



# Mental Health & Wellbeing

Marion County Community Mental Health Centers  
Annual Presentation



Public Safety and Criminal Justice Committee  
August 27th, 2025

# Marion County Community Mental Health Centers



# County Funding for Community Mental Health Centers

## Indiana Code 12-29-2-2

- County governments shall fund community mental health centers based on a formula established under Section B of that Code chapter.
- County funding under IC 12-29-2-2 is not a taxing levy, but rather a statutorily required funding levy that is adjusted annually by the statewide assessed value growth quotient.

## The Indiana Behavioral Health Commission

STUDIED THE COST OF **UNTREATED MENTAL ILLNESS**  
IN INDIANA AND ESTIMATES

**\$4.2 BILLION**  
**ANNUALLY**

INDIANA BEHAVIORAL HEALTH COMMISSION  
ADVOCACY TOOLKIT

INDIANA  
COUNCIL  
OF COMMUNITY MENTAL HEALTH CENTERS, INC.

MHA  
Mental Health America  
of Indiana

NAMI  
National Alliance on Mental Illness  
Indiana

The cost of untreated mental illness in Indiana is estimated to be **\$4.2 billion every year**. The largest cost attributable to untreated mental illness was premature mortality, which is estimated at over \$1.4 billion. Productivity losses were estimated to cost \$885 million each year, and direct health care costs \$708 million.

# Community Mental Health Center Services

## 440 IAC 4.1-1-1: Continuum of care

- Individualized treatment planning to enhance coping skills and symptom management
- 24-hour-a-day crisis intervention services
- Case management to fulfill individual needs – including assertive case management
- Outpatient services
  - Intensive outpatient services
  - Substance abuse services
  - Counseling and treatment
- Acute stabilization including detoxification
- Residential services
- Day treatment
- Family support
- Medication evaluation and monitoring
- Services to prevent unnecessary and inappropriate treatment and hospitalization and the deprivation of a person's liberty



# Expansion of Indiana's Community Mental Health Services

In 2023, Senate Enrolled Act 1 allowed the Division of Mental Health and Addiction to apply for participation in the expansion of a community mental health services demonstration program. The legislation provided DMHA \$100 million, (between SFYs 2024-2025), through the state biennium budget to establish the next step for improving the state's mental health care system. **Renewed funding of 50 million dollars each year has been approved for State Fiscal year 2026-2027.**

The state selected 8 CCBHC Demonstration Pilot Sites (to include Sandra Eskenazi and Adult and Child Health). Over the next several months, DMHC worked with the Demonstration Pilot Sites to ensure they met all CCBHC criteria and has recently opened an application period to add new Service Providers. Both Community Fairbanks Behavioral Health and Aspire Indiana Health have applied.

## ***CCBHC Required the following 9 Core Services:***

- *Crisis Services available 24 hours/7 days a week*
- *Treatment Planning*
- *Screening, Assessment, Diagnosis & Risk Assessment*
- *Outpatient Mental Health & Substance Use Services*
- *Targeted Case Management*
- *Outpatient Primary Care Screening and Monitoring*
- *Community-Based Mental Health Care for Veterans*
- *Peer, Family Support & Counselor Services*
- *Psychiatric Rehabilitation Services*





# Certified Community Behavioral Health Clinic



*Expanding timely access to care*



*Making crisis services and supports available to all*



*Expanding access to substance use care*



*Improving collaboration with criminal justice agencies*



*Investing in the workforce*



*Meeting children, youth and families where they are*



*Coordination and integration with primary care*



*Addressing health disparities and social determinants of health*



## Expanding timely access to care

CCBHCs continue to close the treatment gap that leaves millions of people in the US unable to access lifesaving mental health and substance use care.

- Today, CCBHCs serve an estimated **3 million people**, representing continued yearly growth since the inception of the model.
- Access gains were particularly pronounced among Medicaid CCBHCs, which expanded their number of people served by an average of **33%**.
- The most commonly reported access expansions were among children/youth, uninsured people and those without a prior source of outpatient care.

NATIONAL COUNCIL  
for Mental Wellbeing



## Expanding access to substance use care

CCBHCs are addressing the nation's opioid crisis and surging demand for substance use care by expanding access to a wide range of services, such as medication-assisted treatment (MAT).

- **87%** of Medicaid CCBHCs and established grantees offer one or more forms of MAT for opioid use disorder, compared to **64%** of substance use treatment facilities nationwide.
- **68%** of CCBHCs reported that their number of clients engaged in MAT for opioid use disorder has increased since becoming a CCBHC, with **29%** reporting increases of **20%** or higher.

# CCBHC Outcomes



## *Addressing health disparities and social determinants of health*

CCBHCs and grantees reported that the model has helped them engage in targeted access expansions for people who have been historically underserved and address social determinants of health in their communities.

- CCBHCs engaged in a wide array of strategies to address health disparities, including increasing screening for unmet social needs that affect health (**81%**), increasing outreach to individuals who have historically been underserved or underrepresented (**75%**), and hiring staff who are demographically representative of the population they serve (**75%**).
- CCBHCs are making particularly focused efforts to support access among veterans, people experiencing homelessness and those who are involved or at risk of involvement with the criminal justice system.
- The vast majority of CCBHCs (**91%**) proactively assist clients with finding or maintaining stable housing.

# Workforce Development

- Workforce Pipeline – Behavioral Health Clinicians
- Behavioral Health Workforce Recruitment & Retention Innovation
- Child & Family Workforce Stabilization Program
- Workforce Development and Innovation

## Funders

Division of Mental Health and Addictions

Department of Child Services

City of Indianapolis

Charitable Giving

**2,340**  
Marion County  
Employees

# Workforce Development - Showcase

## Behavioral Health Academy™

**Purpose:** Shrink the Licensed Therapist shortage by increasing the # of Dual Licensed Therapist

- First Cohort was in 2019

**Graduated:**

- 218 in Marion County
- 283 Across Indiana

**'25-'26 School Year:**

- 39 Students Enrolled Across - 4 CMHC Partners

**Marion County School Partners:**

- Butler University
- Indiana University – Indianapolis
- University of Indianapolis (UIndy)
- Martin University
- Marian University

**Service Partners:**

- Adult & Child Health
- Aspire Indiana Health
- Community Fairbanks BH
- Sandra Eskenazi MHC

**Organizing Organization:**

- Community Fairbanks Behavioral Health

## Ackerman Center Care Coordinator Pathway

**Purpose:** Increase the # of bachelor's-level behavioral health providers who can provide dual diagnosis care. Increase retention through improved training and practicum experience. Promote further career development (linkage & pathway to the BHA).

- First Cohort was in 2023.

**Graduated:**

- 27 in Marion County

**'25-'26 School Year:**

- 24 Students Enrolled Across - 2 CMHC Partners

**Marion County School Partners:**

- Indiana University – Indianapolis
- University of Indianapolis (UIndy)
- Martin University
- Marian University

**Service Partners:**

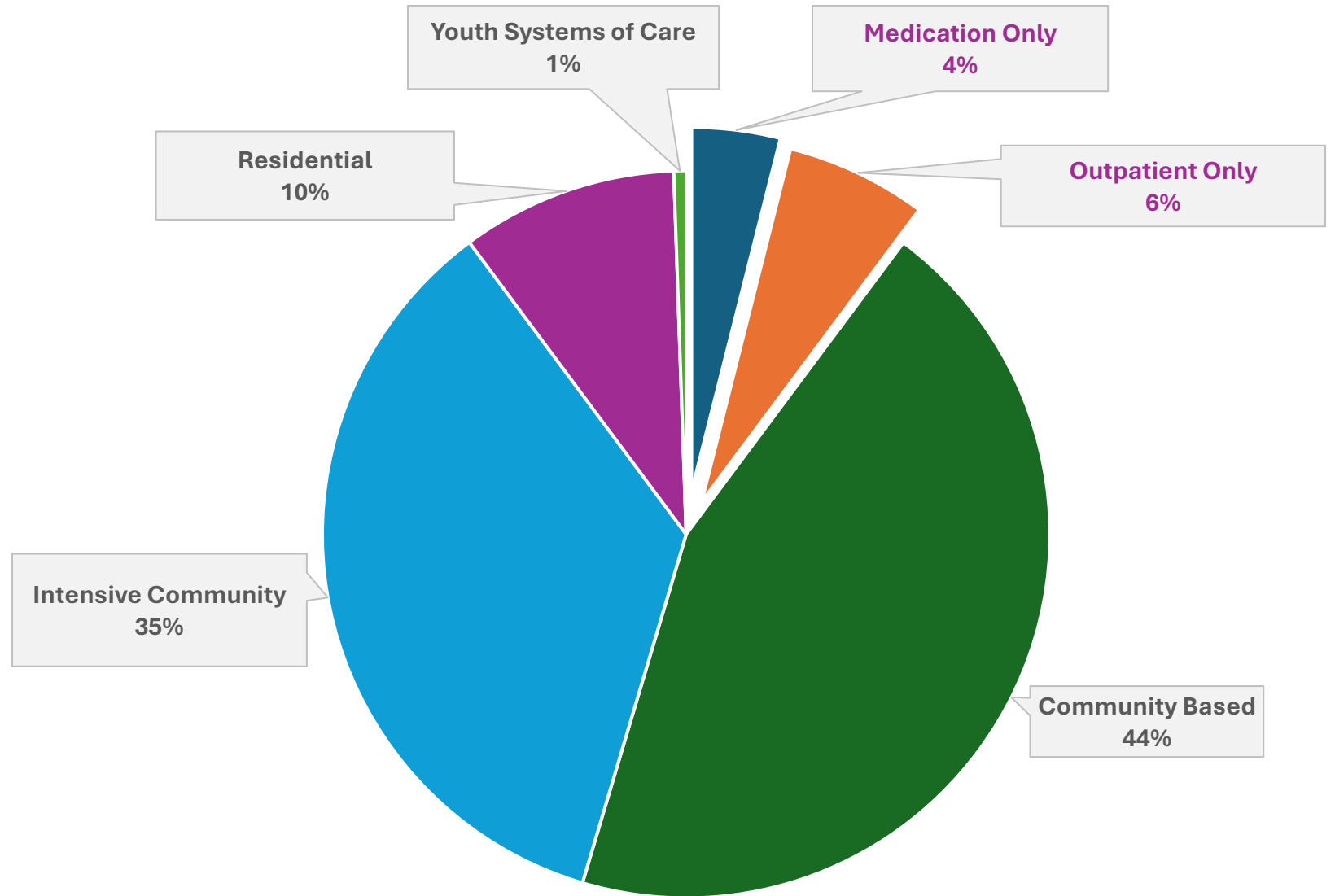
- Community Fairbanks BH
- Sandra Eskenazi MHC

**Organizing Organization:**

- Sandra Eskenazi Mental Health Center

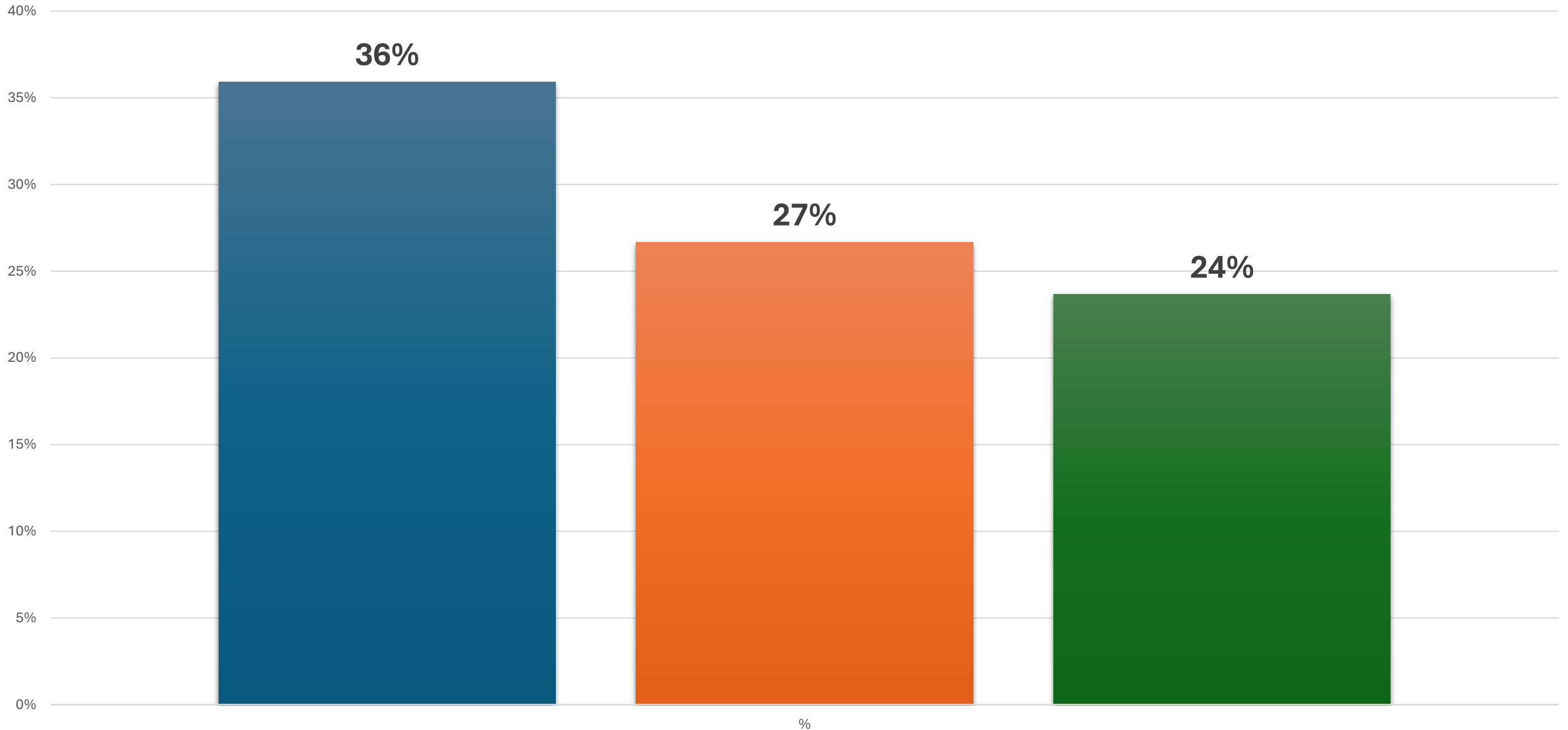
# Individual Treatment Needs

**65,121**  
Individuals  
Served



**Treatment Needed**

# Vulnerable Population Data

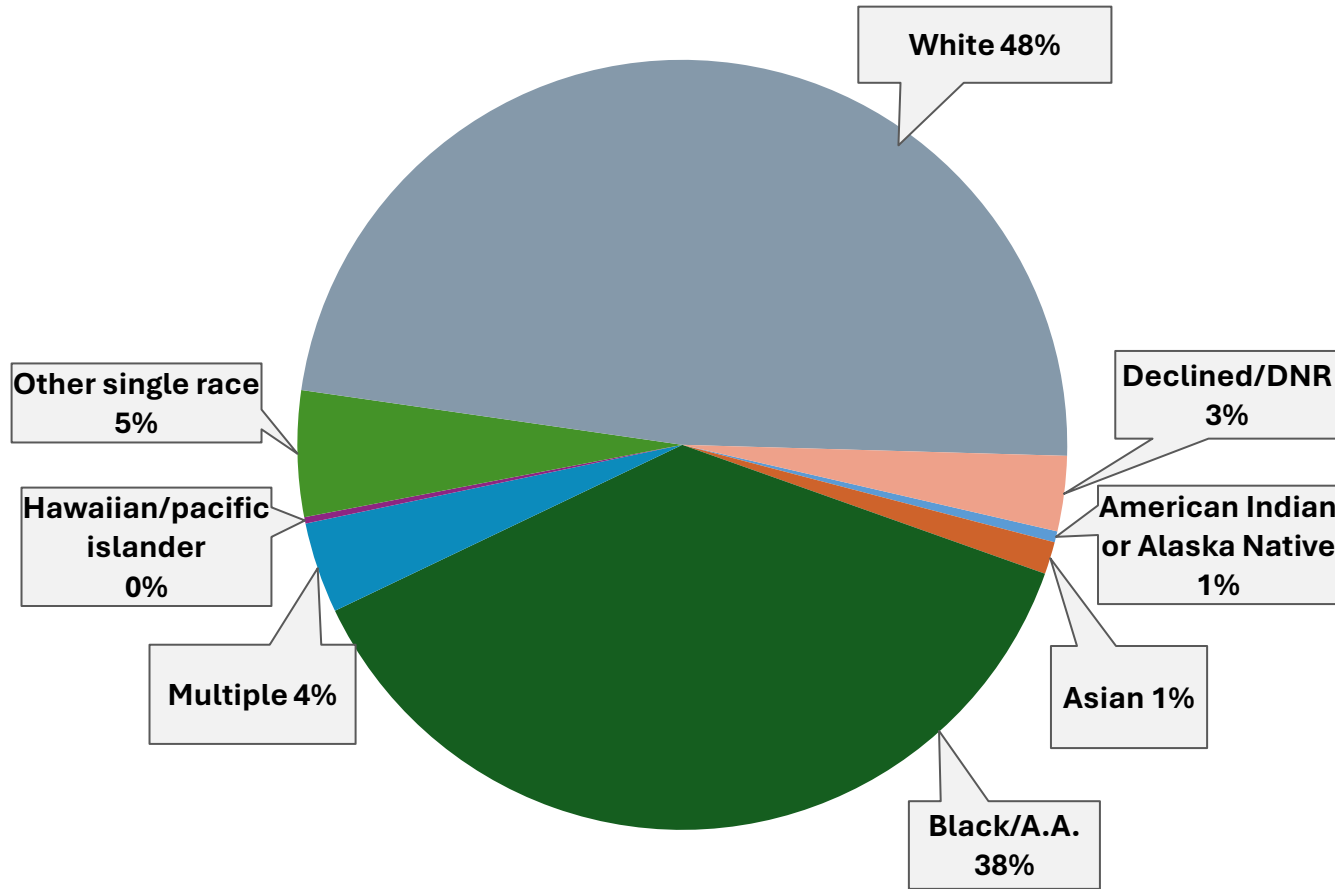


■ Residential Instability

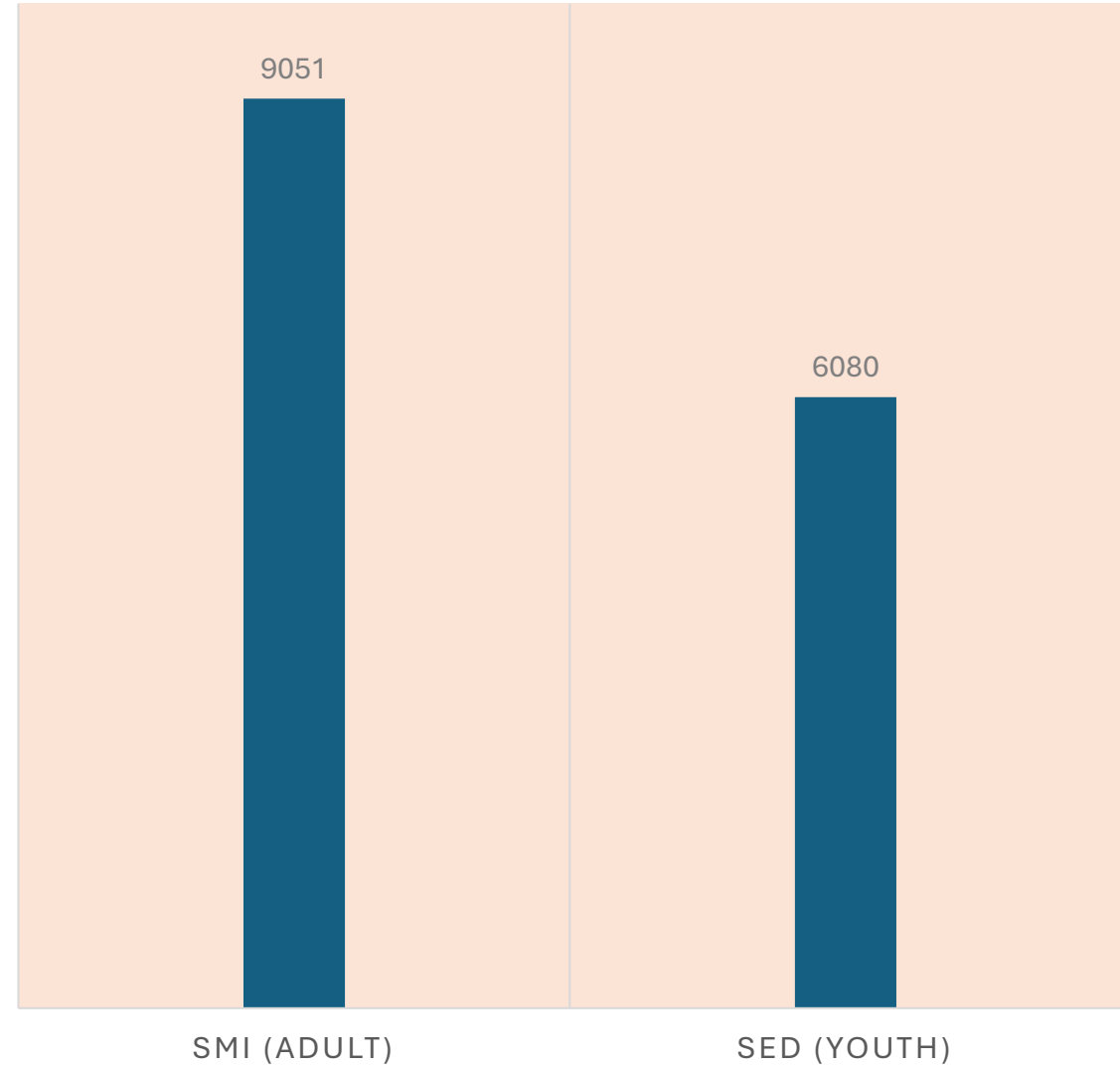
■ Legal System Involvement

■ Food Insecurity

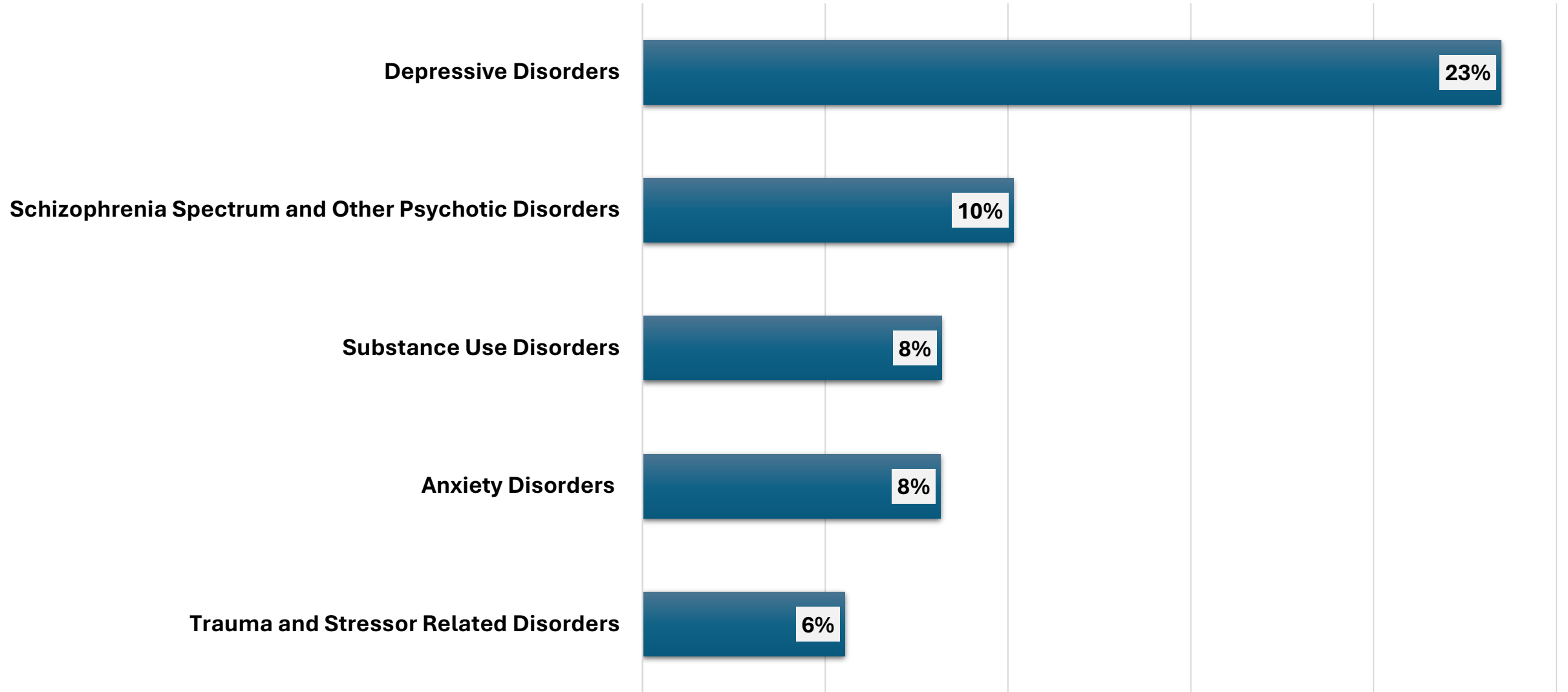
## PATIENT RACE



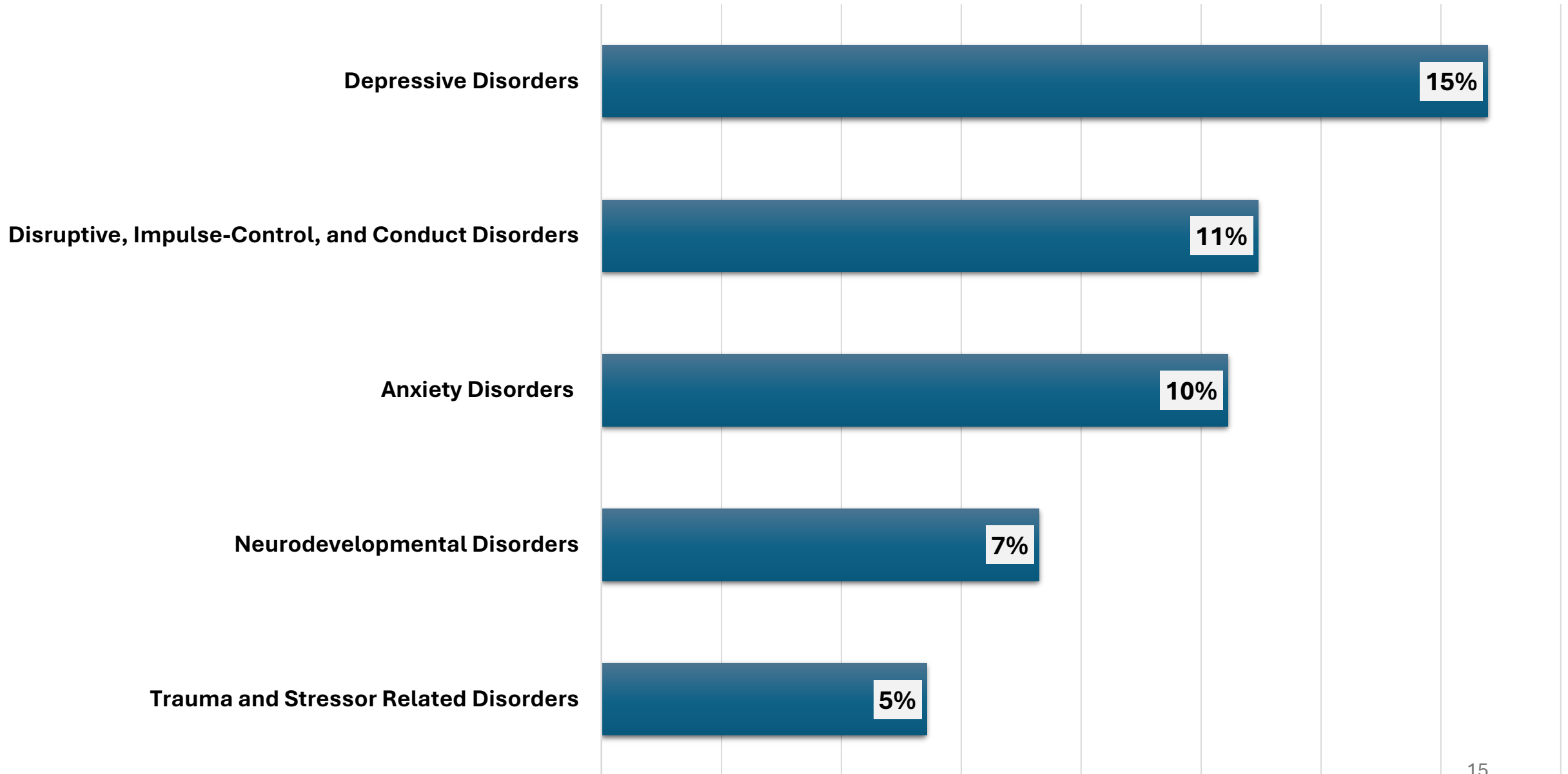
## DIAGNOSIS



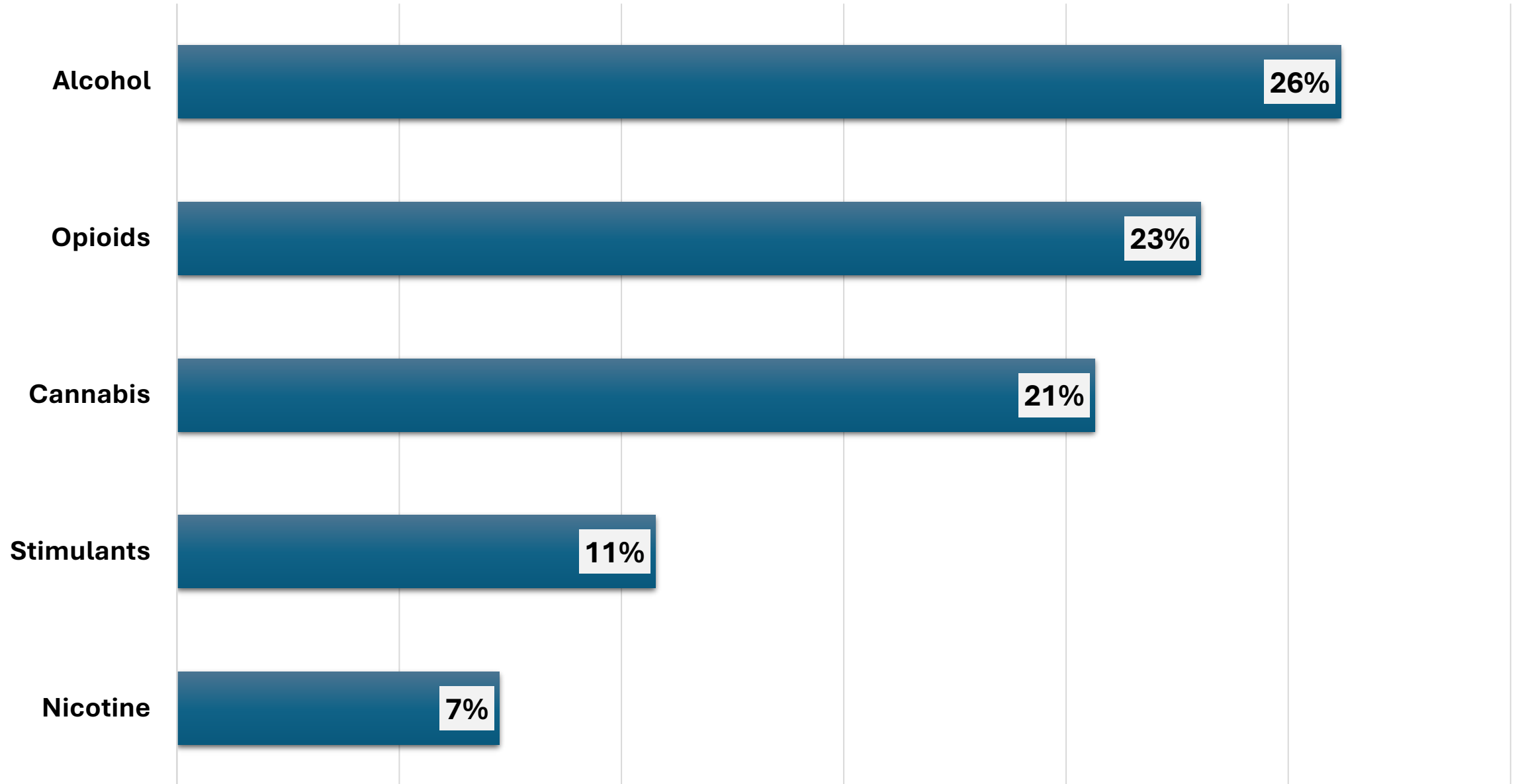
# Top 5 Diagnostic Categories - Adult



# Top 5 Diagnostic Categories - Youth



# Top 5 Substance Use Disorders



# Addressing Community Needs



# Marion County Continuum of Care

162  
Schools Served

27  
Outpatient Clinics

151  
Acute Psychiatric  
Beds

52  
Acute Detox Beds

203  
Residential Beds

129  
Group Home Beds

28  
Youth Shelter Beds

156  
Cluster Apartments  
Beds

61  
Foster Homes

25  
Crisis Stabilization  
Chairs/Beds  
(CRSS)

4  
(24/7/365) Mobile  
Crisis Response  
Teams

# Crisis Continuum of Care



**SOMEONE  
TO TALK TO**

**SOMEONE  
TO RESPOND**

**SOMEWHERE  
TO GO**

Hoosier in  
Need

988 / 911  
Hotlines

Mobile Crisis  
Collaboration with  
IMPD

Crisis  
Receiving and  
Stabilization  
Services



**22,038**  
Crisis Services  
Provided

# Marion County Mobile Crisis Response Teams

Adult & Child Health



Sandra Eskenazi Mental Health

Community Fairbanks Behavioral Health



Aspire Indiana Health

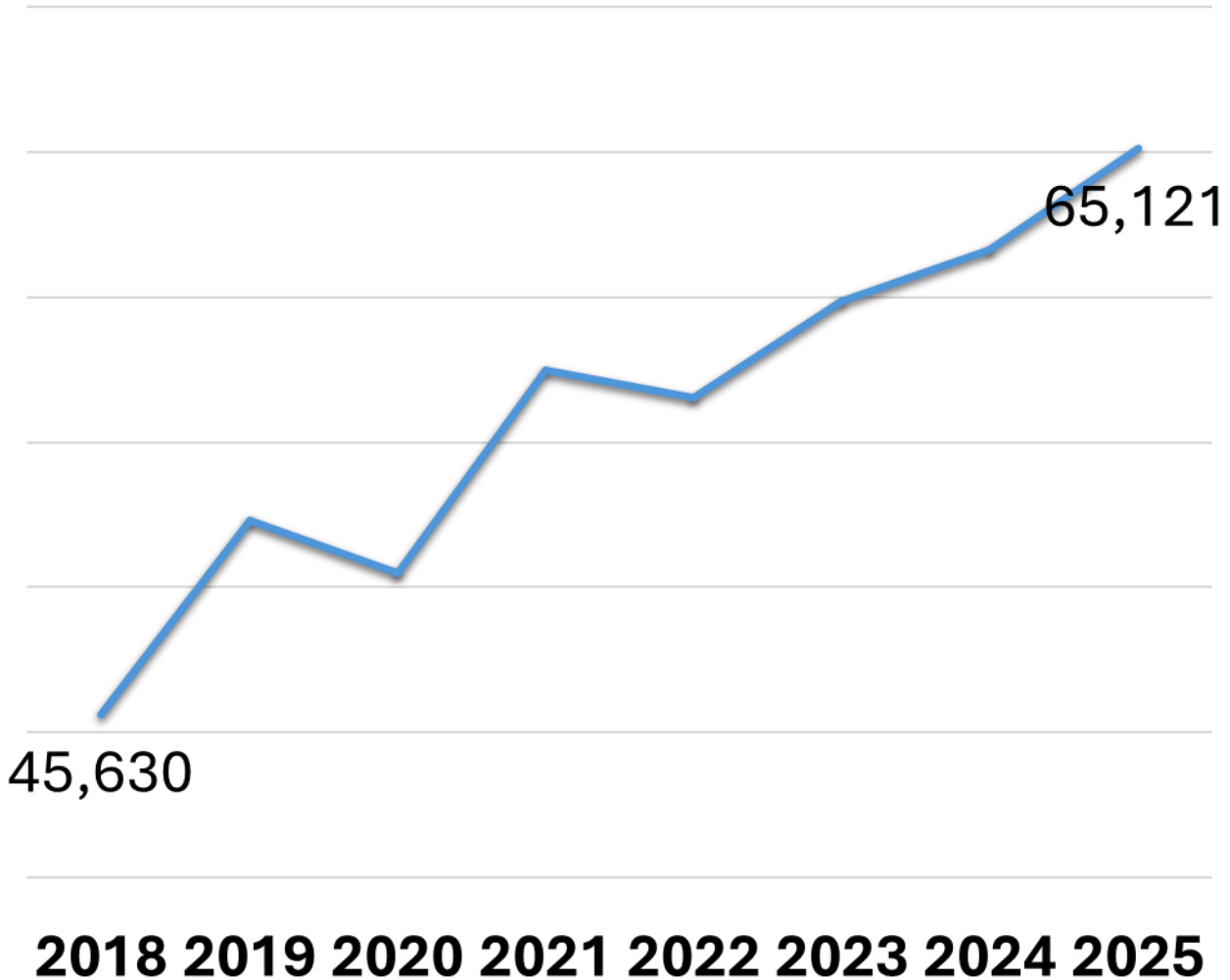
# Housing and Homeless Services

- Marion County Homeless Outreach
- Transitional Housing
- Rapid Rehousing
- Permanent Supportive Housing
- Project-based Section 8 Housing Independent Living for Individuals with a Disability
- Independent Living for Male Residents who are Living a Recovery Lifestyle
- Supported Group Living for Individuals who are Living with a Serious Mental Illness
- SSVF – Veterans and Serious Mental Illness
- Concrete Services Funding

**702** Housing Units  
**978** Individuals



# Increase in Lives Served since 2018



**\$28 MILLION**  
Marion County  
Charity Care  
SFY25

# Thank You

