



**Meeting Notes**  
**May 13, 2025**  
**8:30 a.m. - 10:00 a.m.**

**Paso del Norte Health Foundation**  
**221 N. Kansas, 19<sup>th</sup> Floor**  
**El Paso, Texas 79901**  
**Meeting Room C**

**Attendees:**

Laurette Baylon  
Sharon Butterworth  
Andrew Castaneda  
David Chayer  
David Cotchery  
Linda Corchado  
Sandra Day  
Catherine Garcia  
Jennifer Garcia  
Cathy Gaytan  
Gilda Gil  
Daniely Gutierrez  
Cynthia Henry  
Cindy Hernandez  
Iyali Lara  
Vanessa Leon  
Victoria Lopez-Unzueta  
Enrique Mata  
Claudia Munoz  
Dr. Carmen Olivas-Graham  
Kathy Revtyak  
Lisa Saucedo  
Nicole Schiff

**Representing:**

City of El Paso  
PdN Center at Meadows Institute  
Child Crisis Center of El Paso  
Family Services of El Paso  
Veterans Outreach  
Children At Risk  
Paso del Norte Health Foundation  
El Paso County Juvenile Probation Department  
Child Crisis Center of El Paso  
El Paso Child Guidance Center  
Paso del Norte Children's Development Center  
Region 19 Education Service Center  
Paso del Norte Center of Hope  
Emergence Health Network  
Children's Grief Center of El Paso  
Heart Gallery of El Paso  
United Way of El Paso  
Paso del Norte Center at Meadows Institute  
Texas DFPS Child Protective Services  
Socorro Independent School District  
El Paso Children's Grief Center  
Court Appointed Special Advocates (CASA)  
Paso del Norte Center of Hope

Beth Senger  
David Stout  
Daniela Vargas  
Krista Wingate

El Paso Center for Children  
El Paso County Commissioner – Pct. 2  
County of El Paso  
Emergence Health Network

### **Welcome and Introductions**

Cathy Gaytan convened the meeting at 8:35 a.m. and called for introductions.

### **Reflections from the Consortium 2025 Children, Youth and Families Summit and Synergy Session**

Ms. Gaytan called on Enrique Mata to provide an overview of the May 1<sup>st</sup> event. Mr. Mata shared the slides presented during the event by the key presenters. He explained that the gathering allowed community stakeholders to provide input on the current Opportunities for Change and related strategies. Ms. Gaytan asked when the next large gathering would be with an opportunity for stakeholder input. Mr. Mata stated that whenever there is a need for a broader feedback in coordination with the Family leadership Council, a gathering can be developed. Meeting slides are included with these notes.

### **Specialty Care - Respite/Residential Treatment**

Josue Lachica and Enrique Mata provided an overview of the April 29<sup>th</sup> Specialty Care Work Group meeting. They explained that the group is making progress homing in on key gaps and El Paso's true capacity to serve the 10% of children and youth with complex and co-occurring mental health and substance use conditions. They noted that other communities have respite centers developing as part of their Local Mental Health Authority service array. The challenge for El Paso is to identify the optimal funding support necessary to maintain 24/7 care availability for individuals who need wraparound services and for those who require residential treatment. Some examples of funding programs in other areas of the State include funding through LMHAs and several other agencies/local governments helping with funding support. In some regions of the state the local Child Advocacy Centers assist with Care Coordination for specialty populations such as CSEY/human trafficking. Mr. Lachica and Mr. Mata will be in Austin on May 14<sup>th</sup> and will meet with Integral Care on their recent respite improvements. There are also plans to explore the Houston Center model that has been active since 2016 as a full service campus. Ms. Catherine Garcia commented that El Paso County Juvenile Probation Department has some capacity in the Challenge Academy and even serves children from out of town. The Challenge academy can house over twenty individuals for 6 to 9 months. Wraparound care is emphasized. The group discussed the needs and next steps under the work group. Ms. Beth Senger commented on the need to address long term operating funding for the key services in need. The Work Group will be set up with a regular meeting structure to meet on the fourth Tuesday of each month.

### **Other Business –**

- **First Connection Work Group** – Ms. Laura Marquez, Chair of the First Connection work group commented that the group did not have an opportunity to meet since the last FLC

General Meeting, but there is an upcoming meeting in the works and she has been talking with the PdN Center Team on progress indicators including engaging more school districts and exploring ways to work with available data sharing. She responded to questions from the group.

- **Heart Gallery of El Paso** - Ms. Vanessa Leon of The Heart Gallery of El Paso commented that she has been strategizing with her Board and with the PdN Center after the first meeting of the new work group focused on Foster Care. The group's charge is aligned with the Heart Gallery's overarching mission and objectives. The group next steps will include some additional strategic community stakeholder invitations to continue progress addressing foster care and post adoption needs. The group recognized the Heart Gallery's first fundraising event as a success.
- **First Offender project** - Dr. Carmen Graham provided an overview of the progress to develop a First Offender Program for youth who have committed an offense that could cause lifelong damage to their career paths. The program in collaboration with the Juvenile Justice Center and the County Attorney's Office is due to begin in the fall of 2025. The group entered into a discussion on the topic and several organization leaders shared their perspective. Socorro Independent School District was recognized for its efforts to pilot this program. It is hoped that the program will be replicated in other school districts as data are gathered and shared. Dr. Graham also commented that the schools are moving to have first offenses (e.g., fight, nicotine vape) addressed on each individual campus instead of quickly moving to exclusionary school to prevent youth from falling completely out of programs such as early college high school. She states social media is an ongoing concern with "challenges" that lead to juvenile delinquency being promoted by some social sites.

#### Community Updates -

- Join **NAMI El Paso** for **Mental Health Night at the Chihuahuas** as the Chihuahuas take on the Tacoma Rainiers on **Thursday, May 22<sup>nd</sup>**. Purchase your tickets through the link on [NAMI El Paso's event page](#) and you will be invited to join the Pre-Game Parade and receive a special EP Mental Health Awareness Green Ribbon! A portion of each ticket purchased through this offer will also go back to support our work. Let's Strike out the Stigma!
- **Family Service of El Paso** is hosting its annual **Mental Health Stars of El Paso event** on **May 28<sup>th</sup> from 6:00 PM – 9:00 PM at 9050 Viscount Blvd, 79925**. The event will help provide funding for the organization's mental health programs and to recognize mental health leaders across the greater El Paso community. **For more information contact David Chayer at: [DChayer@familyserviceofelpaso.org](mailto:DChayer@familyserviceofelpaso.org)**.
- **El Paso Child Guidance Center** invites you to join them on **May 28<sup>th</sup>, at 11:00 am at 2701 East Yandell, 79903, for a special Ribbon Cutting Ceremony** as they celebrate the launch of their newly renovated building and continued commitment to the mental health and well-being of our community. This milestone represents more than just a new space—it's a

celebration of growth, community, and the partnerships that make their mission possible.

**For more information contact Rosie Salas at: 915-562-1999 ext. 2245 or [rsalas@epcgc.org](mailto:rsalas@epcgc.org)**

- It was noted that the meeting notes for all El Paso Behavioral Health Consortium Councils and Work Groups can be found at: [El Paso Behavioral Health Consortium – Healthy Paso Del Norte](#) . If anyone has trouble accessing notes, please contact Enrique Mata at [emata@mmhpi.org](mailto:emata@mmhpi.org) or Josue Lachica at [jlachica@mmhpi.org](mailto:jlachica@mmhpi.org) .

**Adjourn** – Cathy Gaytan Adjourned the meeting at 9:46 am



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# FLC May 13th Agenda:



**Welcome and Introductions**



**Reflections from the Consortium 2025 Children, Youth and Families Summit and Synergy Session**



**Specialty Care - Respite/Residential Treatment**



**Other Business**



- **First Connection Work Group**



**TCHATT/CPAN**



- **Heart Gallery of El Paso**



- **First Offender project**



- **Strong Families**



**Adjourn**



# Reflections from the Consortium

## 2025 Children, Youth and Families

### Summit and Synergy Session

# El Paso County Behavioral Health Assessment: Brief Quantitative Data Update on Children and Youth

May 1, 2025

# Purpose

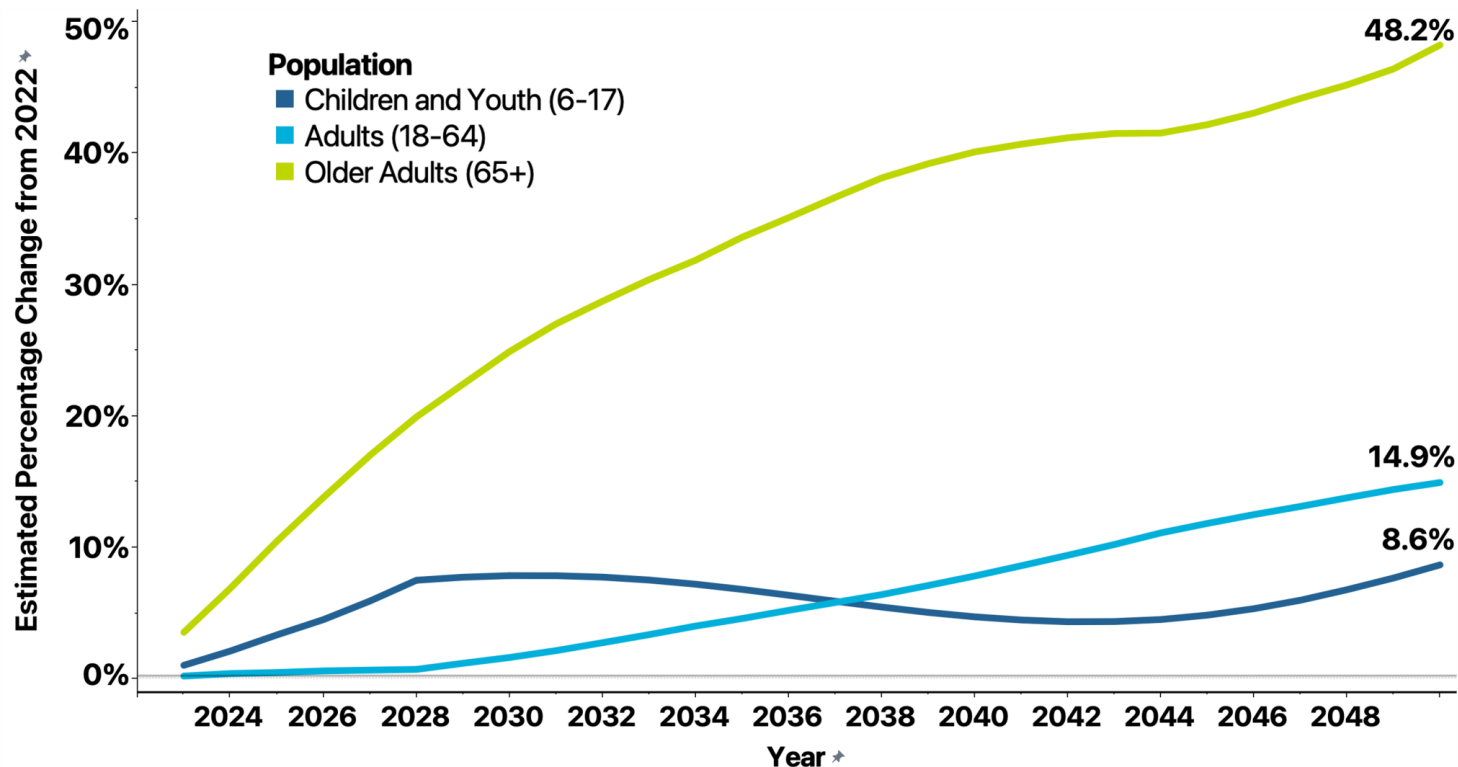
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Today, we will present updated data on El Paso's mental health needs and system use to inform breakout discussions on the community's future needs.

These data represent a preview of the Meadows Institute's full report to be released this summer. The full report will include updated data on the broader continuum of care for all age groups.

# El Paso County Population Changes<sup>1, 2</sup>

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1. Population data from U.S. Census Bureau. (2023, December). American Community Survey 2018-2022 5-year data release. [www.census.gov/data/developers/data-sets/acs-5year/2022.html](https://www.census.gov/data/developers/data-sets/acs-5year/2022.html)
2. Population projections are generated using the American Community Survey 2018-2022 5-year estimates and expected rates of change from the Texas Demographer Population Projections Program, 2018. <https://demographics.texas.gov/data/tpepp/projections/>

# Prevalence of Mental Health Conditions: Children and Youth (6-17)

- **38%** of children and youth ages 6-17 have any mental health illness
- **8%** of children and youth have a Serious Emotional Disturbance (SED). **More than half** live in poverty
- **42,000 young people** in El Paso County have experienced at least one Adverse Childhood Experience (ACE)

	Age Range	Prevalence
<b>Total Population – Children and Youth<sup>1</sup></b>	<b>6–17</b>	<b>160,000</b>
Children Population	6–11	75,000
Youth Population	12–17	80,000
<b>All Mental Health Needs (Mild, Moderate, and SED)<sup>2</sup></b>	<b>6–17</b>	<b>60,000</b>
Mild Conditions	6–17	35,000
Moderate Conditions	6–17	14,000
Serious Emotional Disturbance (SED)	6–17	12,000
SED in Poverty	6–17	7,500
At Risk of Out-of-Home / Out-of-School Placement <sup>3</sup>	6–17	750
<b>Adverse Childhood Experiences (ACEs)<sup>4</sup></b>		
Population with 1 ACE	6–17	42,000

1. U.S. Census Bureau. (2024, December). American Community Survey 2018-2022 5-year data release.

2. The Meadows Institute (2024).

3. Based on our prior work in developing community-based service arrays in response to system assessments (in WA, MA, CT, NE, and PA), we estimate that one in 10 children with SED in poverty would require time-limited, intensive home and community-based services to reduce risk of out-of-home or out-of-school placement.

4. The estimated number of El Paso children and youth who experience adverse childhood experiences (ACEs) varies considerably from our 2021 estimate (110,000 children and youth ages zero to 17). The rate we currently use to generate this estimate is based upon the latest data from a national sample of youth from a slightly more limited age group (ages 6-17 vs. 0-17), resulting in a smaller number of children and youth estimated to experience ACEs in the present report compared to 2021.

# Mortality related to Mental Health in Children, Youth and Transition Age Youth

# Change in El Paso County Mortality Among Children, Youth, and Young Adults (Ages <25)<sup>1,2</sup>

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**Suicide:** Deaths from suicide among El Paso youth under age 25 increased by **180%** between 2010 (10 deaths) and 2023 (a record-high of 28 deaths)

## **Drug overdose/Accidental Poisoning:**

The number of drug overdose deaths among El Paso youth **tripled** between 2019 and 2020 (from <10 in 2019 to a record-high of 29 in 2020), before declining slightly in subsequent years.

<i>Cause of Death among EP Children, Youth, and Transition Age Youth (&lt;25)</i>	2019	2023	Change
Deaths from Suicide	21	28	↑ 33%
Deaths from Drug Overdose/ Accidental Poisoning	<10	17	↑ >88%

1. Centers for Disease Control and Prevention, National Center for Health Statistics. (2024). Deaths from suicide are classified using underlying cause-of-death ICD-10 codes U03, X60–X84, and Y87.0. Overdose/accidental poisoning deaths are classified using underlying cause-of-death ICD-10 codes: X40–44, X60–64, X85, and Y10–Y14.

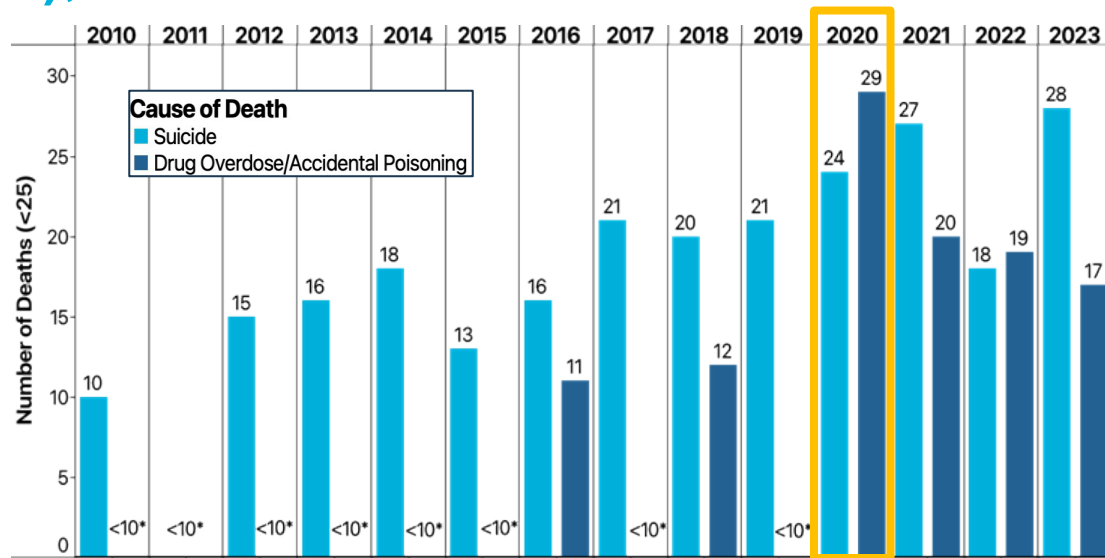
2. Regions with fewer than ten (1-9) deaths are suppressed by the CDC to protect decedent confidentiality.

# Trends in Suicide & Drug Overdose/Accidental Poisoning Deaths in El Paso County (Ages <25), 2010–2023<sup>1,2</sup>

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**Suicide:** In 2023, the rate of deaths from suicide among El Paso youth was **higher than the Texas state rate** (8.8 vs. 6.6 per 100,000).

**Drug Overdose:** The drug overdose death rate has generally mirrored the statewide rate with one exception: In 2020, the rate of deaths from drug overdose **spiked to more than double the state average** (9.2 vs 4.2 per 100,000).



1. Centers for Disease Control and Prevention, National Center for Health Statistics. (2024). Deaths from suicide are classified using underlying cause-of-death ICD-10 codes U03, X60–X84, and Y87.0. Overdose/accidental poisoning deaths are classified using underlying cause-of-death ICD-10 codes: X40–44, X60–64, X85, and Y10–Y14.

2. Years with fewer than ten (1-9) deaths are suppressed by the CDC to protect decedent confidentiality.

# Emergency Department and Inpatient Care Use

Among El Paso Children, Youth, and Transition - Age Youth

# Emergency Department and Inpatient Utilization

No changes in the number of ED encounters for primary behavioral health reasons at El Paso facilities, but the rate at which children/youth were admitted to inpatient facilities from EDs more than doubled.

Emergency Department (ED) and Inpatient Utilization	2019	2022	Change
Number of Child and Youth (<18) ED Encounters for Primary Behavioral Health Conditions	836	833	No Change
% of Encounters that were El Paso County Residents	88%	89%	No Change
# Admitted to an Inpatient Facility from an El Paso County ED	154	376	↑ 145%

1. Texas Health Care Information Collection (THCIC) January 2019 – December 2022 discharge records.

# Emergency Department (ED) Utilization, 2019-2022

- ED use at El Paso County facilities fell **31%** from 2019 to 2020 and has only approached pre-COVID-19 levels in 2022.

ED Visit Category	2019	2020	2021	2022
Primary Mental Health Diagnosis	592	386	456	513
Primary Substance Use Disorder (SUD) Diagnosis	244	191	216	320
<b>All Behavioral Health ED Visits</b>	<b>836</b>	<b>577</b>	<b>672</b>	<b>833</b>

- ED visits for primary mental health diagnoses dropped by **13%** between 2019 and 2022, whereas SUD visits have increased by **31%** during the same time.

1. U.S. Census Bureau. (2023, December). American Community Survey 2018-2022 5-year estimates. [www.census.gov/data/developers/data-sets/acs-5year/2022.html](https://www.census.gov/data/developers/data-sets/acs-5year/2022.html)

2. Texas Hospital Inpatient, Outpatient, and Emergency Discharge Research Use Data Files. (2019-2022). Texas Department of State Health Services. Austin, Texas.

3. Data in this table is limited to patients who visited El Paso County emergency departments, regardless of their residency. Record counts include behavioral health encounters identified by a primary psychiatric or substance use-related diagnosis code within the following Clinical Classifications Software Refined (CCSR) categories: MBD001-MBD011, MBD013, MBD013, MBD017-MBD034. We modified these CCSR categories so that each ICD-10 code is assigned only one CCSR category. A full list of ICD-10 codes are available upon request. All values between 1 and 9 are labeled as "<10" to protect confidentiality and may result in totals differing between tables.

# Changes in El Paso County's Psychiatric Inpatient Capacity Over Time

Pediatric Psychiatric Bed Capacity	2019	2022	Change
<b>Number of Child and Youth Inpatient Psychiatric Beds Available</b>	<b>15</b>	<b>36</b>	<b>↑ 21 Beds</b>
El Paso Behavioral Health System	8	8	No Change
El Paso Psychiatric Center	7	0	↓ 7 Beds
Rio Vista	0	28	↑ 28 Beds
Providence Memorial Hospital	0	0	No Change
<b>Adult Psychiatric Bed Capacity</b>			
<b>Number of Adult Inpatient Psychiatric Beds Available</b>	<b>295</b>	<b>286</b>	<b>↓ 9 Beds</b>
El Paso Behavioral Health System	136	136	No Change
El Paso Psychiatric Center	67	74	↑ 7 Beds
Rio Vista	80	64	↓ 16 Beds
Providence Memorial Hospital	12	12	No Change
<b>Total Psychiatric Bed Capacity</b>	<b>310</b>	<b>322</b>	<b>↑ 12 Beds</b>

In 2022, El Paso Behavioral Health System had an **average daily census of 36** children and youth (<18), but **only 8 pediatric beds**.

# Inpatient Psychiatric Utilization among Children/Youth: Number of Unduplicated Psychiatric Patients, 2022<sup>1,2</sup>

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El Paso County children and youth use inpatient behavioral health services significantly more than the Texas average across all age groups.

- Inpatient service use is **51% higher** in El Paso County compared to the state overall.
- This trend is especially notable in the children aged 6 to 11 (72% higher)

Age Group	El Paso County Residents		Texas Residents		Ratio
	Patients	Rate per 100,000 Residents	Patients	Rate per 100,000 Residents	El Paso / Texas
Ages 6 – 11	263	344	5,011	201	1.72
Ages 12 – 17	1,379	1,697	29,948	1,160	1.46
All Children (0-17)	<1,652	720	35,132	475	1.51

1. U.S. Census Bureau. (2023, December). American Community Survey 2018-2022 5-year estimates.  
 2. Texas Health Care Information Collection (THCIC) January 2019 – December 2022 discharge records.  
 3. Total across all ages masked due to small cell size of children ages 0 to 5.

# Change in Inpatient Psychiatric Bed Use among Children and Youth | 13

- The number of admissions to El Paso's inpatient psychiatric beds increased by 26% between 2019 and 2022.
- A small number of El Paso resident children/youth were seen outside of El Paso in 2019; the number doubled by 2022 (but was still <10).

Children/Youth (<18)	2019	2022	Change
Admissions to El Paso County Psychiatric Inpatient Beds	1,932	2,431	↑ 26%
% of Admissions that were El Paso County Residents	86%	91%	↑ 6%
# of Resident Admissions to Inpatient Beds Outside of El Paso County	<10	<10	Doubled but still <10

# Patterns Observed in Child/Youth Inpatient Admissions at El Paso Facilities<sup>14</sup>

- El Paso Psychiatric Center treated 194 children and youth for inpatient admissions in 2019, but **zero** in 2022.
- Rio Vista Behavioral Health – a private, freestanding psychiatric facility - increased the number of admissions by **267%** between 2019 and 2022.
- **304% increase** in Tricare / other government payers

Payer	Percent of Child Admissions, 2022	
	Rio Vista Behavioral Health	El Paso Behavioral Health System
Commercial	23%	28%
Medicaid	<1%	71%
Other Government	75%	2%
Self Pay	<1%	0%

# Behavioral Health Workforce

## Changes in Workforce

Compared to 2020, the number of psychiatric nurse practitioners has tripled, licensed chemical dependency counselors have nearly doubled, and the availability of psychiatrists has remained stable.

Behavioral Health Workforce	2020	2024 <sup>2</sup>	Change
Psychiatrists	67	66	No Change
Psychologists	92	44*	↓ 52%
Licensed Chemical Dependency Counselors	148	277*	↑ 87%
Social Workers	652	613*	↓ 6%
Licensed Professional Counselors	462	548*	↑ 19%
Psychiatric Nurse Practitioners	54	148	↑ 174%

1. Texas Medical Board Open Records (2024).

2. The 2024 Texas provider workforce data allowed for select provider types, here marked with an \*, to mask their geographic location. Numbers here may be underreporting actual provider counts in El Paso county.

# El Paso County Behavioral Health Workforce (2024)<sup>1</sup>

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- El Paso County has **fewer** behavioral health providers per capita and fewer children and youth behavioral health providers than Texas.
- Notably, the county has a limited number of key professionals: 44 Licensed Psychologists, 36 Licensed Marriage and Family Therapists (LMFTs), and 41 Licensed Specialists in School Psychology.

Provider Type	El Paso County		Texas (Statewide)	
	Number of Providers	Average Residents / Provider	Number of Providers	Average Residents / Provider
<b>Licensed Behavioral Health Physicians</b>	<b>71</b>	<b>11,000</b>	<b>3,671</b>	<b>7,500</b>
Psychiatrists	66	12,000	3,470	8,000
Children and Youth Behavioral Health Physicians	20	8,000	1,034	5,000
<b>Non-Physician Providers</b>				
Licensed Psychologists	44	18,000	5,069	5,500
Licensed Chemical Dependency Counselors	277	2,900	9,510	2,900
Licensed Clinical Social Workers	613	1,300	21,309	1,300
Licensed Professional Counselors	548	1,500	25,396	1,100
Licensed Marriage and Family Therapists	36	22,000	3,284	8,500
Licensed Specialists in School Psychology	41	19,000	3,268	8,500
Psychiatric Nurse Practitioners	148	5,500	4,985	5,500
Psychiatric/Substance Use Registered Nurses	366	2,200	10,232	2,700

1. Texas Medical Board Open Records (2024).

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Senior Vice President of Population Health  
[jgonzalez@mmhpi.org](mailto:jgonzalez@mmhpi.org)



**THE HACKETT CENTER**  
FOR MENTAL HEALTH

MEADOWS  
**MENTAL HEALTH**  
POLICY INSTITUTE

**PASO *del* NORTE CENTER**  
Meadows Mental Health Policy Institute

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THE HACKETT CENTER

CENTER FOR CHILD  
AND FAMILY WELLNESS

CENTER FOR JUSTICE  
AND HEALTH

CENTER FOR HEALTH  
SYSTEM TRANSFORMATION

# El Paso Behavioral Health Consortium

**2025 Children, Youth and Families Summit**

Legislative and Congressional Update

Nelson Jarrin, JD | John Snook, JD | May 1, 2025

# Texas Legislature Update

# The Commitment at the Texas Capitol

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Session	Medicaid Behavioral Health Budget	Total Behavioral Health Budget	Cumulative Increase	% Increase from 84th
84th (2015)	\$3.00B	\$6.59B	-	-
85th (2017)	\$3.52B	\$7.60B	\$1.01B	15%
86th (2019)	\$3.31B	\$8.23B	\$1.64B	24%
87th (2021)	\$3.68B	\$8.86B	\$2.27B	34%
88th (2023)	\$3.48B	\$11.68B	\$5.09B	77%
89th (2025)*	\$3.56B	\$10.34B		

- Total behavioral health funding in the 2024-25 General Appropriations Act totaled **\$9.37 billion**. The current **Senate version** of the 2026-27 General Appropriations Act (“the budget”) totals **\$10.04 billion**, while the current **House version** totals **\$10.16 billion**.
- The supplemental budget, HB 500 (Bonnen), currently includes **\$182.9 million** more for **inpatient facilities**.

# Budget Similarities

**Both the House and Senate versions of the budget provide:**

- Level funding for all **mental health grant programs**:
  - \$20M for the **Texas Veterans + Family Alliance**
  - \$90M for the **Mental Health Grant Program for Justice-Involved Individuals**
  - \$55M for the **Community Mental Health Grant Program**
  - \$33M for the **Healthy Community Collaboratives**
  - \$30M for the **SMART Innovation Grant Program**
- Level funding for 24 **Multisystemic Therapy (MST) teams**.
- \$281.4M for the **Texas Child Mental Health Care Consortium**.
- \$28M for the **Loan Repayment Program for Mental Health Professionals**.
- \$71.3M increase for **Graduate Medical Education** (residency slots).

# Youth Crisis Outreach Teams (YCOTs)

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YCOTs are considered the best-practice model for addressing immediate and crisis-level mental health needs among children, youth, and families.

- Designed to work with families to **stabilize high-risk situations** (urgent and emergent) and provide a **30-to-90-day bridge** to engage in ongoing care.
- Staffed by professionals who know how to **work with families and child-serving systems**.
- Successful YCOTs lead to **hospital diversion, reduced juvenile justice involvement, reduced foster care entry and placement disruptions, and decreased truancy and missed school days**.

*The House version of the budget includes \$72.8 million for YCOT (\$58.8M increase), and the Senate version includes \$54 million for YCOT (\$40M increase).*

# Mental Health Workforce

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- HB 1716 (Darby) – authorizes Medicaid reimbursement for **LPC Associates, LMFT Associates, and LMSWs** while completing their clinical supervision hours. *The Texas House passed HB 1716 on April 24.*
- SB 646 (West) – expands the **Loan Repayment Program for Mental Health Professionals** to **LPC Associates, LMFT Associates, and LMSWs** and raises the repayment assistance caps.
- The House version of the budget provides **\$5 million** for 88(R) HB 400, the **Behavioral Health Innovation Grant Program**, focused on community colleges.
- In February, HHSC published rules to expand the qualifications required to serve as a **Qualified Mental Health Professional**.

# State Hospital Redesign and Inpatient Capacity Investments: 2017-2025

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- In 2017, the **85th Texas Legislature** committed to an ambitious **three-phase plan**, beginning with an **initial \$300 million** commitment.
- The Texas Legislature approved funding for state hospital and inpatient facility projects in **four successive legislative sessions**.
- Through 2023, **total investment** in modernizing Texas' state hospital system and expanding inpatient capacity **exceeded \$3.6 billion**.

***HB 500 (Bonnen) includes \$150 million for the new El Paso State Hospital, \$10 million for planning in Brazoria County, \$10 million for planning in Tarrant County, and \$12.9 million for renovations at the Harris County Psychiatric Center.***

# Facility Operations Funding

**The Texas Legislature is transitioning to funding operations at completed hospitals projects to bring new beds online.**

- Both the House and Senate versions of the budget include **\$165.9 million** to staff **additional state hospital capacity** at Austin, Kerrville, Rio Grande, Rusk, San Antonio, and Terrell as well as staff new builds in Lubbock and Amarillo.
- The Senate version of the budget provides **\$78.8 million** for rate increases and operations funding for expanded capacity at **community mental health hospitals**, while the House version provides **\$99.7 million** for community hospitals.

# Dementia Prevention Research Institute of Texas

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**Lt. Governor Dan Patrick named the Dementia Prevention Research Institute of Texas (DPRIT) as one of his top legislative priorities.**

- **SB 5 (Huffman) would establish DPRIT to expedite innovation in research on dementia, Alzheimer's, Parkinson's and related disorders, enhance the potential for a medical or scientific breakthroughs, and enhance the research superiority of Texas.**
- **SJR 3 (Huffman) proposes \$3 billion in funding for DPRIT over a 10-year period. This must be approved by Texas voters in November.**
- *The Texas Senate passed SB 5 and SJR 3 (30-1) in March.*
- *The Texas House passed SB 5 (121-23) and SJR 3 (123-21) in April.*

# Federal Update

# 119<sup>th</sup> Congress – House of Representatives

- Republicans will hold a five-seat majority in the House, one of the smallest margins of control in recent history.
- This narrow majority is further complicated by Trump's appointment of several Representatives to other posts in the administration.

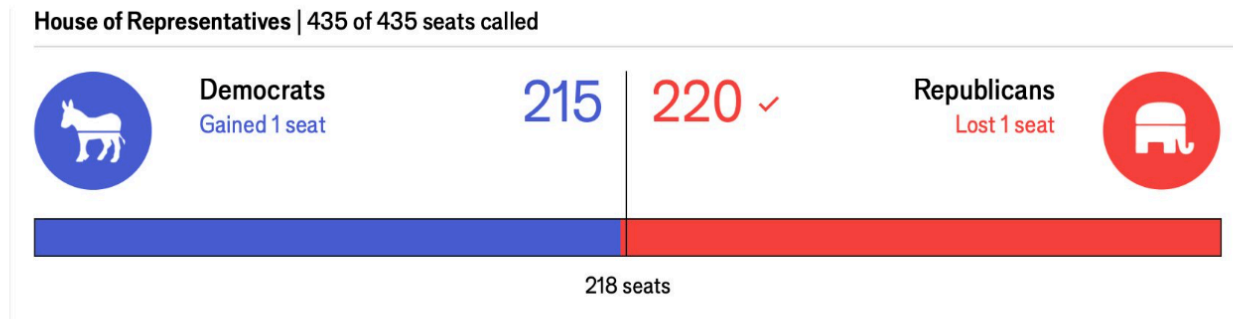
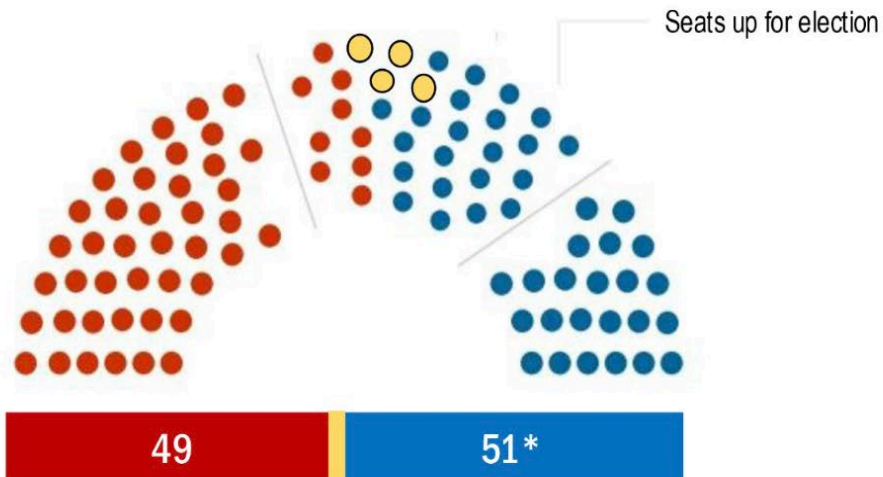


Image credit: The Economist

# 119<sup>th</sup> Congress – Senate

## 118<sup>th</sup> CONGRESS: SENATE

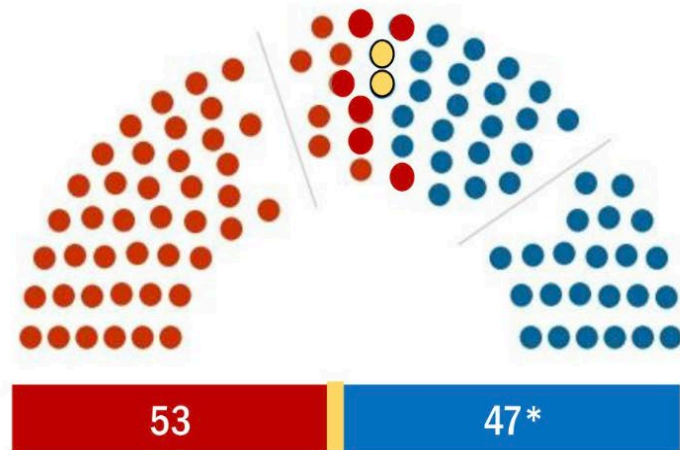
- Democrats were in control with 51/49 floor majority



*\*Four seats held by independents who caucus with Democrats*

## 119<sup>th</sup> CONGRESS: SENATE

- Republicans gain control of the Senate



*\*Two seats held by independents who caucus with Democrats*

# Reconciliation

# Reconciliation: Political Realities

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- Significant pushback on Medicaid as a tax cut pay-for.
- House can effectively lose only a few votes and move forward.
- Medicaid is a relatively efficient federal program Actual fraud & waste would not come close to the numbers needed.
- Both Speaker Johnson and E&C Chair Guthrie have been quoted as saying Medicaid benefits cuts are off the table – *what does that mean?*
- Even work requirements & provider taxes could pose their own political problems
- 12 House members in key purple states are expressing strong concerns – *SALT in the wound?*
- Losses in NY & PA alone would swing House
- Governors & Medicaid administrators have played this game before - 2017
- Senate skinny resolution provides a potential offramp & ACAPTC
- Missouri as a bellwether – Senator Hawley
- Polling is showing concerns & stock market is shaky; Virginia in 2025

David Valadao (R-CA) “*What can pass the Senate? Don’t ask a bunch of us in the House just to vote for something that will fail in the Senate and/or get vetoed by the president on things that we’re very, very concerned with,*” he said. “*It’s a dangerous situation.*”

# Key federal funding milestones & decision points: Reconciliation

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## February 2025

House adopts budget resolution

## April 5

Senate adopts budget resolution

## April 10

House adopts Senate Amendment

## April 29 onward

Committee markups schedule

## May 7

Energy & Commerce Markup

## July 4

New tentative deadline for bill finalization

## Meanwhile:

- President's budget
- Debt ceiling
- Appropriations
- Q1 GDP



# Specialty Care - Respite/Residential Treatment



# Other Business

 **May 22<sup>nd</sup> NAMI El Paso Day with  
Chihuahua's Baseball!**



# Other Business



## NEXT MEETING



**July 8, 2025, 8:30 am**



**ADJOURN**