health Services Administration (SAMHSA), Executive Commissioner Cecile Erwin Young, and Chief Program and Services Officer (CPSO) Michelle Alletto. We also deeply value our fruitful collaboration with HSCS on our continuum of care joint initiatives, statewide councils, and advisory committees due to their expertise and support. To our provider partners, including local mental health authorities (LMHAs), local behavioral health authorities (LBHAs), local intellectual and developmental disability authorities (LIDDAs), substance use disorder providers, and all other contractors, I extend much gratitude for the delivery of services that has helped all Texans have access to the right care at the right time and place.

Finally, the ones who really made this happen were all our employees across IDD-BHS and HSCS. Every day they work directly with partners, patients, community members, experts, and more to ensure Texans receive the best services possible. We are very lucky to have such a dedicated and knowledgeable staff.

We hope you receive valuable insights from this report on the important work we do. Thank you for your time and support.

A handwritten signature in black ink that reads "Monique Soyja".

MISSION, VISION, AND VALUES

MISSION



The IDD-BHS mission is to establish accountable and coordinated IDD and behavioral health systems of care that direct performance to achieve meaningful clinical and cost-effective outcomes for all Texans.

VISION



The IDD-BHS vision is to ensure that Texans have access to the right IDD and behavioral health services at the right time and place.

VALUES



IDD AND BEHAVIORAL HEALTH PROGRAMS AND SERVICES MUST:

- Be person-centered with the strengths and needs of the person determining the types of services and supports provided;
- Be culturally and linguistically sensitive with agencies, programs, and services that reflect the differences of the populations they serve;
- Be delivered in a flexible manner, where possible, to meet the needs of each child, family, or adult close to their community; and
- Be accessible to all Texans regardless of setting (i.e., school, jail, prison, etc.) through the use of innovative technologies, such as telemedicine, that increase access to treatment and address transportation barriers.



LEADERSHIP TEAM



SONJA GAINES
Deputy Executive Commissioner



ROBERT DOLE
Deputy Associate Commissioner
System Integration



COURTNEY HARVEY, PHD
Associate Commissioner
Office of Mental Health Coordination



TRINA ITA
Associate Commissioner
Behavioral Health Services



ANTHONY JALOMO
Director
Business Operations



NORA SALDIVAR
Director
Cross Division Coordination



JENNIE SIMPSON, PHD
Associate Commissioner
Office of the State Forensic Director



RODERICK SWAN
Associate Commissioner
Contract Operations



JAY TODD
Director
Innovation and Engagement



HALEY TURNER
Associate Commissioner
IDD Services
*As of November 1, 2022, serving as Deputy
Executive Commissioner of Community
Services.*



ROBERT WALKER
Executive Assistant



DONNIE WILSON
Director
Special Projects
*As of November 1, 2022, serving as Special Projects
Director of Community Services.*

DEPARTMENT OVERVIEW

IDD-BHS strives to ensure Texans have statewide access to the right community-based IDD and behavioral health services at the right time and place. The department administers the provision of outpatient mental health services, IDD services, community-based hospital services, substance use disorder services, and crisis services, including crisis hotlines and mobile crisis outreach teams. The department also oversees peer support and recovery services, veterans mental health, rural mental health, disaster response, and the coordination of forensic and jail diversion.

To meet the IDD and behavioral health needs of Texans, the department contracts with local authorities, home and community-based providers, and substance use organizations located geographically throughout the state. These organizations provide community-based services to persons living with a mental health condition and substance use disorder and their families. LIDDAs coordinate care and enroll eligible people into the Home and Community-based Services (HCS) and Texas Home Living (TxHmL) Medicaid waiver programs.

The public can find information on locating providers, services, and training by visiting the Mental Health Texas website (www.MentalHealthTX.org), a web-based resource available in 64 languages. The department's goal is to provide a responsive, transparent experience for Texans who need help with behavioral health for themselves or their families.

Note: In fiscal year 2023, CPSO realigned services within the division to better assist the public, resulting in IDD Services moving to a newly created department, Community Services.

Table 1. Fiscal Year 2022 IDD-BHS Total Clients Served

Program Area	FY 2022 Number Served
Behavioral Health Services	
Disaster Behavioral Health Services	2,444,681
Mental Health Services	303,875
Substance Use Services	2,191,210
IDD Services	70,097
Office of Mental Health Coordination	128,260
Total*	5,138,123

*Includes Disaster Behavioral Health Services, Office of Mental Health Coordination, and Substance Use Services data with potentially duplicated numbers due to people receiving more than one behavioral health service.

FISCAL YEAR 2022 DEPARTMENT GOALS

1. Further enhance Texas' national presence and recognition for innovative IDD-BHS approaches and enhance collaboration with other states regarding best practices.
2. Improve reporting on key IDD-BHS performance indicators that evaluate the effectiveness of business, legislative, and federal initiatives to inform evidence-based programmatic decisions.
3. Build new and strengthen existing interagency and stakeholder collaborative relationships through targeted, communication initiatives, using technology to maximize reach and outcomes.
4. Develop strategies to ensure leadership development, employee engagement and retention, and implementation of staff performance measures to ensure high-quality performance throughout IDD-BHS.
5. Refine and create policies and procedures to clearly define department functions across IDD-BHS.
6. Implement modern data systems and processes to integrate with current Texas Health and Human Services Commission (HHSC) and best-in-class systems.
7. Become more data-driven, improve decision-making, and maximize available funding.

FISCAL YEAR HIGHLIGHTS

Fiscal year 2022 was full of activity and achievements in IDD and behavioral health care for Texans. These are some highlights of how IDD-BHS made a difference.

Launch of Jail In-Reach Learning Collaborative

The Jail In-Reach Learning Collaborative (JIRLC) includes the State Hospital Forensic Medicine team, Office of the State Forensic Director, System Integration team, and Legal Services Division. Six new county-funded outpatient and jail-based competency restoration programs were initiated as a result of participating in the JIRLC.

Home and Community-Based Services-Adult Mental Health Strategic Plan Released

This long-term strategic plan will enhance statewide expansion through the development of program materials, such as testimonial videos from the perspective of participants, providers, and partners. The objective is to increase the recruitment and retention of providers across the state.

OCT

DEC

FEB

APR

\$500,000 Awarded to Home and Community-Based Services Providers

Home and Community-Based Services (HCBS)-Adult Mental Health was granted American Rescue Plan Act funding for the purpose of equipping contracted providers and their staff with technology to increase the availability of mental health services via remote delivery. As a result, 75 percent of HCBS providers have increased access to remote delivery of services.

\$8 Million 988 State and Territory SAMHSA Grant Awarded to Texas Health and Human Services Commission

State and territory agreements were developed to build and improve the workforce for the 988 Suicide and Crisis Lifeline response and improve crisis care coordination across states and territories through local, regional, or statewide lifeline and community mental health services.



Launch of Supportive Housing Classes

Virtual learning community workshops will increase capacity at LMHAs and LBHAs to create more stable housing opportunities for people with chronic physical and mental health issues.

JUN

JUL

Launch of 988 Suicide and Crisis Lifeline

HHSC spearheaded the launch of the 988 Suicide and Crisis Lifeline in Texas. This new national lifeline offers 24 hours a day, seven days a week access to support for anyone experiencing mental health-related distress. There are currently five 988-affiliated call centers operating in Texas.

\$8 Million Intellectual and Developmental Disability Projects Approved by Centers for Medicare and Medicaid Services

The first project supports the enhancement of the Long-Term Care (LTC) Online Portal, while the second project establishes an interface between the electronic health record systems of LIDDAs and the LTC Online Portal.

AUG

Texas Health and Human Services Commission Institute Resumed In-Person Conference

The 2022 Texas HHSC Institute used a hybrid format, allowing over 500 people to attend virtually and in person. The institute offered a number of tracks to develop and support the behavioral health workforce, including: Prevention, Treatment, and Recovery; Special Populations; Non-Clinical Drivers of Health; and Skills Building.

BUDGET AND CONTRACTS

The Business Operations unit provides financial oversight and direction for approximately \$1.6 billion. The Contract Operations unit is responsible for overseeing the contract lifecycle and compliance monitoring for more than 1,300 contracts valued at approximately \$1.5 billion. These units worked harder than ever in fiscal year 2022 to ensure new funding streams were managed in a responsible and efficient way, allowing us to do the most good for all Texans.

Figure 1. IDD-BHS Fiscal Year 2022 Budget

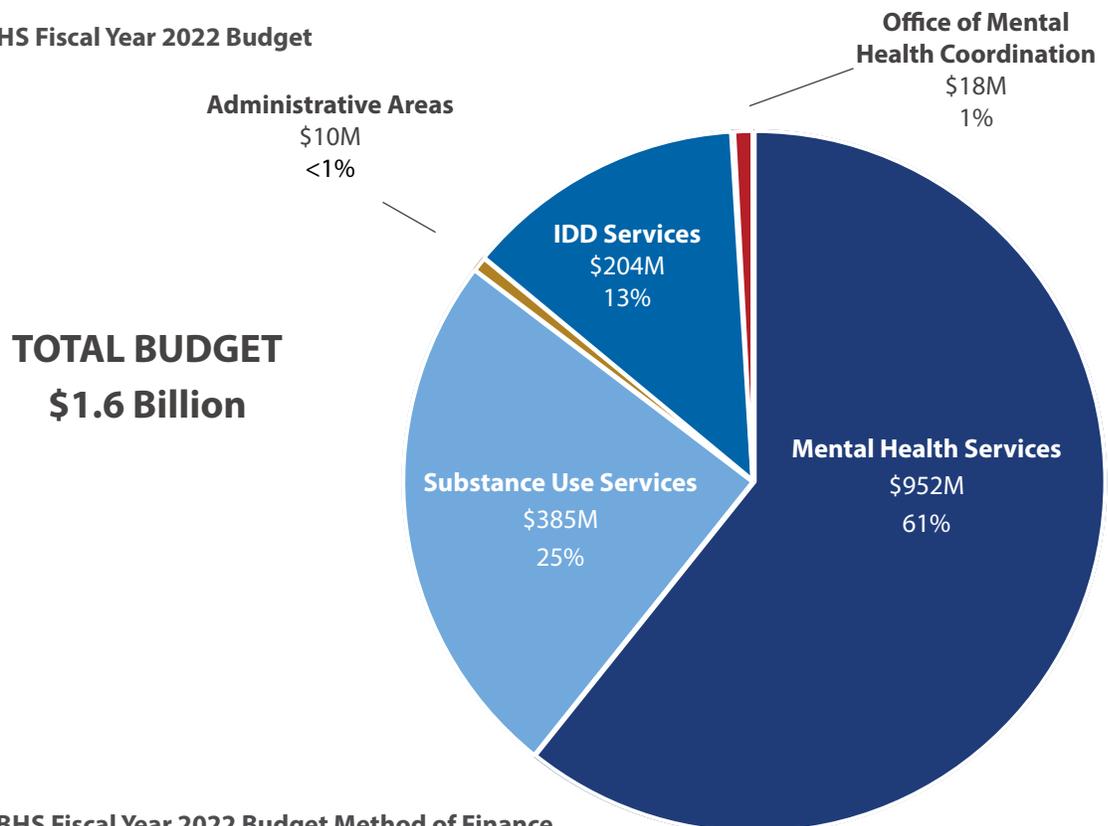


Figure 2. IDD-BHS Fiscal Year 2022 Budget Method of Finance

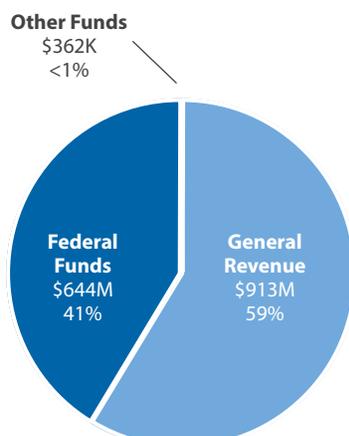


Figure 3. IDD-BHS Fiscal Year 2022 Contracts

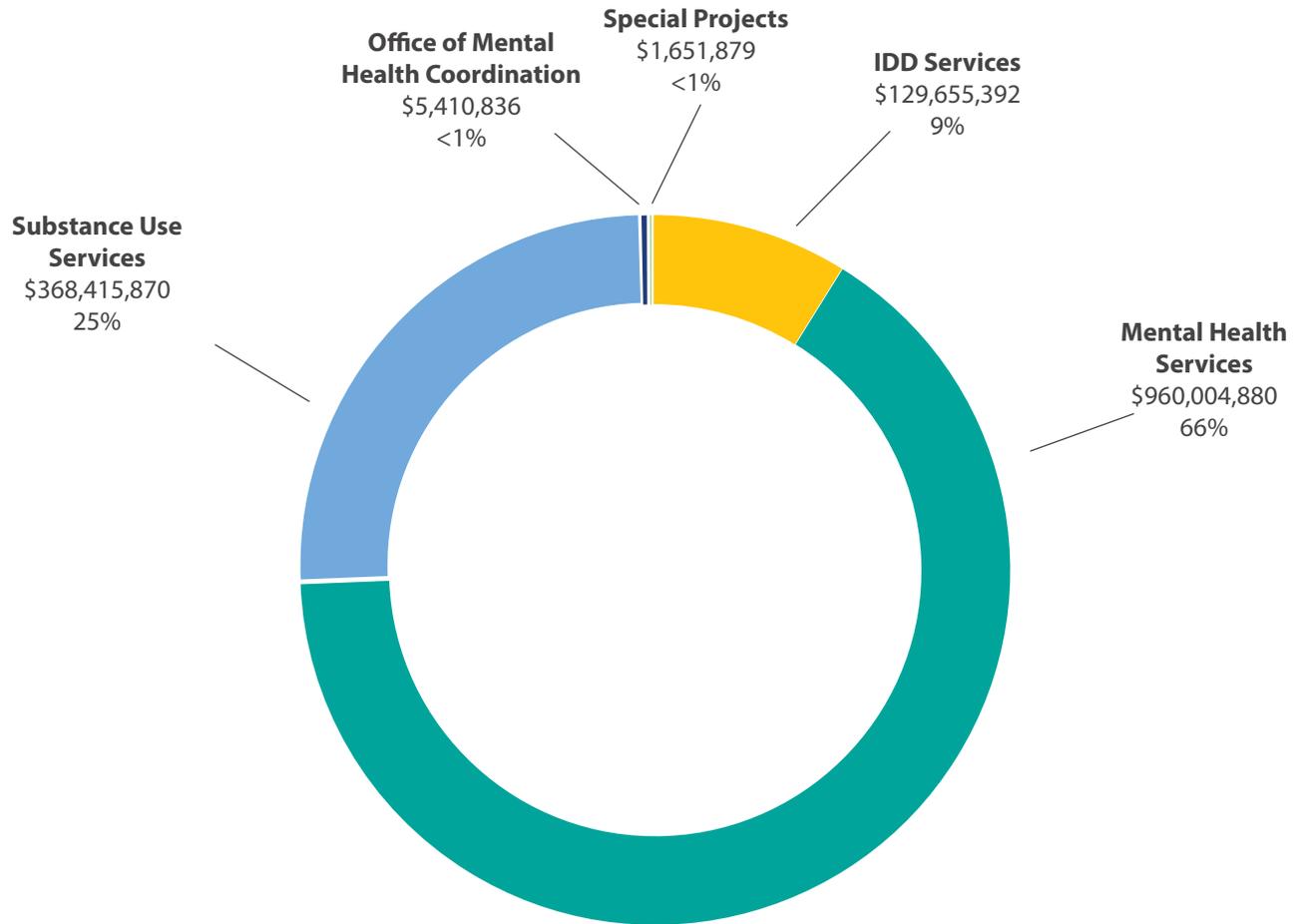


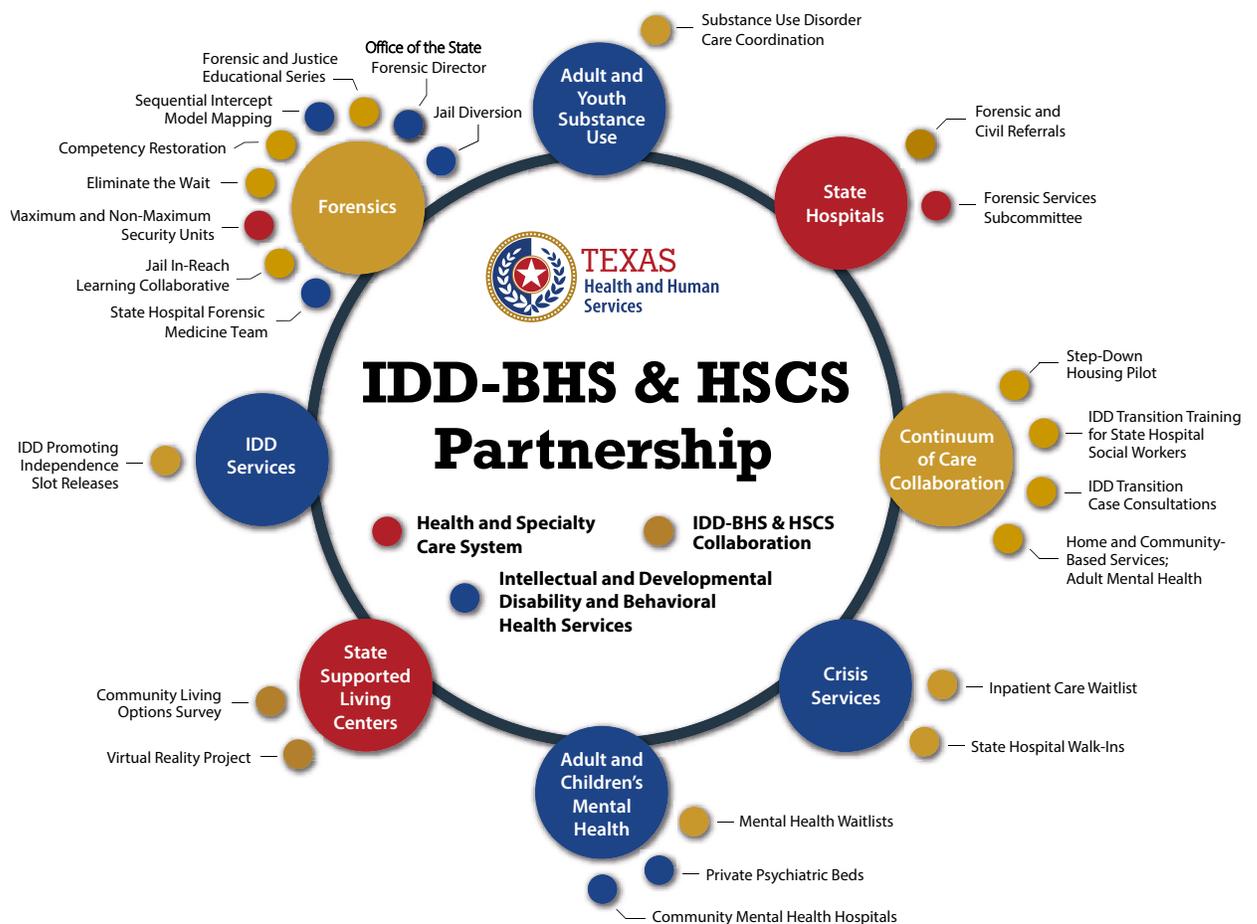
Table 2. Fiscal Year 2022 IDD-BHS Total Contracts by Program Area

Program Area	Number of Contracts	Value
Behavioral Health Services		
Mental Health Services	667	\$960,004,880
Substance Use Services	509	\$368,415,870
IDD Services	127	\$129,655,392
Office of Mental Health Coordination	17	\$5,410,836
Special Projects	12	\$1,651,879
Total	1,332	\$1,465,138,857

COLLABORATION WITH HSCS

Collaboration is the hallmark of healthy organizations. IDD-BHS and HSCS teams work collaboratively to serve Texans with behavioral health needs more effectively. Many people served by HHSC transition between state inpatient hospitals or correctional settings and community-based services. A coordinated continuum of inpatient and community-based services ensures people receive the care needed, successfully navigating transitions between the community, correctional facilities, and competency restoration services. Through an intra-agency partnership, HHSC enhanced services across the continuum of care for Texans and improved service delivery in new and innovative ways in fiscal year 2022. Coordinated initiatives reflected below include activities related to forensic services, continuum of care services, IDD services, state supported living centers, and state hospitals.

Figure 4. IDD-BHS and HSCS Partnership



JAIL IN-REACH LEARNING COLLABORATIVE

The State Hospital Forensic Medicine team collaborated with the Office of the State Forensic Director, System Integration team, and Legal Services Division in the JIRLC. Each team provided support in key areas. The State Hospital Forensic Medicine team provided competency screenings and reassessments, education on the maximum security unit waiver process, and support for programming. The Office of the State Forensic Director led the development of monthly training sessions and supported teams in behavioral health and justice systems planning. The Legal Services Division offered education and guidance on statutory requirements and court-ordered medications.

Fifteen counties participated in the JIRLC, representing 11,642,049 Texans and 594 people on the waitlist in fiscal year 2022. Technical assistance including a variety of education programs was provided on an ongoing basis to county forensic teams. Some featured topics included:

- Options for people with neurocognitive disorders found unlikely to restore;
- Jail standards and mental health;
- Modifying an order following an inpatient civil commitment;
- Post-discharge medications for special populations; and
- Supporting planning and relationship building across county forensic teams.



11,642,049 TEXANS REPRESENTED



594 PEOPLE ON THE WAITLIST REPRESENTED



15 PARTICIPATING COUNTIES



Scott Schalchlin, Deputy Executive Commissioner for HSCS.

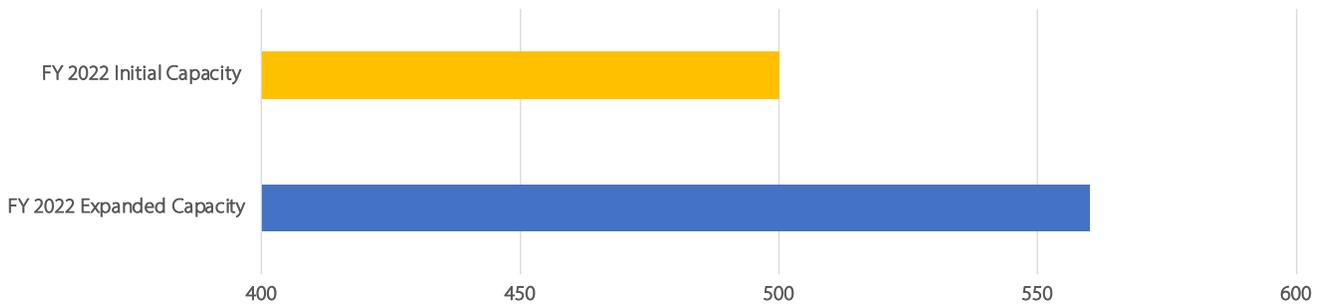
“Collaboration is key to ensuring that everyone we serve is treated with person-centered care. To do that, we have to ensure a full continuum of care for people with intellectual or developmental disabilities or those experiencing mental health challenges. It is of utmost importance for HSCS to work in lock-step with IDD-BHS to advance initiatives that will strengthen this continuum for the people we serve.”

Scott Schalchlin oversees the operations of 10 state hospitals and 13 state supported living centers.

EXPANDING CAPACITY FOR INPATIENT BEDS

In 2011, private psychiatric beds were established to expand inpatient bed capacity. Over the years, inpatient beds have served as a valuable resource to manage people needing an inpatient level of care. Historically, inpatient capacity has expanded with appropriations from the Texas Legislature. The 87th Legislature, Regular Session, 2021, provided \$30 million in additional mental health community hospital bed funding for rural and urban areas. This additional funding expanded the inpatient bed capacity by about 60 beds per day. Inpatient bed funding continues to provide resources for serving people within the community.

Figure 5. Comparison Between Fiscal Year 2022 Inpatient Psychiatric Bed Initial and Expanded Capacity



CHILDREN'S CRISIS CONTINUUM OF CARE REVIEW

The state-funded psychiatric care system in Texas for children ages three to 17 includes state hospitals working alongside LMHAs and LBHAs in order to provide access to evidence-based practices and quality treatment. Beginning in the spring of 2021, HHSC sought feedback on children's mental health needs and services along the continuum of care in Texas.

HSCS and IDD-BHS formed a joint workgroup to develop an overview of the state-funded children's crisis continuum of care. The workgroup was designed to inform decisions regarding access to care for children and their families.

In fiscal year 2022, the workgroup disseminated a survey to a wide range of stakeholders, including community mental health providers, mental health advocates, school providers, and law enforcement officials. Responses were received from 661 stakeholders, including 41 children and family members. In response to the question asking if the state needs increased capacity for children at state psychiatric facilities, 71 percent of respondents

Workgroup Objectives

The partnership between HSCS and IDD-BHS set out to identify:

- 1) If there is a statewide need for increased access to children's psychiatric state hospital beds;
- 2) Any specific populations that may have greater difficulties accessing children's inpatient psychiatric services; and
- 3) Which outpatient programs and resources, if available, may reduce the need for state hospital child inpatient admissions.

CHILDREN'S CRISIS CONTINUUM OF CARE REVIEW CONTINUED

replied “yes,” with only 3 percent replying “no” and 26 percent replying “unsure.” Survey responses also revealed a desire for crisis respite and crisis stabilization, better wraparound services, and more intensive outpatient and partial hospitalization programs. Although stakeholders felt more state hospital inpatient services are needed, survey responses emphasized prioritizing community services that could lead to decreased inpatient admissions and provide diversionary options for children. The workgroup continues to collaborate on ways to incorporate the stakeholder feedback into future efforts. As the survey provided an overview of the gaps and needs of children in Texas, the workgroup was invited to present the survey results at the Texas Child Mental Health Care Consortium, Texas Coalition of Healthy Minds, and Texas Council Executive Director Consortium.

HOSPITAL TRANSITION PILOT PROGRAM HELPS PEOPLE WITH COMPLEX NEEDS

The Hospital Transition Pilot Program began in fiscal year 2021 and is designed to step-down or transition persons with complex psychiatric or medical needs from inpatient state hospital settings to more appropriate community-based



settings. In the program, people receive intensive services (i.e., medical support, case management, and skills training) to help build the skills to manage symptoms, obtain employment, maintain relationships, and obtain housing within the community. Additionally, the program opens beds at state hospitals for those experiencing a mental health crisis and needing stabilization.

In fiscal year 2022, the program transitioned 22 persons from inpatient hospital settings to live independently in the community. To assess the significance and impact of transitioning persons to a less costly setting, a comparison of the daily bed rate per person in a state hospital in fiscal year 2022 to the program rate was completed. Based on this comparison, the program saves the state an estimated \$317.80 per day, as discussed in the Pilot Successes sidebar.

Pilot Successes

A person was transferred to the Hospital Transition Pilot Program after 730 days of inpatient care.

A person receiving inpatient care for 2,925 days (almost eight years) was able to transition successfully into the community.

As the average state hospital daily rate for adult inpatient services is \$810.00, **the program saves the state an estimated \$317.80 per day by transitioning persons from inpatient to community-based settings.**

DISASTER RESPONSE

Disaster behavioral health addresses the psychological, emotional, cognitive, developmental, and social impacts that disasters, emergencies, or incidents have on survivors and first responders as they respond and recover. During fiscal year 2022, the Disaster Behavioral Health Services team responded to a number of tragic incidents, providing support to communities across Texas.

MULTISYSTEMIC THERAPY FUNDING FOR UVALDE COMMUNITY

On June 28, 2022, Governor Abbott executed a Budget Execution Order, authorizing the transfer of funding to HHSC to address the recent tragedy in Uvalde, Texas. One of the three initiatives specific to addressing behavioral health needs is multisystemic therapy (MST), an evidence-based treatment that serves children with justice-system involvement and their families. MST is a short-term (three to five months), intensive (services available 24 hours a day), and community-based clinical intervention aimed at promoting prosocial behavior and interrupting the child's involvement with the juvenile justice system.

MST provides a non-traditional therapeutic intervention in the child's community and home instead of in an office setting. MST effectively treats children who have committed violent offenses, have serious mental health or substance use concerns, are at risk of out-of-home placement, or have experienced abuse and neglect. MST is a proven family and community-based treatment for at-risk children with intensive needs and their families. HHSC received \$4.7 million in funds to expand MST services across Texas. Uvalde did not have MST services available in the community at the time of the tragedy. When implemented, MST services will help the community support children with the highest intensity of need by providing quicker access to a proven effective intervention.





FIRST RESPONDER ASSISTANCE CENTER IN UVALDE

During the response to the Robb Elementary School shooting, countless local, state, and federal agencies deployed to Uvalde. This incident and its response were distinguished from prior mass violence incidents in that there was a greater number of participating first responders and first responder agencies. Early in the response, Disaster Behavioral Health Services and partners from the Texas Parks and Wildlife Department, Texas Line of Duty Death Taskforce, and Law Enforcement Management Institute of Texas at Sam Houston State University identified the need for a robust system to provide services to first responders. This group collaborated to establish a First Responder Assistance Center. The center operated from May 27, 2022, just three days after the incident occurred, until June 19, 2022, when Incident Command demobilized from the elementary school location. During this time period, over 1,175 first responders received a variety of outreach, counseling, and peer support services from the center.



NEEDS CAPACITY ASSESSMENT ASSISTS FAMILIES

In June 2022, Governor Abbott authorized the transfer of funding between agencies for mental health and school safety initiatives in response to the tragedy in Uvalde. HHSC was allotted \$4.7 million in general revenue for the MST behavioral health initiative.

On July 22, 2022, Behavioral Health Services released a needs capacity assessment via broadcast message, making available \$4.7 million. After the release, Children’s Mental Health received 12 applications and was able to grant awards to the following seven LMHAs and LBHAs:

- Bluebonnet Trails Community Services;
- Denton County MHMR Center;
- Hill Country Mental Health and Developmental Disabilities Centers;
- LifePath Systems;
- North Texas Behavioral Health Authority;
- StarCare Specialty Health System; and
- Tropical Texas Behavioral Health.

An entire MST team at these LMHAs and LBHAs will include three to four therapists and an MST supervisor. The average caseload for each therapist is four to six children, with treatment lasting three to five months, and the target is to serve at least 105 children annually. During fiscal year 2023, MST teams will assist more families with specialized needs by providing community-based treatment.



UVALDE TOGETHER RESILIENCY: COMMUNITY COORDINATION

In the wake of the Robb Elementary School shooting in Uvalde, Disaster Behavioral Health Services partnered with experienced LMHAs to coordinate response and recovery efforts. Disaster Behavioral Health Services deployed staff within 24 hours of the shooting to begin response efforts in partnership with HHSC-contracted local authorities. These response efforts helped build and strengthen a system of alliances and networks among LMHAs, Hill Country Mental Health and Developmental Disabilities Centers, Uvalde Consolidated Independent School District officials, Texas Child Mental Health Care Consortium



entities, state and local leadership, emergency response units, and law enforcement entities. Through these efforts, the responding LMHA was able to set up the Uvalde Emotional Support Line, which is now hosted by The Harris Center. In fiscal year 2022, the support line received 651 calls, coordinated and connected with 11 confirmed community mental health providers to continue long-term recovery efforts; and served over 3,200 community members.

Based on Disaster Behavioral Health Services' quick response efforts, coordination of mental health services, and partnerships, the state's Disaster District Command created a Behavioral Health branch within the Operations section of Incident Command for the Uvalde incident, naming the director of Disaster Behavioral Health Services a branch chief. This unprecedented action not only formalized Disaster Behavioral Health Services' role within the Incident Command structure but also lent credibility to efforts within the community, especially with the first responder population.



11

COMMUNITY MENTAL
HEALTH PROVIDERS
COORDINATING
SERVICES



651

CALLS TO THE
EMOTIONAL SUPPORT
LINE



3,200+

COMMUNITY MEMBERS
SERVED THROUGH HHSC
AND LMHA PARTNERSHIPS

MAKING A POSITIVE DIFFERENCE

Improving the quality of life for Texans is central to the HHSC vision and shapes each policy decision made by IDD-BHS. Based on the efforts of our department, HHSC came closer to realizing that vision in fiscal year 2022, as demonstrated by the highlights below.



CERTIFIED COMMUNITY BEHAVIORAL HEALTH CLINIC NATIONAL RECOGNITION

The Certified Community Behavioral Health Clinic model is a federal model that integrates primary care screenings, substance use disorder care, and mental health care clinically, financially, and administratively, with the goal of improving overall outcomes. Texas adopted the model in 2015, certifying local authorities who meet stringent integration requirements.

In fiscal year 2021, Texas achieved statewide implementation, with all 254 counties served by a Texas Certified Community Behavioral Health Clinic (T-CCBHC). The state has received national recognition for certifying 43 providers, including all 39 LMHAs and LBHAs, the second most of any state in the nation. The other four providers include the following non-profit organizations: Metrocare in Dallas, Montrose Center in Houston, PILLAR in Laredo, and SCAN in Laredo.

In fiscal year 2022, 33 T-CCBHCs had active grants awarded under SAMHSA that totaled approximately \$98 million in federal funds, leading to 290,017 Texans served. With these federal funds, T-CCBHCs primarily focus on improving care coordination and increasing access to mental health and substance use services. To maximize use of coronavirus disease 2019 (COVID-19) federal relief supplemental funds through the Consolidated Appropriations Act, 2021 (H.R. 133), and the American Rescue Plan Act, 14 Texas providers achieved licensure as a chemical dependency treatment facility in order to obtain T-CCBHC certification, which has expanded access to outpatient substance use treatment throughout the state.



\$98M

IN FEDERAL FUNDS



290,017

TEXANS SERVED

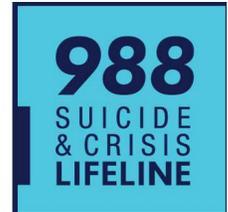


100%

OF TEXAS COUNTIES
SERVED BY A T-CCBHC

TEXAS 988 CENTERS ANSWERING THE CALL

On July 16, 2022, people experiencing a behavioral health crisis in the United States were given access to a new resource, the 988 Suicide and Crisis Lifeline. This new national lifeline offers 24 hours a day, seven days a week access to support for anyone experiencing mental health-related distress, including thoughts of suicide, a mental health or substance use crisis, or any other kind of emotional distress. HHSC was given the important task of spearheading the implementation of 988 across Texas. There are currently five 988-affiliated call centers in the state, and HHSC contracts with the following four centers: My Health My Resources of Tarrant County, Emergence Health Network, The Harris Center, and Integral Care. The dedicated work of the 988 team led to the following accomplishments:



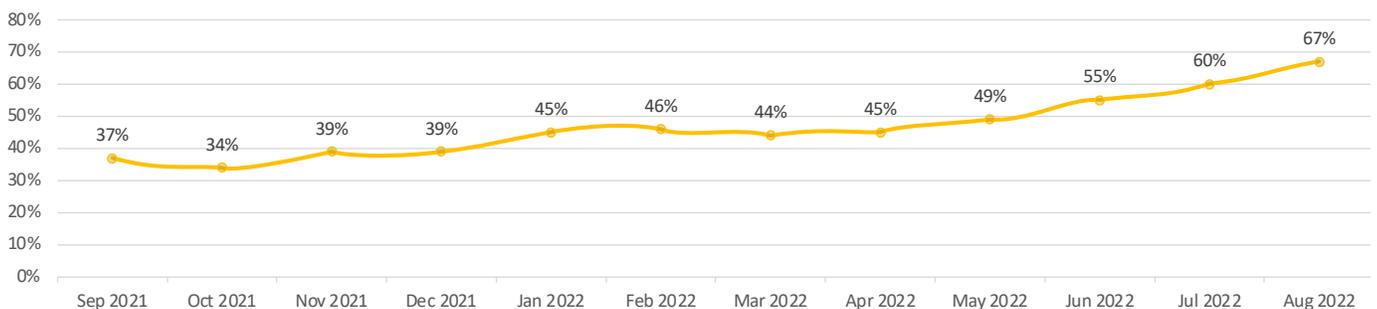
- **Handled Increase in Calls.** The 988 centers answered 73,699 calls in fiscal year 2022, a 22 percent increase compared to the number of calls answered in fiscal year 2021 (60,502 calls).
- **Increased In-State Answer Rate.** In fiscal year 2022, Texas increased its 988 in-state answer rate, the percentage of calls originating from Texas-based area codes answered by a Texas-based 988 center before rolling over out of state to 988 centers serving as national rollover sites. The Texas 988 in-state answer rate increased from 37 percent in September 2021 to 67 percent in August 2022.
- **Expanded Coverage.** The HHSC-contracted 988 centers have worked to expand primary coverage across Texas to regions where previously no calls were answered in state. The number of counties that Texas had primary coverage for 988 calls increased from 201 counties in August 2021 to all 254 counties in April 2022. Additionally, one 988 center, Integral Care, joined the 988 chat and text subnetwork and began responding to contacts in May 2022.

During a follow-up call at Integral Care, a 17-year-old caller stated that Crisis Line Counselor Leslie gave her a “new perspective” on life and encouraged her to stay safe. Because of Leslie, she threw away her means of self-harm and suicide.

A caller from The Harris Center said, “I just wanted to thank whomever it was that reached out to my son after I called the hotline. I so much appreciate your efforts!”

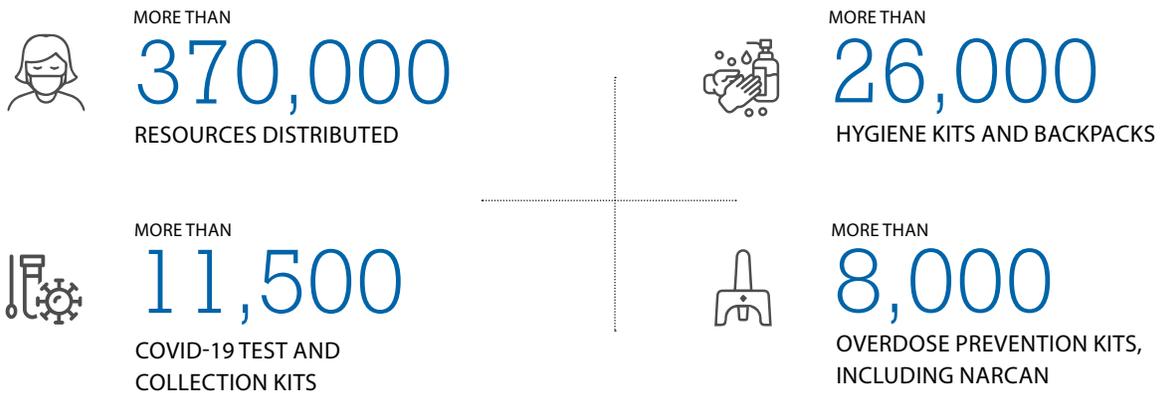
Another caller stated that the “hotline saved my life” and reported that they were connected with services and enrolled back in school.

Figure 6. Fiscal Year 2022 Texas 988 In-State Answer Rate



OUTREACH, SCREENING, ASSESSMENT, AND REFERRAL RECOVERY RESOURCES PROJECT

To support the Outreach, Screening, Assessment, and Referral (OSAR) Recovery Resources project, H.R. 133 funds were distributed to each of the 14 OSAR programs to help persons meet one-time needs directly related to the COVID-19 pandemic. The project’s aim was to improve outcomes and promote best practices by addressing barriers attributed to the COVID-19 pandemic. The 14 OSAR programs coordinated with community partners and stakeholders to distribute over 370,000 resources throughout the state from September 2021 to August 2022. Resources distributed included over 26,000 hygiene kits and backpacks, 11,500 COVID-19 test and collection kits, and 8,000 overdose prevention kits, including Narcan. More than \$1 million in fund transfers and reimbursements were made to community partners and local organizations providing substance use disorder services.



PROMOTING OPIOID MISUSE AWARENESS THROUGH THE TEXAS TARGETED OPIOID RESPONSE

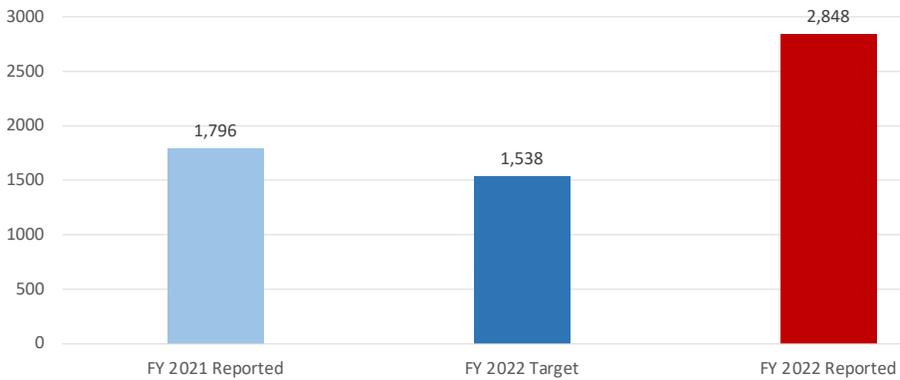


The Texas Targeted Opioid Response (TTOR) continued to distribute the Opioid Misuse Public Awareness Campaign and generated more than 23 million views of their advertising in fiscal year 2022. The statewide educational campaign aims to increase awareness of opioid misuse-related dangers and risk mitigation strategies, as well as help people find treatment for opioid use disorder. The Center for Health Communication

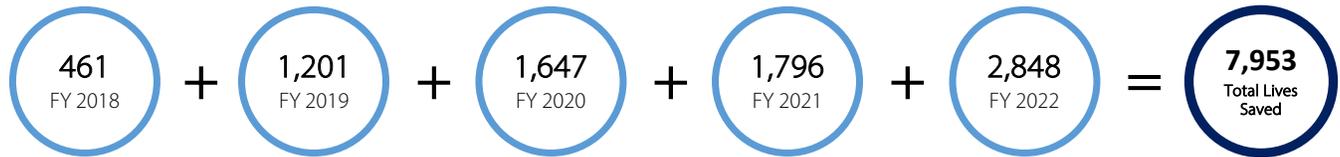
at The University of Texas at Austin contracts with TTOR and conducted a survey to evaluate the effectiveness of the campaign. The survey found that approximately 25 percent of respondents recalled the campaign using an aided recall methodology. Those who recalled seeing the campaign reported taking various actions as a result, such as talking to a friend about that friend’s opioid misuse (28 percent), making sure no one had access to their prescription (26 percent), and taking medication only as prescribed (25 percent).

PROMOTING OPIOID MISUSE AWARENESS THROUGH THE TEXAS TARGETED OPIOID RESPONSE CONTINUED

Figure 7. Successful Opioid Overdose Reversals in Fiscal Year 2022

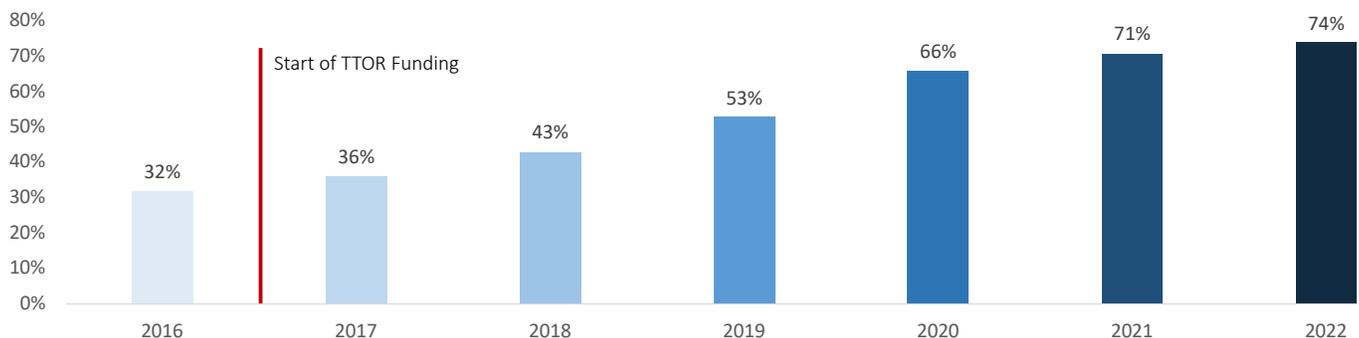


The number of successful overdose reversals in fiscal year 2022 exceeded fiscal year 2021 by 59 percent and exceeded the fiscal year 2022 target by 85 percent.



In fiscal year 2022, 74 percent of people in treatment for an opioid use disorder received medication-assisted treatment, exceeding fiscal year 2021 (71 percent) and exceeding the fiscal year 2022 target (73 percent).

Figure 8. Percentage of Opioid Use Disorder Admissions That Received Medication-Assisted Treatment from Fiscal Years 2016 to 2022



PERSON-CENTERED PLAN AND THINKING TRAININGS

Identifying personal outcomes for people living with an IDD has always been a challenge for service coordinators. For years, LIDDAs have sought guidance to help service coordinators with standards or best practices on person-centered plans.

The long-anticipated Documentation of Outcomes in a Person-Centered Plan training was finally released by the IDD Training unit in May 2021. The training is an interactive computer-based course available on the Texas Health and Human Services (HHS) Learning Portal. The training provides a consensus on how to document personal outcomes and how to best use person-centered thinking skills to identify what is important to and for the people we serve. In fiscal year 2022, nearly 2,000 LIDDA staff across Texas successfully completed the online course and the feedback from participants was extremely positive, as demonstrated below:

- “This was the best and most thorough training I have ever received that describes how outcomes (goals) are related to discovery of wants and needs, and how obstacles and barriers should be addressed and written into plans.”
- “It is online and available to everyone. It is user friendly and helped to broaden my perspective around person-centered thinking. Thank you...”

In fiscal year 2022, the IDD Training unit began offering Person-Centered Thinking training to LIDDAs and trained over 250 LIDDA staff by using the curriculum developed by The Learning Community for Person Centered Practices. Moreover, the manager of the IDD Training unit became certified as a mentor trainer for Person-Centered Thinking training.



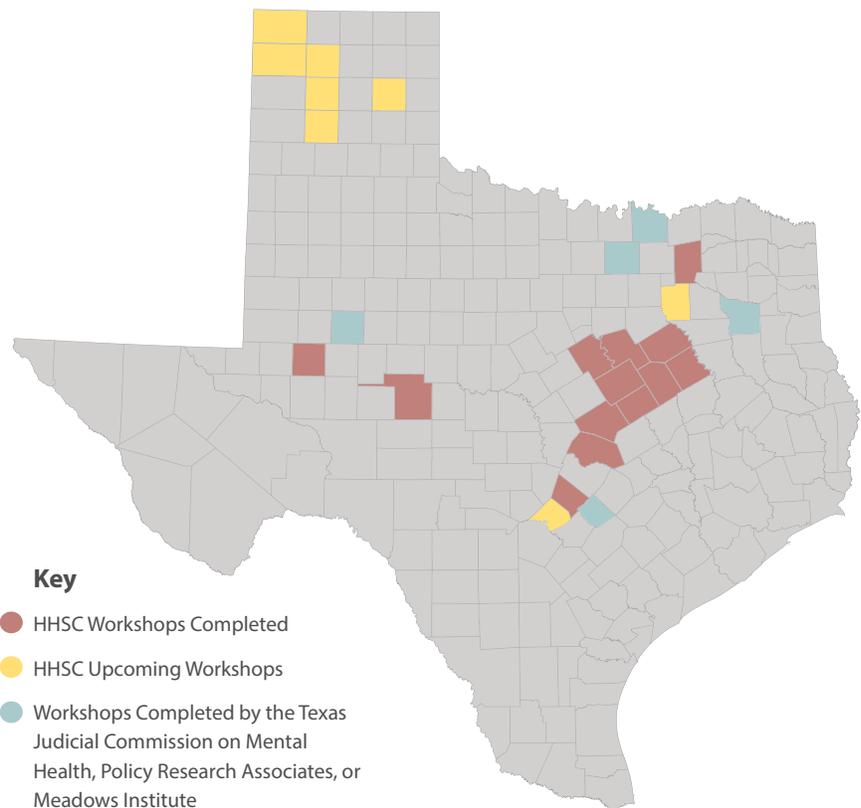
OFFICE OF THE STATE FORENSIC DIRECTOR

In fiscal year 2022, the Office of the State Forensic Director led statewide planning and technical assistance efforts and supported data-driven decision-making through comprehensive data analyses. These activities built state and local collaborations across Texas and provided internal and external stakeholders with data, resources, and tools to reduce and prevent justice involvement for people with an IDD, mental illness, or substance use disorder. In total, the Office of the State Forensic Director provided training, technical assistance, and resources to over 1,000 Texans.

Sequential Intercept Model Mapping Workshops

Beginning in February 2022, the Office of the State Forensic Director launched Texas’ Sequential Intercept Model (SIM) Mapping initiative, which started with eight LMHA and LBHA volunteers from the All Texas Access initiative. The aim of the SIM Mapping initiative is to help communities map out how adults with an IDD, mental illness, or substance use disorder encounter and move through the criminal justice system. Staff from the Office of the State Forensic Director and System Integration team traveled across the state to conduct SIM Mapping workshops, which promote behavioral health and justice stakeholder collaboration by identifying resources and gaps in services at each intercept, developing local strategic action plans, and leveraging existing resources and efforts. The SIM Mapping exercise helped identify resources, gaps, and duplication, as well as prepared participants to implement change.

Figure 9. Geographical Representation of Fiscal Year 2022 SIM Mapping Workshops



OFFICE OF THE STATE FORENSIC DIRECTOR CONTINUED



Participants at the Comal County SIM Mapping Workshop.

SIM MAPPING WORKSHOP OUTCOMES



SIM MAPPING WORKSHOPS



PARTICIPANTS TRAINED



\$1.2M

REINVESTED IN MENTAL HEALTH SERVICES PER CENTER PER YEAR



COUNTY-FUNDED NEW DIVERSION CENTERS IN DEVELOPMENT



PARTICIPATING AGENCIES

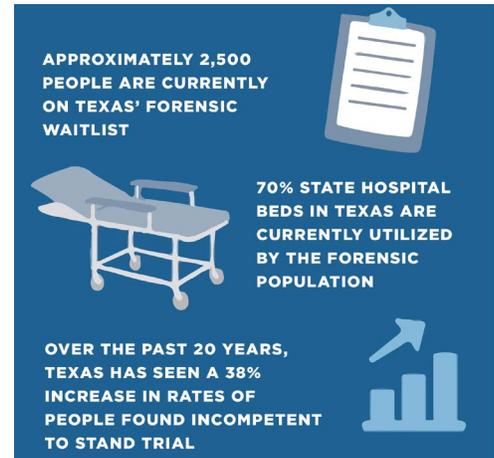
“By offering an open door through the SIM mapping, we have experienced invaluable conversations, healing of wounds between agencies, insights into common pressure points deserving a collaborative response, and strategic planning opportunities alongside the powerhouses of our communities.”

- Andrea Richardson, Executive Director
Bluebonnet Trails Community Services

OFFICE OF THE STATE FORENSIC DIRECTOR CONTINUED

Eliminate the Wait Campaign

In October 2021, HHSC joined forces with the Texas Judicial Commission on Mental Health, Texas Police Chiefs Association, Sheriff’s Association of Texas, Texas Council of Community Centers, and Texas Criminal Defense Lawyers Association to launch a statewide campaign to reduce the number of people waiting in jails for inpatient competency restoration services. The Eliminate the Wait Campaign provides strategies and tools for partners at all points in the criminal justice system to help reduce the number of people waiting in jail for inpatient competency restoration services. Campaign resources include educational materials and tools, such as checklists for police officers, sheriffs, jail administrators, judges, court staff, prosecutors, defense attorneys, and behavioral health providers. The campaign had the following outcomes in fiscal year 2022:



- More than 1,300 attendees, including judges, prosecutors, and defense attorneys, trained on Eliminate the Wait at the Texas Judicial Commission on Mental Health Annual Summit;
- More than 500 behavioral health and justice system stakeholders trained on the Eliminate the Wait Toolkit at HHSC conferences and events;
- More than 350 members of law enforcement, jail administrators, and pretrial services professionals trained on the Eliminate the Wait Toolkit at Texas jail leadership and law enforcement conferences and events;
- More than 150 pretrial services professionals trained on Eliminate the Wait at the Texas Association for Pretrial Services Annual Conference; and
- Four Eliminate the Wait presentations conducted at national conferences.

ELIMINATE THE WAIT CAMPAIGN OUTCOMES



1,300+

JUDICIAL STAKEHOLDERS TRAINED AT THE TEXAS JUDICIAL COMMISSION ON MENTAL HEALTH ANNUAL SUMMIT



500+

BEHAVIORAL HEALTH AND JUSTICE SYSTEM STAKEHOLDERS TRAINED AT HHSC CONFERENCES AND EVENTS



350+

MEMBERS OF LAW ENFORCEMENT, JAIL ADMINISTRATORS, AND PRETRIAL SERVICES PROFESSIONALS TRAINED ON ELIMINATE THE WAIT TOOLKIT



150+

PRETRIAL SERVICES PROFESSIONALS TRAINED AT THE TEXAS ASSOCIATION FOR PRETRIAL SERVICES ANNUAL CONFERENCE



4

PRESENTATIONS AT NATIONAL CONFERENCES

ALL TEXAS ACCESS

All Texas Access is a legislatively directed initiative (Senate Bill 454, 87th Legislature, Regular Session, 2021) focused on increasing access to mental health services in rural Texas communities. All Texas Access seeks to address:

- Cost to local governments for providing mental health crisis responses;
- Transportation of people served by an LMHA or LBHA to mental health facilities;
- Incarceration of people with a mental health condition in county jails; and
- Hospital emergency room visits by people with a mental health condition.

For fiscal year 2022, All Texas Access, in partnership with the Office of the State Forensic Director, focused on jail diversion and community integration. Each of the 30 LMHAs and LBHAs participating in All Texas Access worked with community partners to develop a strategy that would be most effective in their service area. Of the 30 strategies developed, 23 received necessary funding for implementation. These projects provide more opportunities for law enforcement and other first responders to direct people in crisis into mental health care and away from incarceration or the emergency room. For example, the eight LMHAs funded through HHSC Rural Crisis Response and Diversion diverted 3,593 persons during the fiscal year, resulting in an estimated county jail savings of \$760,960.

ALL TEXAS ACCESS JAIL DIVERSION PROJECTS



Co-Responders



Drop-off and Crisis Receiving Centers



911 Integration



Law Liaison



Law Enforcement Training



Remote Crisis Evaluations



Mental Health Deputies

RURAL CRISIS RESPONSE AND DIVERSION OUTCOMES



\$9.4M

IN ESTIMATED COST OFFSETS FOR LOCAL GOVERNMENTS



\$760,960

IN ESTIMATED INCARCERATION SAVINGS



3,593

PERSONS EXPERIENCING A MENTAL HEALTH CRISIS DIVERTED FROM JAIL TO TREATMENT

SHORT-TERM HOUSING ASSISTANCE FOR TEXANS

The purpose of the federal Temporary Assistance for Needy Families Pandemic Emergency Assistance Funds was to address housing and ancillary needs aimed at short-term stabilization for needy families who have been impacted by the COVID-19 pandemic and have a dependent child or a family member residing in the household that has been diagnosed with an IDD, mental health condition, or substance use disorder. This federal funding allowed families short-term relief from financial



stressors that occurred during the pandemic. Families who were at risk of eviction were able to maintain housing. Others who had fallen behind on their utilities were able to catch up on their payments and have access to their air conditioning to stay safe from the harsh summer heat. Family members who lost their job or had hours reduced were able to rely on funds to feed their family, stock up on personal care items, and prepare their children for the current school year.

Texans had access to temporary funding to address rent and utility needs, security deposits, housing modifications, hotel vouchers, and other time-limited expenses to help needy families maintain current housing or move quickly into housing. **In fiscal year 2022, LMHAs distributed 99 percent of \$17 million to support Texas families in less than 12 months. This was one of the very first initiatives where IDD Services and Behavioral Health Services worked together to issue one contract to LMHAs to serve persons across the agency. This initiative helped support the integration of these units and continued the goal of breaking down silos.**

— PANDEMIC EMERGENCY ASSISTANCE FUNDS OUTCOMES —



\$17M

EXPENDED TO SUPPORT TEXAS FAMILIES IN LESS THAN 12 MONTHS



99%

OF TOTAL GRANT DISTRIBUTED TO TEXANS



12 MOS.

INNOVATIVE COMBINED CONTRACT APPROACH ALLOWED FUNDS TO BE DISTRIBUTED IN LESS THAN A YEAR

BEHAVIORAL HEALTH MATCHING GRANTS COMMUNITY COLLABORATIVES

The Innovation and Engagement Grants and Infrastructure Coordination unit serves as a centralized project management support team for IDD-BHS. Central to the work of the unit, the Behavioral Health Matching Grant Program is composed of the following four distinct grant initiatives: Community Mental Health Grant (CMHG) program, Healthy Community Collaborative (HCC) grant program, Mental Health Grant for Justice-Involved Individuals (MHGJII) program, and Texas Veterans + Family Alliance (TV+FA) grant program.

A core component of the Behavioral Health Matching Grant Program is the formation of collaboratives aimed at supporting the sustainability of the program and improving access to care. Based on specific community needs, along with the unique services the grantees are providing through their projects, the types and roles of collaborative partners may differ. Partner organizations across the grant programs include LMHAs and LBHAs, local and federal government agencies, faith-based organizations, law enforcement, local businesses, non-profit organizations, veterans service organizations, hospital districts, school districts, and universities. In fiscal year 2022, all community collaboratives had the following highlighted benefits:

- Quickened access to behavioral health services with warm hand-offs;
- Streamlined access to all needed services; and
- Expanded community outreach and advocacy.

BEHAVIORAL HEALTH MATCHING GRANT OUTCOMES

 **85%** OF STUDENTS RECEIVING SCHOOL-BASED SERVICES SHOWED BEHAVIOR IMPROVEMENT IN AN ACADEMIC SETTING - CMHG

 **72%** OF PARTICIPANTS WHO HAD THE GOAL OF MAINTAINING EMPLOYMENT DID SO THROUGHOUT THE FISCAL YEAR - HCC

 **87%** OF PEOPLE REPORTED IMPROVEMENT IN THEIR RELATIONSHIPS OR CONNECTIONS TO THEIR COMMUNITY - CMHG

 **87%** OF PEOPLE WITH DEPRESSION ACHIEVED SYMPTOM IMPROVEMENT, AS INDICATED BY CLINICAL ASSESSMENT TOOLS - MHGJII

 **84%** OF PARTICIPANTS WHO HAD THE GOAL OF OBTAINING EMPLOYMENT DID SO THROUGHOUT THE FISCAL YEAR - TV+FA

 **84%** OF THE 11,837 PEOPLE ENCOUNTERED BY MENTAL HEALTH DEPUTY AND RAPID RESPONSE TEAMS WERE DIVERTED FROM ARREST OR JAIL - MHGJII

BEHAVIORAL HEALTH MATCHING GRANTS COMMUNITY COLLABORATIVES CONTINUED

Figure 10. Behavioral Health Matching Grants Clients Served in Fiscal Year 2022

MENTAL HEALTH GRANT FOR JUSTICE-INVOLVED INDIVIDUALS (MHGJII)

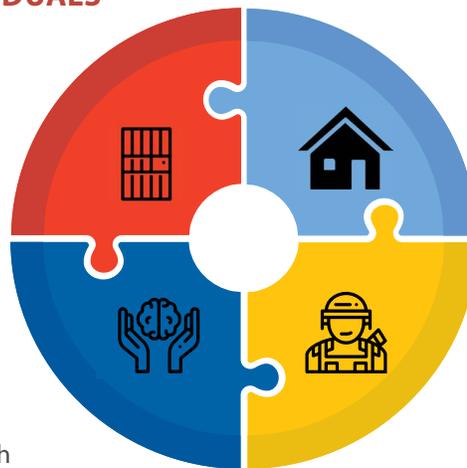
Address unmet physical and behavioral health needs for those in crisis to prevent initial or subsequent justice involvement and promote recovery.

Number served: 31,254

COMMUNITY MENTAL HEALTH GRANT (CMHG)

Support community collaboration, reduce duplication of mental health services, and strengthen continuity of care for people receiving services.

Number served: 43,096



TOTAL SERVED BY ALL BEHAVIORAL HEALTH MATCHING GRANTS: 91,298

HEALTHY COMMUNITY COLLABORATIVE (HCC)

Build communities that support the ongoing recovery and housing stability of persons who are homeless and have unmet behavioral health needs.

Number served: 7,245

TEXAS VETERANS + FAMILY ALLIANCE (TV+FA)

Support community-based, sustainable, research-informed, and accessible behavioral health services for Texas veterans and their families to augment the work of the Veterans Administration.

Number served: 9,703

FIFTH ANNUAL PRE-ADMISSION SCREENING AND RESIDENT REVIEW SERVICES CONFERENCE

Pre-Admission Screening and Resident Review (PASRR) is a federally mandated program applicable to all people seeking admission to a Medicaid-certified nursing facility regardless of funding source. PASRR is an important tool that advances person-centered planning. PASRR assures that psychological, psychiatric, and functional needs and personal goals and preferences for long-term care are considered for people with an IDD or mental health condition.

In fiscal year 2022, HHSC hosted the Fifth Annual PASRR Services Conference, which serves as a training forum for service providers, including nursing facilities, LIDDAs, LMHAs and LBHAs, and referring entities (such as hospitals, physicians, and assisted living facilities). The conference featured a keynote speech by an expert in supporting people with IDD and mental health needs, breakout sessions on nursing facility and local authority roles in the PASRR process, and a panel discussion on the impact of COVID-19. Approximately 750 people attended the conference.

STATE EMPLOYMENT LEADERSHIP NETWORK SUPPORTS VISION FOR EMPLOYMENT

The State Employment Leadership Network (SELN) is a membership-based network of state IDD agencies, working together to achieve system improvements, particularly in paid employment for people with an IDD. The Special Projects unit serves as the representatives for the State of Texas in the SELN. The unit’s membership allows the state to be represented in this capacity, share information with other states, and solicit feedback and assistance from other states. SELN membership enables consultation services and technical assistance for

HHSC employment initiatives and projects.



eLearning Initiative. In 2022, the SELN developed an eLearning initiative titled, “Supporting a Vision for Employment.” The goal of the training is to promote competitive integrated employment. As a member of the SELN, Texas was given 50 eLearning slots. The state distributed these slots among HHS, LIDDAs, and state supported living centers and received overwhelmingly positive feedback after doing so.

Annual Conference Award. Several members of the Special Projects unit traveled to Washington, D.C., and Virginia to attend the SELN Annual Conference. At the conference, Texas received the Excellence in Planning and Implementation Award for “engaging a wide range of partners and staff in a purposeful rollout of the SELN eLearning curriculum.”

PRIVATE PSYCHIATRIC BED AND COMMUNITY MENTAL HEALTH HOSPITAL BED CAPACITY

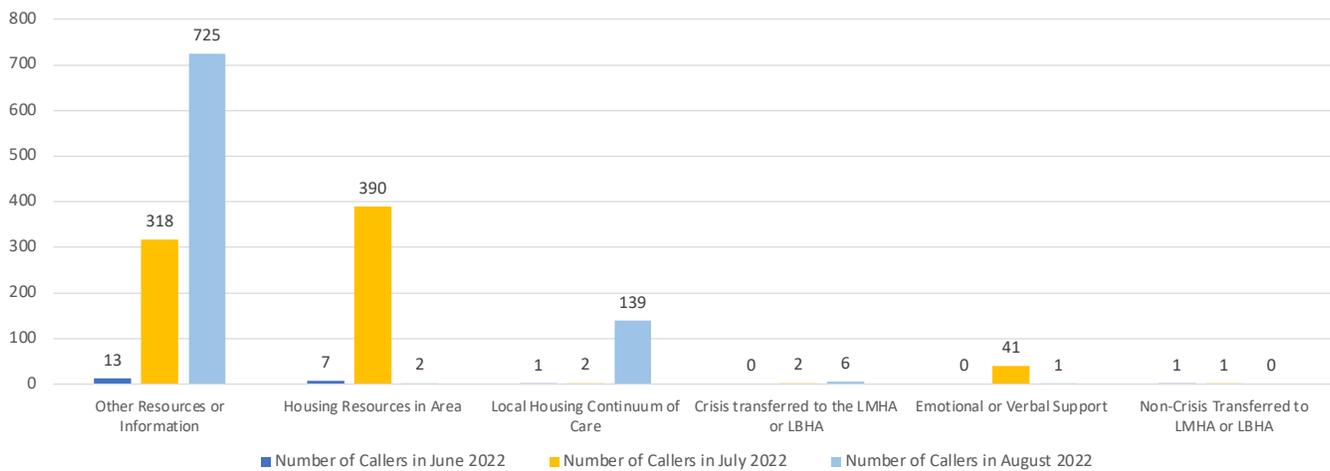
HHSC provides funding to LMHAs and LBHAs to purchase private psychiatric bed and community mental health hospital bed days for people needing an inpatient level of care. Monthly data submissions by LMHAs and LBHAs allow HHSC to track and report on bed utilization, including the percentage and number of beds utilized by each local authority over the fiscal year. Collectively, LMHAs and LBHAs have a high bed utilization each fiscal year. For instance, in fiscal year 2022, the private psychiatric bed and community mental health hospital bed utilization for LMHAs and LBHAs was an estimated 131 percent. This high bed utilization indicates that more people are being served in the community.

In fiscal year 2022, the private psychiatric bed and community mental health hospital bed utilization for LMHAs and LBHAs was an estimated 131 percent.

HOUSING RESOURCES FOR TEXANS IMPACTED BY CORONAVIRUS DISEASE 2019

In fiscal year 2022, My Health My Resources of Tarrant County launched a housing support line that offers geographically-specific housing resources for Texans impacted by COVID-19 who are experiencing or at risk of homelessness. The housing support line also directs callers to the right crisis services, such as 2-1-1 for information on services, LMHAs and LBHAs for mental health services, OSAR programs for drug and alcohol services, and other suitable services. The goal of the housing support line is to serve approximately 33,205 callers by September 30, 2025. From June to August 2022, the housing support line assisted 1,649 callers.

Figure 11. Housing Support Line Outcomes from June to August 2022



SUICIDE CARE INITIATIVE TRAINING RAMPES UP

The Suicide Care Initiative is a project aimed at improving suicide care in the Texas public behavioral health care system with a two-part focus: implementing the Zero Suicide framework to fidelity and increasing provider capacity to prevent, treat, and provide postvention suicide care. Through implementation of this model, HHSC established four Regional Suicide Care Support Centers through LMHAs to advance implementation of the Zero Suicide framework.

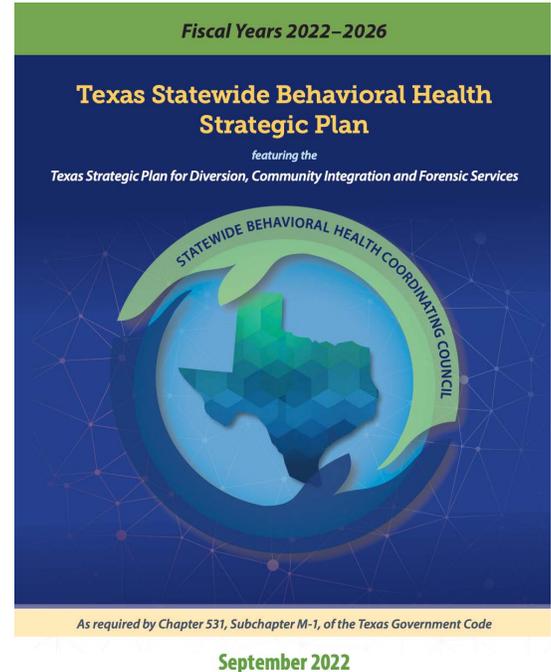
In fiscal year 2022, the Regional Suicide Care Support Centers experienced a 29 percent increase toward Zero Suicide implementation. **Through the Suicide Care Initiative, 562 persons were trained to deliver training in an evidence-based suicide prevention approach, such as Ask About Suicide to Save a Life and Applied Suicide Intervention Skills Training. In addition, 558 LMHA and LBHA employees received training in an evidenced-based approach for treating thoughts of suicide.**



FISCAL YEARS 2022 TO 2026 TEXAS STATEWIDE BEHAVIORAL HEALTH STRATEGIC PLAN FEATURING THE TEXAS STRATEGIC PLAN FOR DIVERSION

In 2015, the Statewide Behavioral Health Coordinating Council (SBHCC) was established to increase collaboration between the judiciary, state agencies, and institutions of higher education receiving funding to provide behavioral health training, technical assistance, and services. The SBHCC’s mission is to develop a statewide strategic approach for advancing the behavioral health system. A pathway for developing this statewide strategic approach is through publishing a statewide strategic plan that guides SBHCC member priorities related to funding, policies, and services.

In fiscal year 2022, the SBHCC finalized the Texas Statewide Behavioral Health Strategic Plan for fiscal years 2022 to 2026, which features the first Texas Strategic Plan for Diversion, Community Integration, and Forensic Services. This publication is significant, as it represents the first time since the SBHCC’s inception that the strategic plan includes goals, objectives, and strategies for mental health and substance use services, as well as the diversion of people from juvenile and criminal justice systems. The aim is to increase awareness of and investment in mental health and substance use services that improve health outcomes for clients served.



MENTAL HEALTH TEXAS WEBSITE REACHES MORE TEXANS WITH CRITICAL RESOURCES

In fiscal year 2022, over 580,000 people accessed behavioral health resources and training through the Mental Health Texas website www.MentalHealthTX.org, which is an increase of 158 percent since fiscal year 2021. Website users can access resources and training modules in 64 languages for various mental health concerns, such as anxiety, depression, bipolar disorder, suicide, trauma, psychosis, substance use, and IDD. These resources aid in educating Texans about behavioral health resources that may improve their lives.

MENTAL HEALTH TEXAS WEBSITE OUTCOMES

↑ 158%

INCREASE IN ALL
USERS FROM FISCAL
YEAR 2021

👥 155%

INCREASE IN NEW
USERS FROM FISCAL
YEAR 2021

🖥️ 135%

INCREASE IN PAGE VIEWS
FROM FISCAL YEAR 2021

Source: Google Analytics

CONTRACT OPERATIONS UNIT ACHIEVES CONTRACT EXECUTION SUCCESS

The Contract Operations unit executed 99.5 percent of all contract actions in fiscal year 2022. This achievement was a result of the hard work of Contract Management staff in collaboration with several internal and external stakeholders. Contract Management staff were also responsible for processing almost 1,000 contract actions for new contracts and contract amendments, as well as submitting almost 20,000 distinct payments for IDD-BHS vendor and grantee services that totaled more than \$1 billion.



YOUTH EMPOWERMENT SERVICES WAIVER GRADUATIONS

The Youth Empowerment Services (YES) Waiver is a 1915(c) Medicaid program that helps children and youth with serious mental, emotional, and behavioral difficulties. The YES Waiver provides intensive services delivered within a strengths-based team planning process called wraparound. Wraparound builds on family and community support and utilizes YES services to help build the family’s natural support network and connection with the community. YES services are family-centered and coordinated, as well as effective at preventing out-of-home placement and promoting lifelong independence and self-defined success.

YES WAIVER YEAR FOUR OUTCOMES

 **2,526**
YOUTH AND FAMILIES SERVED

 **678**
SUCCESSFUL PARTICIPANT GRADUATIONS

 **45%**
REDUCTION IN CRISIS SERVICES AFTER RECEIVING YES SERVICES

 **\$11,840**
IN TOTAL COST SAVINGS TO THE STATE PER YES PARTICIPANT*

*Comparing youth receiving YES services versus similar youth not receiving YES services.

EXCEEDING EXPECTATIONS

Exceeding expectations means that IDD-BHS employees show up each day focused on how they can do the most good for those we serve. In fiscal year 2022, we used innovative approaches to ensure that all Texans have access to meaningful and cost-effective IDD and behavioral health services.



What is Coordinated Specialty Care (CSC) for First Episode Psychosis?

CSC for First Episode Psychosis program is a holistic treatment approach that includes:

- Psychotherapy, especially cognitive behavioral therapy.
- Family support and involvement.
- Support from peers in recovery from mental illness.
- Antipsychotic medications prescribed by a psychiatrist.
- Support for education and employment goals.

In Texas, CSC for First Episode Psychosis programs have a multidisciplinary team that includes a psychiatrist, licensed therapist, certified family partner, certified peer support specialist, and supportive employment and education specialists.

NEW COORDINATED SPECIALTY CARE FOR FIRST EPISODE PSYCHOSIS TEAMS

Texas spends at least \$1.4 billion in emergency room costs and \$700 million in local justice system costs each year that are attributable to inadequately treated mental illnesses and substance use disorders. Delayed and ineffective treatment for people experiencing First Episode Psychosis results in a disproportionate share of costs to local governments.

Coordinated Specialty Care (CSC) is designed to meet the needs of people with an early onset of psychosis. Research shows that, if a person receives the right help within the first year, such as through CSC, there is a good chance they will learn to manage the illness and live a more normal life. CSC services are for people ages 15 to 30 who have a psychotic disorder diagnosed within the past two years. People must also live in the service area of a CSC provider.

CSC is shown to be more effective for the treatment of First Episode Psychosis than usual care, resulting in better functioning, fewer symptoms, fewer relapses, and less hospital care. In fiscal year 2022, the outcome study of Texas CSC programs indicates a 64 percent decrease in the number of HHSC-funded services after receiving CSC services and a 55 percent decrease



NEW COORDINATED SPECIALTY CARE FOR FIRST EPISODE PSYCHOSIS TEAMS CONTINUED

in crisis intervention services.

COVID-19 supplemental funding under H.R. 133 and a \$950,000 budget execution order expanded the Texas CSC program by allowing eight existing providers to establish new CSC teams and 12 providers to expand their capacity through staff training and activities to address social and clinical barriers related to COVID-19. Through this funding, nearly 300 people receiving CSC services were employed in fiscal year 2022.

Additionally, the Texas CSC program expanded by funding three new providers to implement the CSC First Episode Psychosis program. The new providers that were added include Heart of Texas, Nueces Center for Mental Health and Intellectual Disabilities, and Center for Life Resources. In fiscal year 2022, the Texas CSC program provided services to over 2,500 people, with more than 500 staff members associated with these providers. In Texas, CSC treatment teams include a psychiatrist, licensed clinician, certified family partner, certified peer support specialist, case manager, and supportive employment and education specialists.

Figure 12. CSC People Employed with H.R. 133 Funds in Fiscal Year 2022

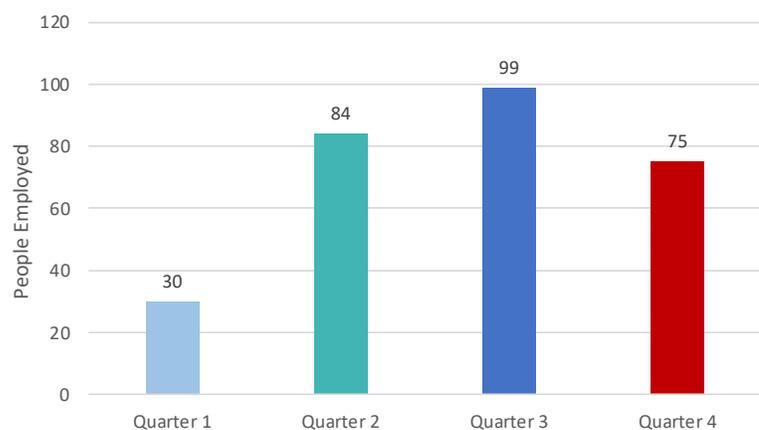
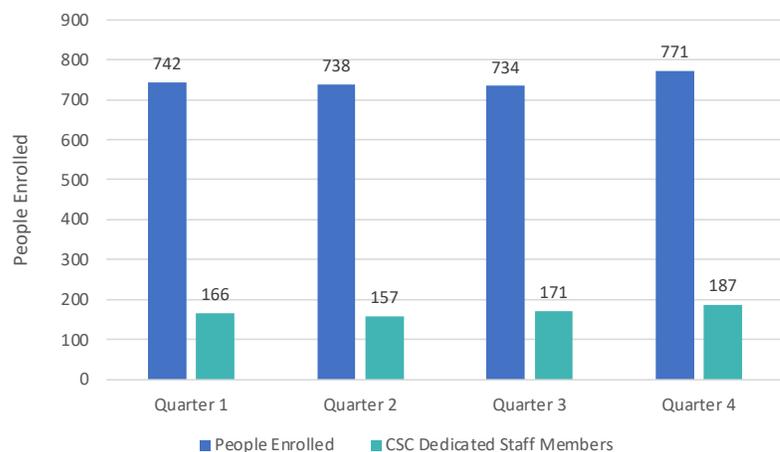


Figure 13. CSC Fiscal Year 2022 Outcomes



VOCATIONAL APPRENTICESHIP PROGRAM SUCCESSES

The Vocational Apprenticeship Program serves Texans with an IDD or mental health condition by offering opportunities for vocational training in a supported integrated environment. The program provides both classroom education and work experience by embedding apprentices in an “earn while you learn” work environment.

Additionally, apprentices learn life skills in a classroom that increase their employability. Program staff, job coaches, supervisors, and coworkers provide individualized feedback to apprentices in order to enhance skill development, strengths, and interests. Each apprentice will complete up to two apprenticeships to learn transferable job skills needed to enter the competitive job market. With the skills learned through the program, graduates will have increased opportunities to find integrated employment.

During fiscal year 2022, the program enrolled approximately 60 apprentices at the following five sites in Texas: Burke Center in Lufkin, Alamo Area Council of Governments in San Antonio, Nueces Center for Mental Health and Intellectual Disabilities in Corpus Christi, LifePath Systems in McKinney, and Community Healthcore in Longview. Apprentices explored various career fields, including cosmetology, retail, child day care, culinary, hospitality, building maintenance, animal care, and information technology. Multiple apprentices completing the program gained employment in the area of their apprenticeship. As a result of the program’s successes, Special Projects staff had the opportunity to present at the IDD Directors’ Consortium, SELN Annual Conference, and Texas Apprenticeship Conference.

Apprentices explored various career fields, including cosmetology, retail, child day care, culinary, hospitality, building maintenance, animal care, and information technology.



ANDRES
Information Technology
Apprentice



ROSIE
Housekeeping
Apprentice

APPRENTICES

EMPLOYERS



MARIA
Human Resources Director
Omni Hotel
Corpus Christi



ARNOLD
Community Services Manager
Alamo Area Council of
Governments



DANA
Employment Coordinator
Alamo Area Council of
Governments



GINA
IDD Services Director
Nueces Center for Mental
Health and Intellectual
Disabilities



BETHANY
Director
City of San Antonio
Animal Care Services

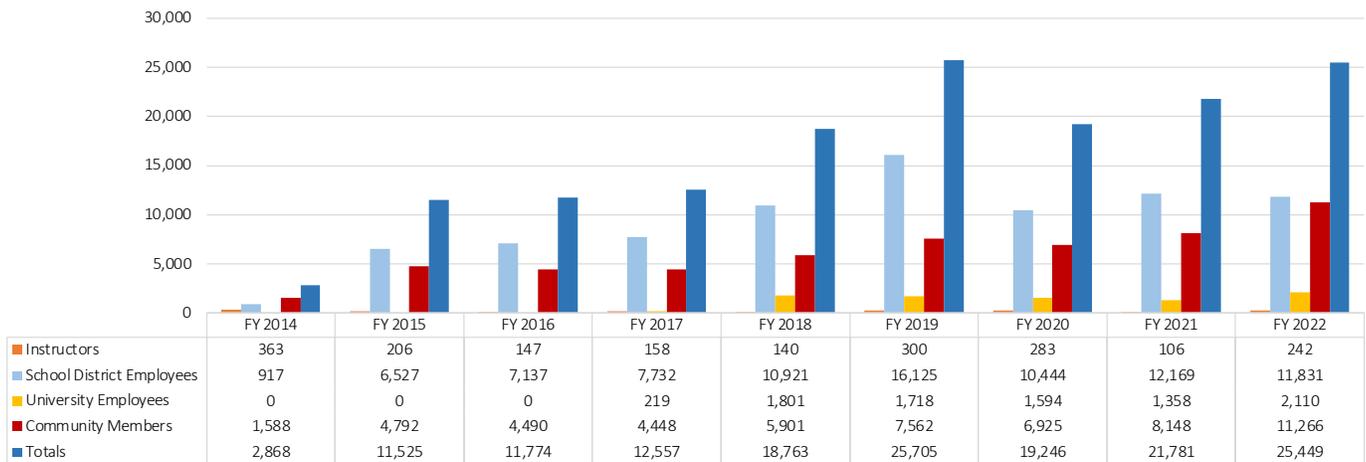
MENTAL HEALTH FIRST AID ACCOMPLISHMENTS

Mental Health First Aid (MHFA) is an evidence-based curriculum used to teach people how to help a youth or adult who may be developing a mental health problem or experiencing a mental health crisis. The goal of the program is to decrease stigma, increase awareness, and provide resources to people who might be experiencing a mental health crisis. In fiscal year 2022, 25,449 Texans completed MHFA training, which is a 17 percent increase from fiscal year 2021. **Texas currently ranks second in the United States in the total number of people trained in MHFA.**

MHFA TRAINING OUTCOMES

 242	 13,941	 11,266	 4,720	 480
LMHA AND LBHA EMPLOYEES AND CONTRACTORS TRAINED AS NEW MHFA INSTRUCTORS	HIGHER EDUCATION EMPLOYEES, PUBLIC SCHOOL DISTRICT EMPLOYEES, AND SCHOOL RESOURCE OFFICERS TRAINED IN MHFA	PEOPLE FROM THE COMMUNITY WHO ARE NOT HIGHER EDUCATION OR PUBLIC SCHOOL DISTRICT EMPLOYEES TRAINED IN MHFA	SERVICE MEMBERS, VETERANS, AND THEIR FAMILY MEMBERS TRAINED IN MHFA	INDEPENDENT SCHOOL DISTRICTS TRAINED IN MHFA

Figure 14. MHFA Numbers Trained from Fiscal Years 2014 to 2022



In fiscal year 2022, the number of Texans trained increased 17 percent over the prior year. Since fiscal year 2014, nearly 150,000 Texans have been trained in MHFA.

Watch: MHFA Training



PROCESS IMPROVEMENTS

Finding opportunities to improve internal processes was a constant feature of fiscal year 2022. Throughout IDD-BHS, teams sought to streamline workflows, improve collaboration, and make the most of technological updates.



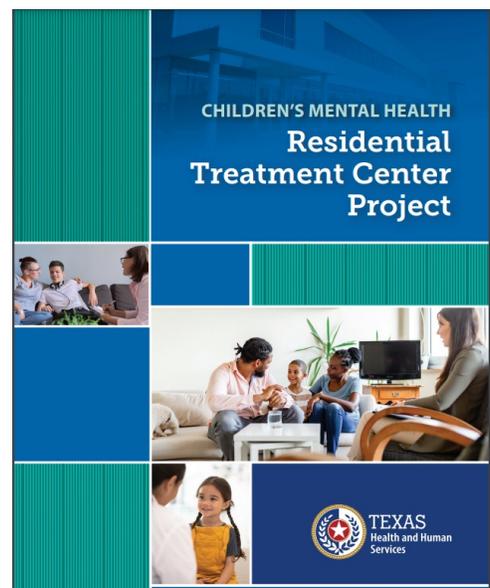
NEW RESIDENTIAL TREATMENT CENTER PROJECT FAMILY GUIDE

The Residential Treatment Center (RTC) Project assists families remaining together by ensuring they are connected to appropriate community resources that meet the child's primary needs and covers the cost of room and board in an RTC when more intensive support is needed. A comprehensive RTC Project family guide that informs families of their rights and expectations is now available in English and Spanish.

In fiscal year 2022, the RTC Project received a total of 162 referrals. Out of these referrals, 21 children were successfully connected with a contracted RTC provider and 33 children were successfully diverted from an RTC to community-based services through their LMHA or LBHA. Moreover, 99 percent of children with an open referral were connected to an LMHA or LBHA for community mental health services, while 81 percent of children that were referred with no service are now obtaining services through their LMHA or LBHA.

One Child Protective Services caseworker demonstrates the impact of the RTC Project by sharing, "The family is not in need of an RTC bed at this time and is connected to all appropriate services. In regard to the child's mental health, I will be closing the case. I appreciate everything and everyone that has played a part in this young girl's care. She is truly doing amazing."

The RTC Project team fostered a partnership with community programs, such as Waco Center for Youth, to develop a process to share referrals for potential consideration. Furthermore, 10 children referred to the RTC Project were successfully diverted to post-adoption services in their region.





The Business Operations unit supports the \$1.6 billion IDD-BHS budget portfolio with the goals and objectives of the department through accurate, timely, and friendly financial analysis and problem-solving.

BUSINESS OPERATIONS UNIT SUPPORTS DEPARTMENT PROJECTS

The Business Operations unit supports the \$1.6 billion IDD-BHS budget portfolio with the goals and objectives of the department through accurate, timely, and friendly financial analysis and problem-solving. The unit is at the department's core for solving problems and creating collaboration among IDD-BHS functional areas on topics such as quality, cost, service delivery, and developing and refining business models and initiatives in order to drive IDD-BHS' long-term business sustainability. The unit is focused on managing costs, maintaining a balanced budget, increasing and diversifying revenue, and ensuring financial stability.

The Business Operations unit played a supportive role in securing the designation of conditional approval from the Centers for Medicare and Medicaid Services. Conditional approval was given on January 10, 2022, to begin the implementation of IDD-BHS projects as part of the agencywide \$287 million HCBS spending plan. The spending plan included 10 projects within IDD-BHS programs that totaled \$16.8 million. In August 2022, the Centers for Medicare and Medicaid Services approved an additional \$3.7 million for a PASRR forms enhancement project, with a state share of \$434,000 coordinated through the unit.

At the end of the fiscal year, the Business Operations unit helped Behavioral Health Services receive a no-cost extension, which allows H.R. 133 COVID-19 supplemental funds to be spent through March 2024. The unit worked diligently with the Office of the Chief Financial Officer and Office of the Chief Medicaid and Children's Health Insurance Program Services Officer to set up coding elements, as well as worked collaboratively with the Office of Decision Support, HHS Information Technology, Contract Management staff, and programs to quickly disburse the funding to fill in gaps and better meet the needs of the communities we serve.



MONEY FOLLOWS THE PERSON PROGRAMS LEAD TO SUCCESSFUL COMMUNITY INTEGRATION

IDD Services obtained Money Follows the Person grant funding for state-level staff to support the ongoing work of Enhanced Community Coordination and Transition Support Team programs, which are IDD Money Follows the Person programs that support people transitioning from institutions to the community. The broad focus of the state positions is to review current processes, develop and expand programs, and improve operations and processes to better serve people. The state positions include clinical staff who provide expertise regarding peer reviews and case consultations. In addition, the state positions serve as a point of collaboration with workgroups and internal and external stakeholders in order to strengthen the IDD Money Follows the Person programs, improve the provision of services, and have the resources to build better support at LIDDAs to help people with an IDD live successfully in the community. The IDD Money Follows the Person programs had the following outcomes in fiscal year 2022:

- Filled all state positions;
- Completed review of current processes; and
- Identified 15 major processes for further development or revision.



Watch: Assistance in the Community for Complex Medical Needs

PEER SPECIALIST CURRICULUM REVISION

The Peer Support and Recovery unit is partnering with the Addiction Research Institute at The University of Texas at Austin in order to update several peer specialist training curricula. In fiscal year 2022, the institute updated the Peer Specialist Core Curriculum. This training is an interactive course that outlines the history of peers, recovery values, definitions, and principles upon which new certified peer specialists will base their role. The institute developed a collaborative, stakeholder-inclusive process from creation to implementation that can be generalized to all trainings moving forward. The start of the process includes listening sessions to gain insight from community stakeholders. For the Peer Specialist Core Curriculum, more than 106 people attended the core listening sessions and 75 percent of participants were employed as peer specialists. Additionally, a subject matter expert workgroup was formed that held five workgroup sessions.

PEERFORCE WORKFORCE DEVELOPMENT AND SUPPORT HUB

The Peer Support and Recovery unit, through The University of Texas Health Science Center at San Antonio, provides funding to form communities. The funding helped create PeerForce, a peer support hub that provides support and technical assistance and increases the peer workforce. This hub assists people desiring to become peer specialists and family partners by connecting them to training, supervision, internship, and employment opportunities in Texas. PeerForce provides one-on-one support through an interactive website (www.PeerForce.org). PeerForce had the following outcomes in fiscal year 2022:

- Provided technical assistance to Illinois, Indiana, Oregon, and Finland on the Texas approach to peer support;
- Had 3,037 unique website visitors;
- Connected people to peer professional education by developing centralized statewide training calendars;
- Supported eight training entities;
- Developed a network of peer support supervisors;
- Created an online Texas Peer Job Board; and
- Assisted 24 people in identifying jobs.

PEERFORCE OUTCOMES



643

PEOPLE RECEIVED
CERTIFICATION
SUPPORT



350

PEOPLE BECAME
PEER SUPPORT
SPECIALISTS



21

PEER EMPLOYER
PARTNERSHIPS



51

PEER JOBS
POSTED



AUTOMATED ADMINISTRATIVE TRACKING EFFICIENCY

The Cross Division Coordination unit serves as the department's center point of contact and repository for operations, legislative, and communications inquiries and assignments received internally from IDD-BHS and other HHSC departments. The unit determined that a new automated tracking and reporting method was needed to replace the unit's outdated Microsoft Access database in order to ensure that inquiries and assignments are being tracked and reported accurately and timely.

Planning for a new automated system started in fiscal year 2021 and was completed in fiscal year 2022. The Cross Division Coordination unit incorporated the new system as a process improvement project and, through their diligent and analytical work in partnership with HHS Information Technology, was successful in developing a customized HHS Enterprise Administrative Report and Tracking system. This new automation allows the unit to ramp up its ability and efficiency in assignment and workflow management. The customized system will allow for all requests, inquiries, approvals, and reviews to be logged and tracked in real time. Most significantly, the system, unlike its predecessor, allows multiple users to access the system simultaneously, vastly increasing efficiencies for the unit. Staff are able to create new assignments while other staff use the system to track and update assigned work. The new system will also assist with workload analytics and generate customized workload reports. Staff are proud of their accomplishment and contribution towards the fiscal year 2022 department goal of implementing modern data systems and processes through the integration of this system.



DETERMINATION OF INTELLECTUAL DISABILITY BEST PRACTICE GUIDELINES

New diagnostic assessment rules located in Title 26, Texas Administrative Code, Chapter 304, became effective November 30, 2021. The Determination of Intellectual Disability Best Practice Guidelines were revised as part of the rule project. New sections were added on the importance of cultural competency, clinical judgment, audio-visual assessment, and considerations for performance validity (such as a mental health condition or significant trauma history). The revisions were crafted based on current literature, observed trends in enrollment packets, and significant input from authorized providers currently working in the field. This initiative will make a difference to the clients served at LIDDAs, as authorized providers can now anticipate clinical and procedural flexibility, particularly in relation to reevaluations, as well as an emphasis on clinical

DETERMINATION OF INTELLECTUAL DISABILITY BEST PRACTICE GUIDELINES CONTINUED

judgment, guidance on developing assessments with differential diagnoses in mind, and consumers being set up for success regardless of assessment findings.

HOME AND COMMUNITY-BASED SERVICES AND TEXAS HOME LIVING INTEREST LIST REDUCTION EFFORTS

Because the demand for community-based services and supports often outweighs available resources, an applicant’s name may be placed on an interest list until services are available. The Local Procedure Development and Support unit is responsible for the state management of the HCS and TxHmL interest lists, including the release of slots.

In fiscal year 2022, the Local Procedure Development and Support unit released 3,289 HCS interest list slots. Out of these slots, 2,313 were for people who had been waiting on the interest list since April 2007. The remaining 976 slots were for people in crisis situations, transitioning from facilities, and aging out of Texas Department of Family and Protective Services conservatorship, which afforded people the opportunity to receive services in the community versus an institutional setting. The unit also released 1,150 TxHmL interest list slots to people who had been waiting on the interest list since May 2009. Each slot released is monitored through completion by the unit’s slot monitoring staff. Staff provide technical assistance to the LIDDA in order to resolve barriers and ensure the person enrolls in the waiver as quickly as possible.

INTEREST LIST REDUCTION OUTCOMES



3,289

HCS INTEREST LIST SLOTS RELEASED



2,313

HCS INTEREST LIST SLOTS RELEASED TO PEOPLE WAITING SINCE 2007



1,150

TXHML INTEREST LIST SLOTS RELEASED TO PEOPLE WAITING SINCE 2009

INTELLECTUAL AND DEVELOPMENTAL DISABILITY SERVICES INFORMATION TECHNOLOGY PROJECTS

IDD Services developed new systems and enhanced existing systems to reduce the time needed to submit and process forms. Boosting the capability of electronic systems results in increased efficiency, enriching the lives of Texans receiving Medicaid services.

In fiscal year 2022, IDD Services migrated HCS and TxHmL interest list records from the Client Assignment and Registration system, an antiquated mainframe system, to the existing Community Services Interest List application. As other program interest list records are already maintained in the Community Services Interest List application, moving the HCS and TxHmL interest list records allows HHSC to manage all program interest lists in one system. IDD Services also partnered with other HHSC divisions to move existing HCS and TxHmL form data from the Client Assignment and Registration system to the LTC Online Portal, create system workflows, and develop program forms.

Additionally, IDD Services implemented seven PASRR form enhancements to the LTC Online Portal during the fiscal year. Enhancements to the LTC Online Portal are critical to maintaining the accuracy of all PASRR forms. Enhancements included the following:

- Local authorities are now notified via the LTC Online Portal when a PASRR-positive nursing facility resident turns 21 years old. This new enhancement removes the possibility of a person not receiving their new PASRR Evaluation and any recommended specialized services when they turn 21 years old.
- PASRR forms now have standardized demographic validations that will result in more accurate search results from the Form Status Inquiry page on the LTC Online Portal. If a Medicaid identification number found in the Claims Management System differs from the number entered on a form, a new validation error message will let the provider know which specific field has incorrect information when submitting or updating a PASRR form.



BUSINESS OPERATIONS UNIT AND OFFICE OF DECISION SUPPORT CONSOLIDATION

Fiscal year 2022 included the organizational consolidation of the Business Operations unit and Office of Decision Support. The Office of Decision Support works with several HHSC program areas to ensure system changes are implemented in a timely and efficient way for the greater good of those we serve.

During the fiscal year, the Office of Decision Support worked with the Business Operations unit and Mental and Behavioral Health Data Warehouse Information Technology teams to improve internal processes, workflows, and collaboration. This effort included implementing a change request process, streamlining workflows, and improving collaboration on all system enhancements for the Mental and Behavioral Health Outpatient Warehouse system. Through this new process, 11 changes to the system were presented to the review board, under development, and completed. This process allows for greater efficiencies, improved documentation, and increased collaboration between the teams and stakeholders.

The Office of Decision Support also merged processes and workflows with the Business Operations unit during the fiscal year to improve all system enhancements requested by stakeholders. The Business Operations unit provides financial oversight and direction on all system enhancements coordinated and managed by the Office of Decision Support.

By enhancing the process flow between the two areas, the Office of Decision Support will be able to secure funding for change requests and projects upfront before kick-off.

Additionally, there were 25 system enhancements completed for the Clinical Management for Behavioral Health Services application during the fiscal year. The Business Operations unit and Office of Decision Support worked with stakeholders to budget change requests that were completed by HHS Information Technology.

Figure 15. Mental and Behavioral Health Outpatient Warehouse Change Requests in Fiscal Year 2022

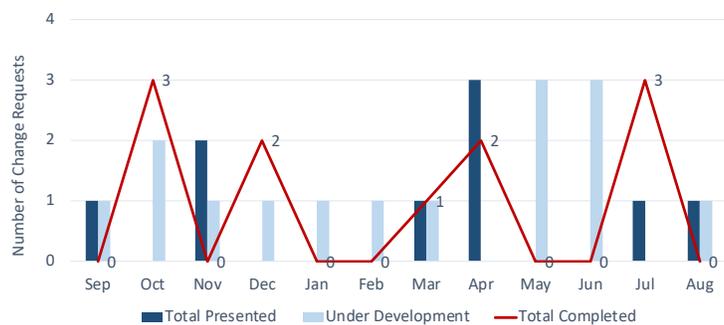
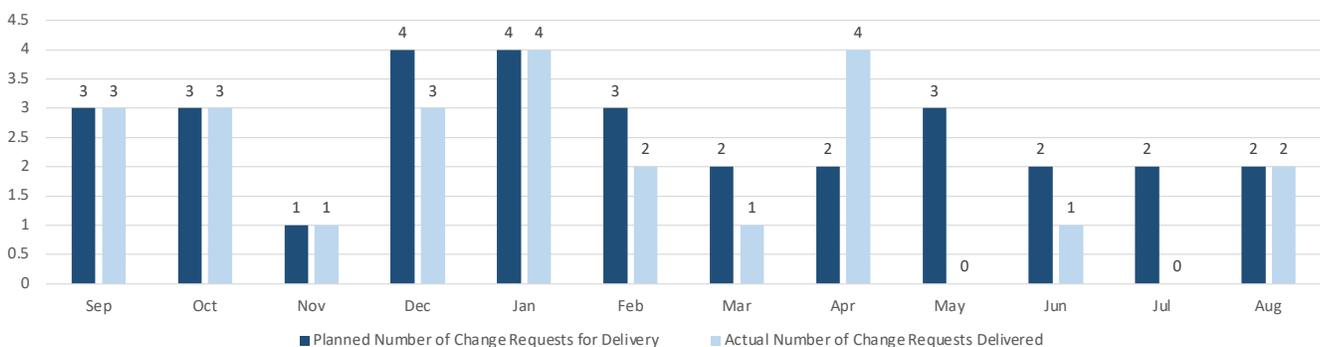


Figure 16. Clinical Management for Behavioral Health Services Change Requests in Fiscal Year 2022



EMPLOYEE ENGAGEMENT



2022 SURVEY OF EMPLOYEE ENGAGEMENT



Since 2018, IDD-BHS has focused on improving employee engagement, development, and communication. The Innovation and Engagement unit coordinates the support and development of the department's workforce. One key measure of successful engagement is the agency's biannual Survey of Employee Engagement (SEE). The SEE allows staff at all levels to share their thoughts on a variety of issues, including workplace culture, supervision, pay, and communication.

In 2018, the department's SEE results indicated that 49 percent of respondents felt the information from the SEE would go unused. Since that time, the Innovation and Engagement unit has led the creation of a staff advisory panel, new employee orientation, 360-feedback survey for supervisors, monthly newsletter, and annual employee recognition awards. By 2022, only 17 percent of respondents felt the information from the SEE would go unused. This level of engagement reflects the work done since 2018, as well as the extra attention paid to maintaining an engaged workforce during the COVID-19 pandemic.

In 2022, the department's SEE results indicated that 5 percent of respondents were disengaged, which is lower than results from 2020 (11 percent) and 2018 (32 percent). The department's scores have also improved in other categories across the years. By 2022, the department's scores significantly outpaced the agency in all 12 categories, demonstrating that the investment in our staff has built a motivated and engaged workforce.

LEGISLATIVE ACADEMY PREPARES DEPARTMENT

To help IDD-BHS staff feel more prepared for upcoming legislative sessions, the Cross Division Coordination Legislative team embarked on a project to establish a legislative academy that provides annual trainings. The team held planning sessions with staff, solicited feedback from leadership, and conducted a survey to ensure the project scope covered the training needs of staff.

The Cross Division Coordination Legislative team successfully launched the IDD-BHS Legislative Academy during fiscal year 2022. The academy offered six training sessions on the following topics: Legislative Process 101, Bill Reading and Bill Analysis, and Budgeting 101, which was taught by the Business Operations unit. These topics were selected in order to provide staff with legislative basics, internal department guidance, and information to ensure consistency and collaboration with activities and assignments resulting from the legislative session. Approximately 80 to 100 staff signed up to attend each of the training sessions. These trainings contributed to employee engagement in the agency's legislative process and improved employee performance when conducting or completing legislative assignments across all areas of the department.

