## Health and Human Services Committee LB 998 February 24, 2016

Sheri Dawson
Director, Division of Behavioral Health
Department of Health and Human Services

Good afternoon, Senator Campbell, and members of the Health and Human Services Committee. My name is Sheri Dawson (S-h-e-r-i D-a-w-s-o-n) and I am the Director of the Division of Behavioral Health in the Department of Health and Human Services. I am here to testify in a neutral capacity to LB 998, which establishes five emergency community crisis centers and changes provisions relating to emergency protective custody.

A comprehensive behavioral health needs assessment was a recommendation of the Legislative Performance Audit Committee. The Division of Behavioral Health has contracted with the University of Nebraska Medical Center (UNMC) College of Public Health to perform a comprehensive needs assessment to evaluate needs and gaps in the service system which will guide well-informed decisions regarding the community-based network of services. The assessment will be completed by June 30, 2016. The issues that LB 998 presents are substantial and imputing. I commend Senator Schumacher for his continued interest and leadership on the issue. However, I believe LB 998 is premature as services outlined in this bill should be considered with the results of the need assessment. The Division of Behavioral Health wants to ensure a comprehensive and cost effective approach to address regional and statewide services. We are working to improve the system now and we believe the feedback from the assessment will be extremely helpful in this process.

As written, LB 998 would require each community crisis center to offer comprehensive medical and psychological examinations within 36 hours of admission, short-term intensive treatment to stabilize the psychiatric condition, medication therapy, and laboratory testing if ordered. This could duplicate already existing services. Crisis stabilization, by service definition requirements, is not intended to serve as an intensive clinical treatment nor is it structured or staffed to serve as an inpatient psychiatric setting. This bill would expand the scope of services currently offered as crisis stabilization. Because of this expanded scope, the level of licensure required would need to be determined.

The bill's intentional shift of costs from counties to the state creates a large fiscal impact. Current regulations require each county to make arrangements with appropriate facilities inside or outside the county, and pay the cost of the emergency protective custody of persons from such county in such facilities. LB 998 changes the financial responsibility and would result in a significant cost shift to the state. This bill also requires that individuals placed under emergency protective custody be transferred to the custody of DHHS or its designee within one hour of being notified by law enforcement, which will require additional funding for staff and transportation.

My agency is committed to reviewing the current system and working with all of our partners, including law enforcement. For example, I am currently engaged in improving the emergency system in Region 4 to respond to concerns that have been expressed.

I am happy to address any questions you may have.