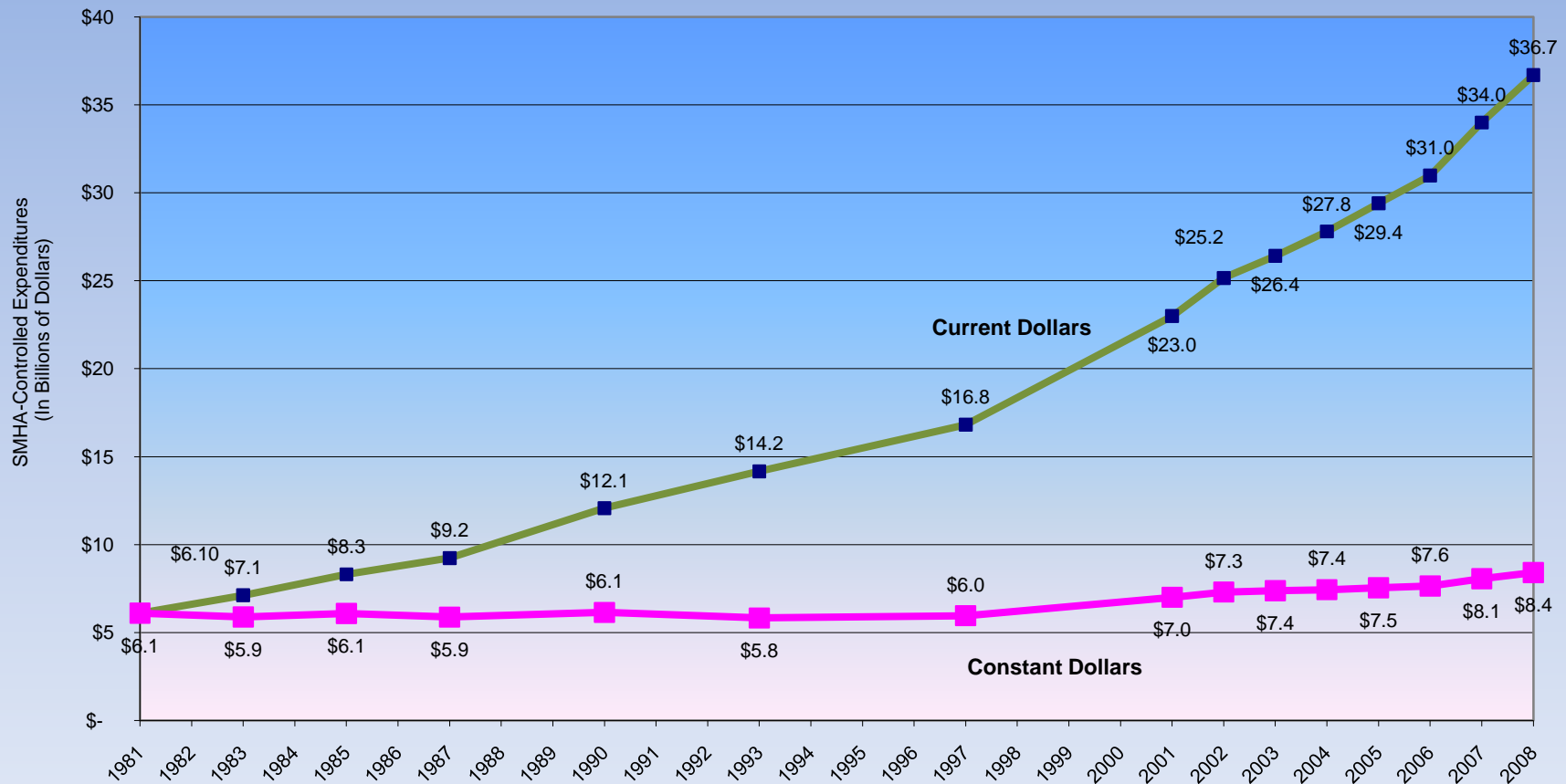


2010 NRI Reports on State Mental Health Systems

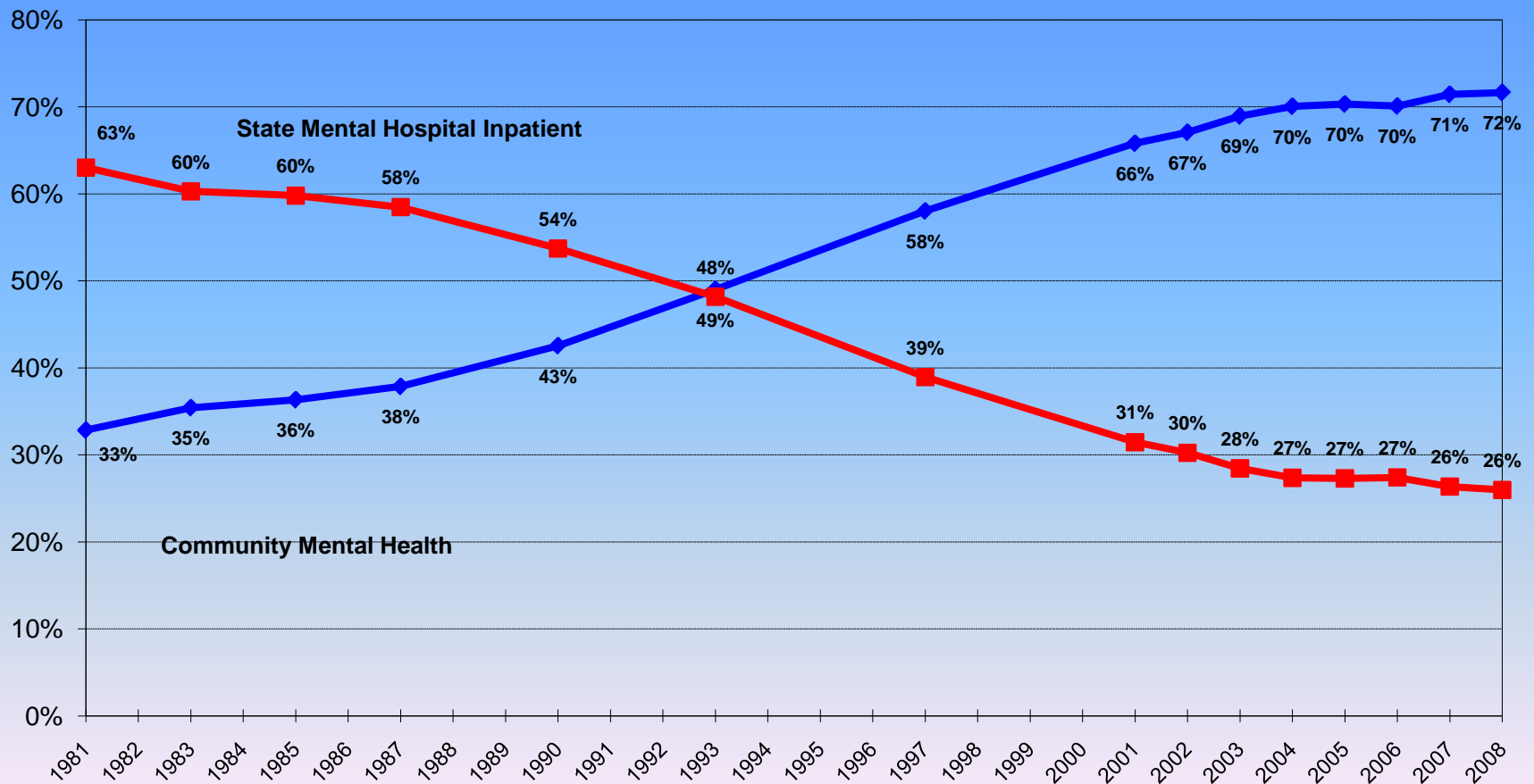
- FY 2008 SMHA-Controlled Revenues and Expenditures Study
 - FY'09 is currently being collected
- Impact of State Budget Shortages on State MH Systems: Fall 2010 Update
- SAMHSA Publication: Characteristics of SMHAs 2010

Trend in SMHA-Controlled Expenditures for Mental Health: FY 1981 to 2008



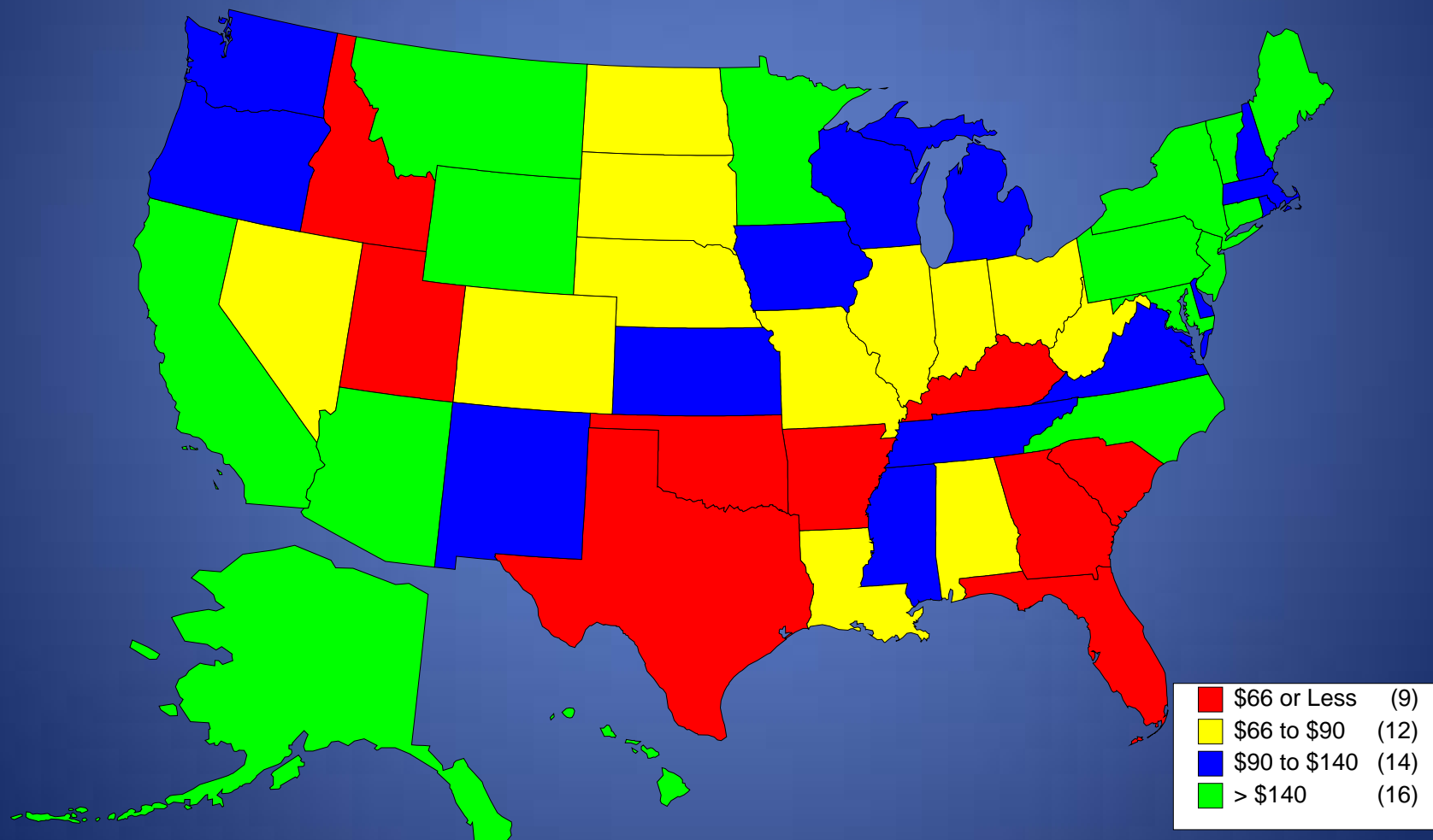
Source: NRI FY 2008 SMHA-Controlled Revenues/Expenditure Study

State Mental Health Agency Controlled Expenditures for State Psychiatric Hospital Inpatient and Community-Based Services as a Percent of Total Expenditures: FY'81 to FY'08



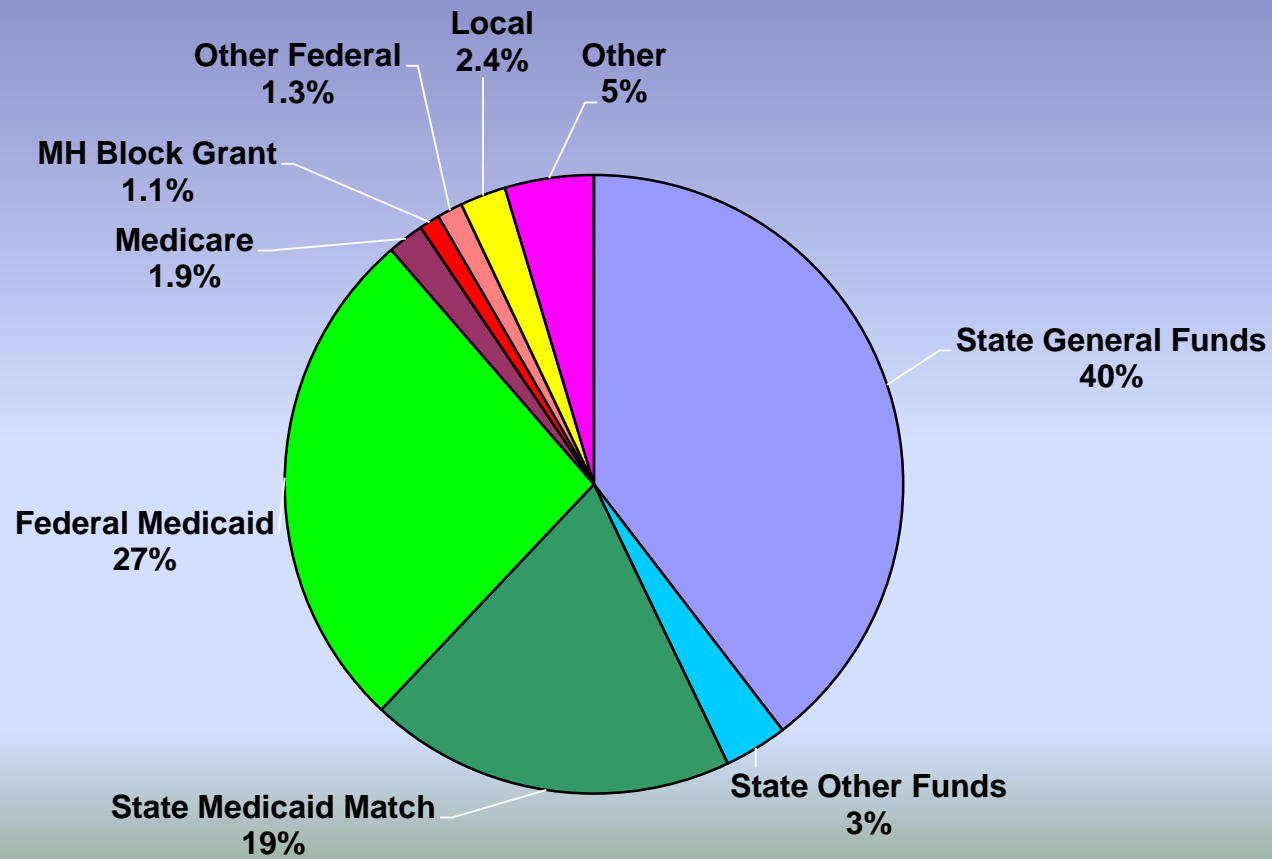
Source: NRI FY 2008 SMHA-Controlled Revenues/Expenditure Study

Total FY 2008 SMHA-Controlled Per Capita Mental Health Expenditures

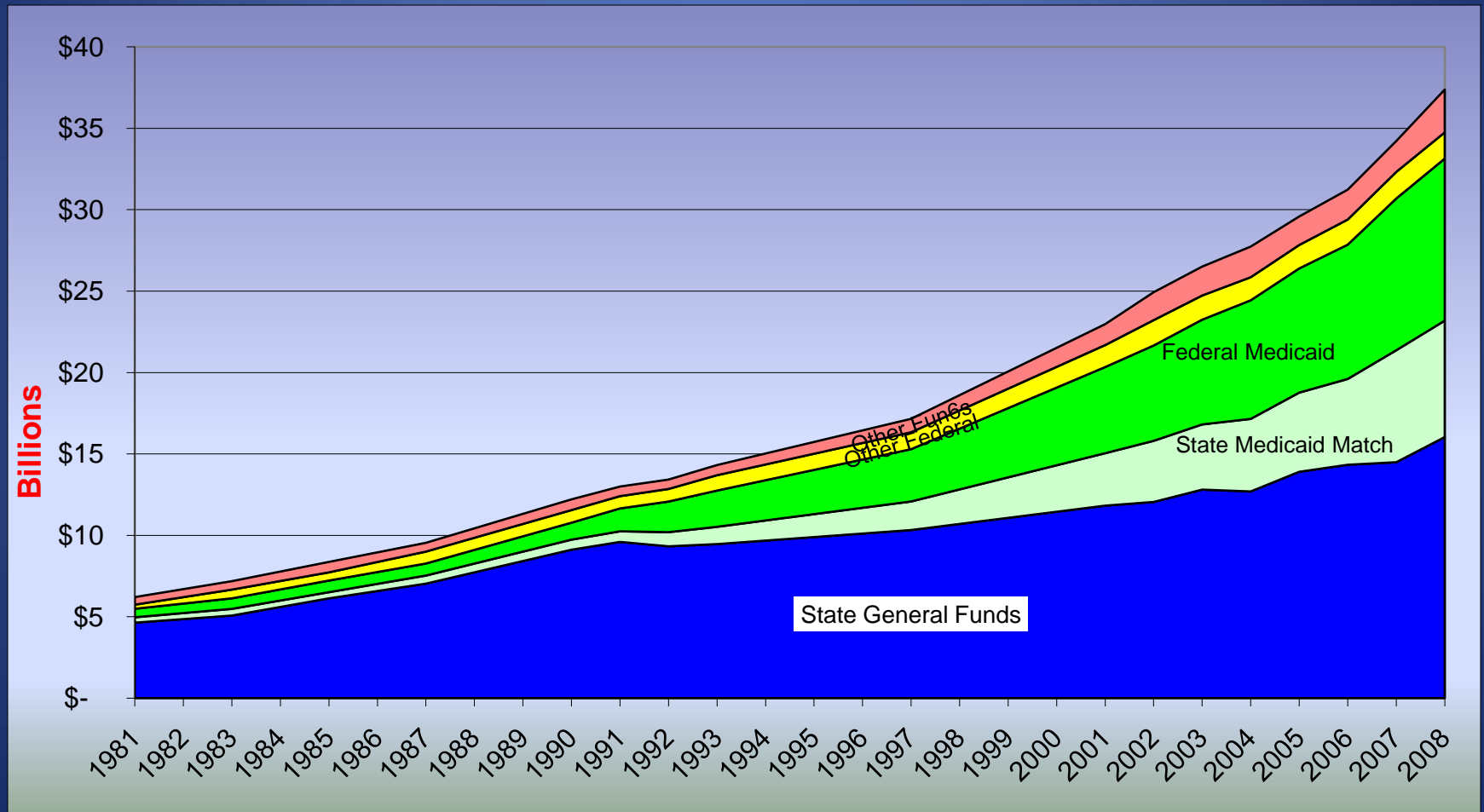


Source: NRI FY 2008 SMHA-Controlled Revenues/Expenditure Study

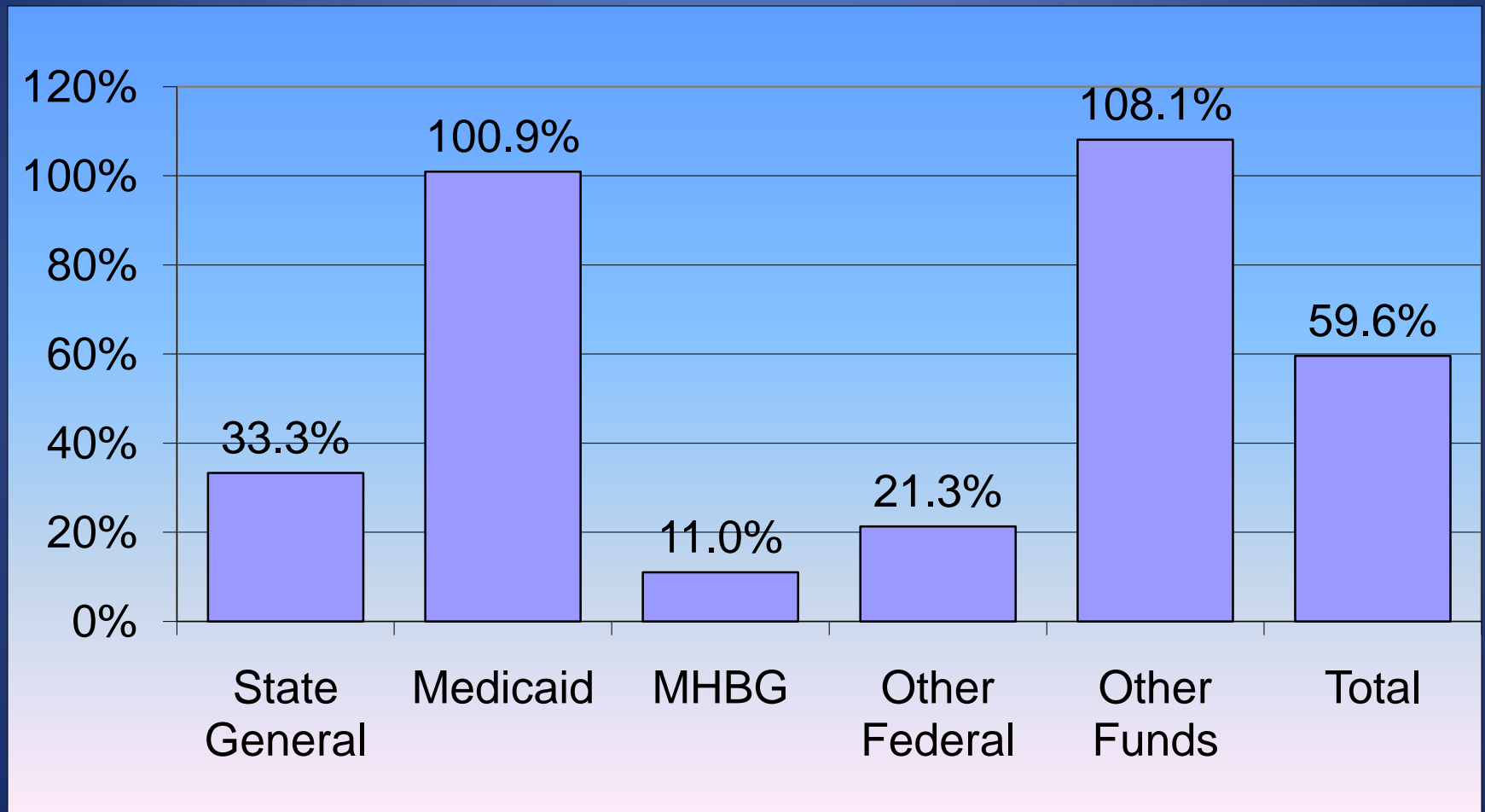
SMHA-Controlled Revenues for Mental Health, FY 2008



SMHA-Controlled Revenues for Mental Health Services: FY 1981 to FY 2008

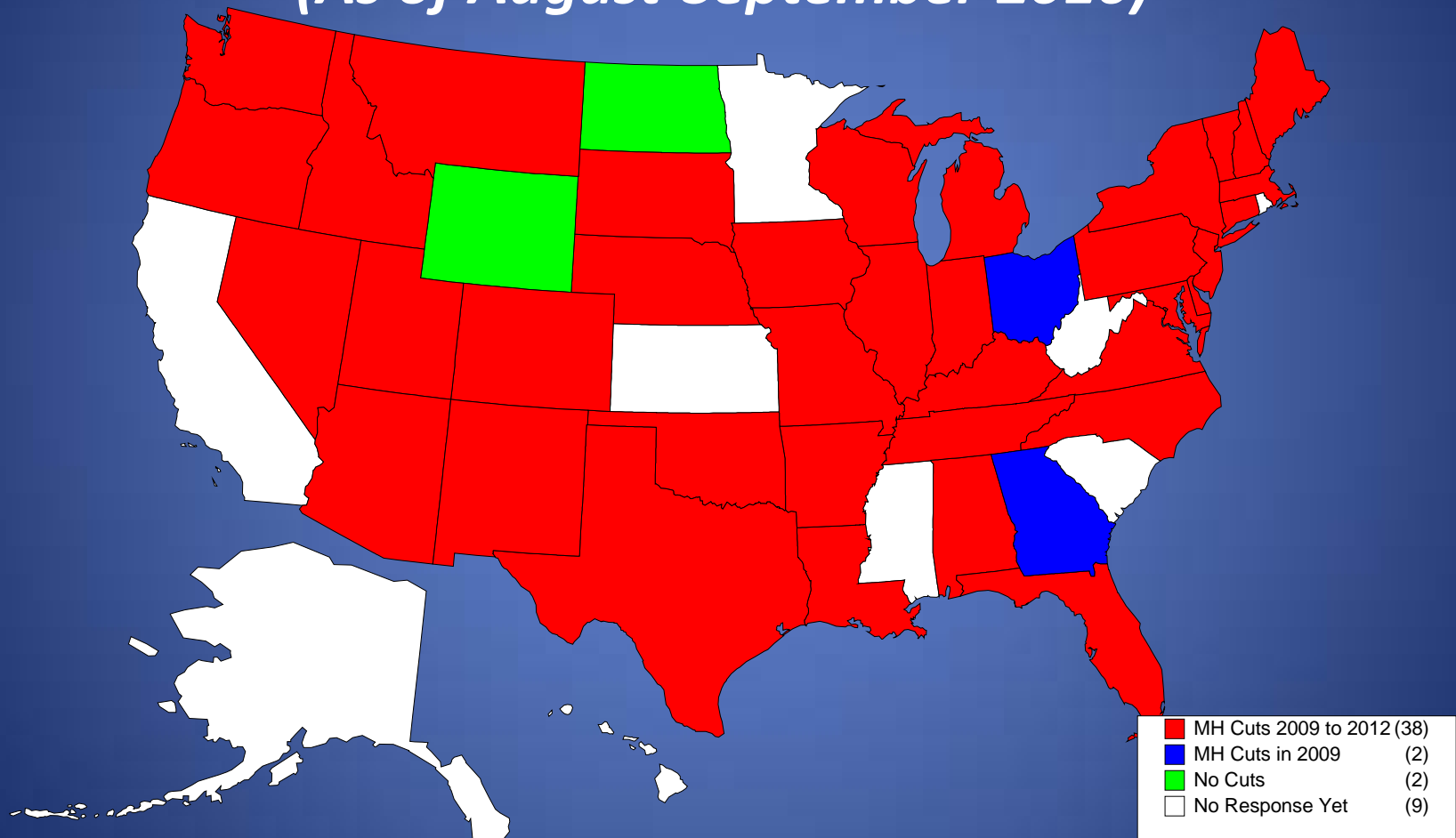


Percent Change in SMHA-Controlled Revenues, FY 2001 to FY 2008



SMHAs with Budget Cuts: Fiscal Years 2010 to 2012

(As of August-September 2010)



Preliminary Results Based on 42 SMHAs Reporting

Level of SMHA Budget Reductions:

FY2009 to FY2012 Total \$2.2 Billion in Cuts

Year	Average	Median	Minimum	Maximum	Total
FY 2009 (35 States)	\$18,979,310	\$10,000,000	\$0	\$107,000,000	\$664,275,843
FY 2010 (33 States)	\$24,058,725	\$12,300,000	\$0	\$203,000,000	\$793,937,917
FY 2011 (31 States)	\$20,812,710	\$11,267,905	\$84,000	\$162,000,000	\$645,194,004
FY 2012 (6 states)	\$12,959,616	\$6,150,000	\$2,194,458	\$32,000,000	\$77,757,695

Preliminary Results based on 42 SMHAs Reporting

Closing State Psychiatric Hospitals & Hospital Beds (2010-2012)

	SMHA Has Closed	SMHA is Considering Closing	Total Closed or Considered
State Psychiatric Hospitals	4 States 5 State Hospitals	4 States 6 State Hospitals	6 States 11 State Hospitals
State Hospital Beds	24 States 2,158 Beds	18 States 1,772 Beds	3,930 Beds*

** 3,930 beds are over 8% of State Psychiatric Hospital Bed Capacity*

Types of Beds SMHAs are Closing	Acute Care	Long-Term Care	Forensic
Children	6 States	4 States	2 State
Adults	12 States	16 States	3 States

- 4 SMHAs were able to retain all the savings from closing state hospital beds to use within their MH System.
- 14 SMHAs were able to retain a portion of savings to use for MH.

Preliminary Results based on 42 SMHAs Reporting

Characteristics of SMHAs: 2010

- SAMHSA Publication from the NRI's State Profiles Project (update of 2007 report)
- Focus on How SMHAs are Organized, Structured, Financed, and Who they Serve
 - SMHA response to Health Care Reform
 - Health-MH integration, screening, promotion, and prevention activities
 - Implementation of EHRs, work with HIEs,
- Draft Individual State summaries will be sent to SMHAs for review in November 2010

SMHA Roles under ACA

- 88% (30 SMHAs) Providing a safety net of services to individuals with SMI without health insurance
- 79% (27 SMHAs) Providing an array of essential Support Services that may not be covered by private insurance as “Medically Necessary”
- 35% (12 SMHAs) Being a provider of MH services that will be reimbursed by private insurers (competing with private providers).
- 79% (27 SMHAs) Providing a MH Leadership function in overseeing the system to insure appropriate services are available
- 39% (14 SMHAs) Working with Health Insurance Exchanges

DIRECT QUESTIONS OR COMMENTS TO:

Ted Lutterman

Director of Research Analysis
NASMHPD Research Institute, Inc.
66 Canal Center Plaza, Ste. 302
Alexandria, VA 22314
703-682-9463
Ted.Lutterman@nri-inc.org