



## Association of Community Mental Health Centers of Kansas, Inc.

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**Op-Ed by Kyle Kessler**

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### **Mental Health Needs Medicaid Expansion in Kansas**

The people of Kansas need Medicaid Expansion to increase access to care to mental health or substance use treatment. Not only for economic development; not only for delaying inevitable closures or consolidations of health care organizations like community mental health centers or hospitals; and not only for the purpose of becoming part of the large majority of states in our country that have chosen to expand Medicaid, although I think all of these items have a legitimate place in the conversation. This issue is about access to care.

Mental health treatment providers in Kansas need the Kansas Legislature to pass legislation allowing our state to expand the Kansas Medicaid Program. Mental health and substance use treatment are no different than any other part of health care. When someone presents for treatment, we need to take advantage of the opportunity to do what we can to help him or her. According to the Mayo Clinic, “mental illness refers to a wide range of mental health conditions that affect your mood, thinking and behavior” and can be caused by inherited traits from family members, environmental exposures before birth, or brain chemistry. Americans are seeking behavioral health treatment at higher rates than in the past, and Kansas is no different. For example, Community Mental Health Centers (CMHCs) are treating more Kansans than ever before with an increase of over 10 percent in the last five years and 27 percent in the last 10 years.

Medicaid Expansion in Kansas will save money in the long-term through timely access to care. If we think not only about treatment for mental health issues but the relationship between mental health and physical health, the sooner patients access mental health treatment, the healthier they

will be physically. Think of the connection between anxiety and hypertension or high blood pressure that results in heart disease as one example. If this patient has health insurance, she or he will be more likely to seek treatment for her or his anxiety which could help lower her or his blood pressure and prevent heart disease.

According to the U.S. Department of Health and Human Services in January 2017, for states that had expanded Medicaid, the uninsured share of substance use or mental health disorder hospitalizations fell from about 20 percent at the end of 2013 to about 5 percent by mid-2015. Health care insurance coverage under Medicaid Expansion will expedite access to treatment by allowing for more focus on outpatient treatment when inpatient costs for treating uninsured Kansans drop.

Opponents of Medicaid Expansion regularly refer to the example of an unemployed 26-year-old who chooses to sit in his grandmother's basement eating pizza and playing video games rather than work and obtain his own health insurance. In visiting with many of our state mental health leaders who have decades of experience providing treatment and therapy in Kansas, not one of them told me that this is just a lazy guy who chooses not to work. They each said something along the lines of, "There is something going on with that guy, and we could help him." Whether it is an anxiety disorder or major depression, case management could connect him to treatment and also potentially employment, at which point he no longer needs Medicaid as his primary insurance.

As I conclude, we have to keep in mind the number of lives our state is losing to a suicide epidemic that is nothing short of a crisis. According to the Kansas Department of Health and Environment (KDHE) Summary of Vital Statistics, suicide is the second highest cause of death among people from 15 to 44 years of age, and those numbers have been going up the last five years. This is higher than heart disease, cancer, or homicide, and I have confidence that expanding Medicaid to provide coverage and access to more young people could help prevent this loss of life our state is experiencing at an alarming rate.

For Kansas to not participate in a program that would help increase access to mental health treatment and make Kansans healthier with such a large part funded by the federal government is like turning down federal highway funding that improves roads and makes travelers safer or turning down agricultural subsidies that help make food safer and cheaper. Surrounding states are all participating in federal programs that provide greater access and funding for behavioral health. Nebraska, Colorado, Iowa, and Arkansas have all expanded their Medicaid Programs, while Missouri and Oklahoma are both participating in a behavioral health specific federal program that Kansas chose not to pursue four years ago. Medicaid Expansion is the only door remaining open to increasing access to mental health care through which we can not only improve lives but also save them, and we as a state should walk through it.

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