



Date: February 8, 2024

From: Chris Jones, Cicero Action

To: The Honorable Stephen Owens, Chair
House Committee on Corrections and Juvenile Justice

Re: Proponent Testimony for HB 2353

Dear Chairman Owens and Honorable Committee Members:

Thank you for the opportunity to testify on HB 2353, which aims to address the critical issue of behavioral health in Kansas. I am Chris Jones, a Senior Fellow and Vice President for Health Care Policy with Cicero Action. Before joining Cicero, I was the Commissioner of Health and Human Services for North Dakota, which included the state hospital, community behavioral health clinics, and policy.

HB 2353 better positions Kansas to respond to its residents in the most need of mental health care by increasing the duration of an initial continued treatment order and expanding the eligibility criteria for outpatient treatment. These are sensible changes to improve the accessibility and effectiveness of the state's mental health care.

It is important to note that the population addressed in this bill are those who are experiencing the most severe symptoms and impairments of mental illness. Involuntary commitment for treatment is only an option for extreme cases, but it is an essential tool for this high-risk, high-need population.

The prevalence of severe mental illness in the criminal justice system and unsheltered homeless populations demonstrates the ways the existing involuntary care framework has been underutilized as a tool to divert individuals whose well-being is rapidly deteriorating and prevent them from becoming homeless or committing crimes due to a lack of care. This bill addresses many of the key reasons for this underutilization.

A cursory view of national and statewide data highlights the scale and urgency of this problem. According to Treatment Advocacy Center, Kansas has more than 70,000 residents suffering from severe mental illness.ⁱ While the vast majority of these individuals do not need the highest levels of care such as those at issue in the bill, it is worth noting that there are only an estimated 300 psychiatric beds in Kansas to care for the most severe cases within that population.ⁱⁱ The state's bed capacity has fallen by 56 percent since 2010.ⁱⁱⁱ This decline in bed capacity is a concern in its own right, but as it relates to this bill, this trend highlights the need for expanding alternative modes of care, such as outpatient treatment, which is addressed in HB 2353.

Like many states, Kansas's mental health infrastructure anticipates high levels of criminal involvement among people with severe mental illness, as more than one-third of the state's psychiatric care beds are within its criminal justice system.^{iv} Yet, even that data point underestimates the connection between mental illness and crime. The Substance Abuse and Mental Health Administration estimates that at least 37 percent of people in jail and 44 percent of people in prison have mental illnesses.^v

The unsheltered homeless population, which refers to the individuals that we often see sleeping in tents and sleeping bags in parks and on sidewalks, endures similarly alarming rates of mental illness. According to the U.S. Department of Housing and Urban Development, Kansas has seen unsheltered homelessness increase by 85 percent in the last five years.^{vi} Much of the growth in unsheltered homelessness parallels the increase in the prevalence of severe mental illness within that population. Rates of severe mental illness have increased among the total homeless population have doubled in the last decade and increased by 42 percent in the last five years.^{vii} Among the unsheltered population, the trends are even worse. Since 2013, the rates of SMI have increased by 150 percent, and since 2018, by 114 percent.^{viii}

The changes enacted by this bill will not fully solve the issues I have outlined, but this bill will put more tools in the hands of families, medical professionals, and officials that will allow the state to better understand demand for the continuum of care, and today, better address the most extreme cases of mental illness in Kansas.

Thank you, Mr. Chairman and committee members for your time. I will now answer any questions.

ⁱ Kansas. Treatment Advocacy Center. https://www.treatmentadvocacycenter.org/map_directory/kansas/

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^{iv} Kansas. Treatment Advocacy Center. https://www.treatmentadvocacycenter.org/map_directory/kansas/

^v About Criminal and Juvenile Justice. Substance Abuse and Mental Health Administration.

[https://www.samhsa.gov/criminal-juvenile-](https://www.samhsa.gov/criminal-juvenile-justice/about#:~:text=It%20is%20estimated%20that%2018,(PDF%20%7C%20670%20KB).)

[justice/about#:~:text=It%20is%20estimated%20that%2018,\(PDF%20%7C%20670%20KB\).](https://www.samhsa.gov/criminal-juvenile-justice/about#:~:text=It%20is%20estimated%20that%2018,(PDF%20%7C%20670%20KB).)

^{vi} HUD 2023 Continuum of Care Homeless Assistance Programs Homeless Populations and Subpopulations. U.S. Department of Housing and Urban Development.

https://files.hudexchange.info/reports/published/CoC_PopSub_State_KS_2023.pdf

HUD 2018 Continuum of Care Homeless Assistance Programs Homeless Populations and Subpopulations. U.S. Department of Housing and Urban Development.

https://files.hudexchange.info/reports/published/CoC_PopSub_State_KS_2018.pdf

^{vii} HUD 2023 Continuum of Care Homeless Assistance Programs Homeless Populations and Subpopulations. U.S. Department of Housing and Urban Development.

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HUD 2018 Continuum of Care Homeless Assistance Programs Homeless Populations and Subpopulations. U.S. Department of Housing and Urban Development.

https://files.hudexchange.info/reports/published/CoC_PopSub_State_KS_2018.pdf

HUD 2013 Continuum of Care Homeless Assistance Programs Homeless Populations and Subpopulations. U.S. Department of Housing and Urban Development.

https://files.hudexchange.info/reports/published/CoC_PopSub_State_KS_2013.pdf

^{viii} HUD 2023 Continuum of Care Homeless Assistance Programs Homeless Populations and Subpopulations. U.S. Department of Housing and Urban Development.

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HUD 2018 Continuum of Care Homeless Assistance Programs Homeless Populations and Subpopulations. U.S. Department of Housing and Urban Development.

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