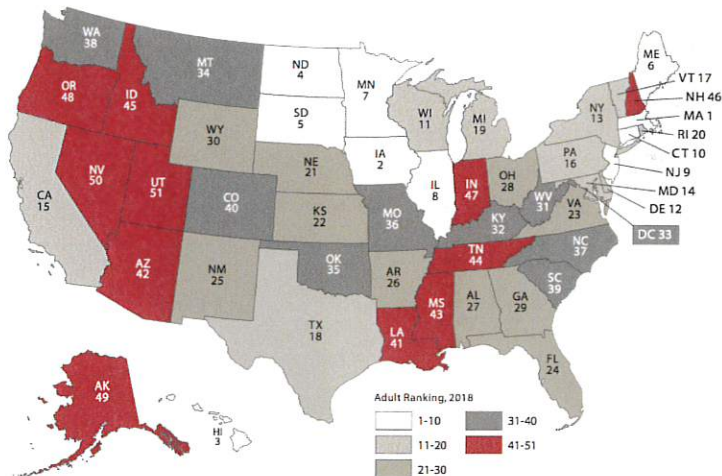


# HB 32 - Crisis Services Amendments

Sponsor: Representative Eliason

## Utah Ranks 51st in the nation for adult mental health measures



Kern C. Gardner Policy Institute and the Utah Hospital Association

## MENTAL ILLNESS IN UTAH

The demand for mental healthcare in Utah is increasing with over 100,000 adults in Utah experience serious mental illness (SMI). 1 in 5 Utahns experience poor mental health and the demand for services among youth is increasing. Suicide is currently the leading cause of death among Utahns ages 10-24.

### THIS BILL WILL:

- Create a behavioral health receiving center program to provide mental health crisis services to individuals experiencing a mental health crisis
- Receiving centers can divert many individuals from jails and emergency rooms, reducing the healthcare and criminal justice costs
- Expand the mobile crisis outreach team grant program to fund additional mobile crisis outreach teams in rural counties

- Require the Division of Substance Abuse and Mental Health to implement a statewide warm line
- Require the Department of Human Services to establish a statewide stabilization services plan and standards for providing stabilization services to children and families
- Require the Behavioral Health Crisis Response Commission to study and make recommendations regarding implementation of the statewide warm line

# 50%

of adults in Utah with mental illness did not receive mental health treatment

More than

# 100,000

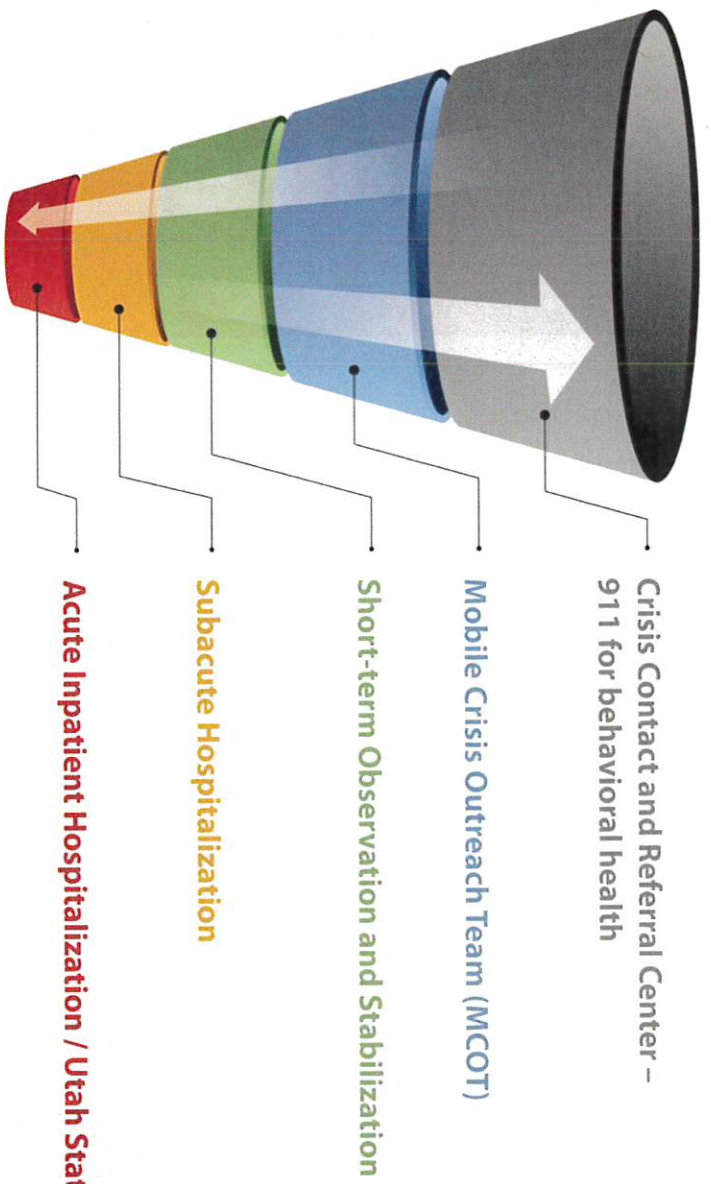
adults in Utah experience Serious Mental Illness (SMI)

Suicide is the leading cause of death for ages

# 10-24

in Utah

# Utah's Coordinated Crisis System



Level of Care	Patient Pop	Stabilized Rate	Cost
Crisis Call Center	100,000	90%	\$40/Call
MCOT \$380 - One Time Visit	10,000	90%	\$380
Short-term Observation - 23 Hour Stay	1,000	65%	\$1,250
Subacute 3 Days Avg.	350	85%	\$2,550 (\$850/day)
Acute Inpatient 9 Days Avg.	53	100%	\$9k (\$1k/day)