

Position Statement

For 2022 Session

Child Crisis Stabilization

Proposal

Issue:	Many children and youth face difficult mental and behavioral health symptoms each day. The current service delivery landscape does not offer a community-based solution to address the needs of many families. The result are higher episodes of care in emergency departments or in higher-end residential programs.
Implementation Strategy:	<p>One solution to this issue is to create a Medicaid benefit for community-based residential stabilization services for youth. This could be adapted from a current benefit we do offer adults in the state of Minnesota. The services to be offered would be as follows:</p> <ul style="list-style-type: none">• 24-hour on-site staff and assistance• Assessment of the member's immediate needs and factors that lead to the crisis• Individualized treatment to address immediate needs and restore member to pre-crisis level of functioning• Supportive counseling• Skills training as identified in the member's individual crisis stabilization plan• Referrals to other service providers in the community as needed and to support the member's transition from RCS• A crisis response action plan if a crisis should occur• Assistance to access and store medication• Room and Board (for members enrolled in Medical Assistance only) <p>Counties would work with the Department of Human Services to develop this benefit in the state of MN and implement it into our current care system.</p>

Systemic Priority Alignment (highlight all that apply and explain why)

- **Equity**
- **Integrated Services**
- **Fiscal Framework**

From the GARE Toolkit (See www.racialequityalliance.org): What are the racial equity impacts of this particular decision? Who will benefit from or be burdened by it? Are there strategies to mitigate unintended consequences?

Comments:

This service integrates into the current care system. We have shelters and other programs that could easily adapt their programming to better meet the mental health needs of children in their care. It would offer those providers more sustainable solutions to offering services to families. RCS programs also improve access by offering another door to mental health services for families outside of more restrictive settings.

These settings should be readily available to all people without having to contact law enforcement or emergency services. Families should be able to access the right kind of care in a time of crisis without the worry of how this should be funded if they are on a state Medicaid program.

Relevant Committee

(highlight all that apply and explain why)

- Adult Services
- Behavioral Health
- Children's Services
- Modernization
- Policy
- Self-Sufficiency

Why:

This strategy is aimed at providing a new service to communities across the state. Through Residential Crisis Stabilization children have the ability to access services earlier in a crisis episode. This supports families in working with youth experiencing mental health symptoms in a community setting. The goal is to reduce higher end services such as emergency department visits and child placement episodes.

Rationale/Background:

DHS defines a mental health crisis as the following:

Mental health crisis: A behavioral, emotional or psychiatric situation that would **likely result in significantly reduced levels of functioning in primary activities of daily living or in the placement of the member in a more restrictive setting** (such as inpatient hospitalization).

Currently our crisis landscape is limited in how we address these crises. Many times, families are not equipped to have a child in a crisis remain in their home, but the emergency department is not the current setting. Shelter programs have historically been accessed, but they do not provide the intervention methods necessary to aid the child and family properly in recovery from a crisis episode.

For adults, we have these RCS services that are better integrated into the care landscape and offer the right level of care to individuals in crisis. This service is funded through Medicaid and highly utilized across the state of MN. Children should have the same access to care as adults experiencing crisis symptoms.



Submitted by:

Approved on: