Mental health and substance abuse services, as provided by the state, have been significantly impacted by cuts in excess of $20 million for the current fiscal year. To satisfy the mandated cuts, the ODMHSAS has taken the following actions:

- Cut 28 inpatient beds at Griffin Memorial Hospital, instituting a "census cap" of 120 inpatient beds;
- Reduced state-operated adult residential substance abuse beds by more than 60 in Norman and 20 in Tahlequah;
- Cut approximately 35 children’s mental health beds;
- Closed 24 co-occurring beds in Tulsa;
- Closed a 26-bed enhanced residential treatment center;
- Reduced contracts for all private providers of mental health, substance abuse and prevention services, curtailing access to early intervention and other community based services;
- Initiated budget reductions at state-operated Community Mental Health Centers, resulting in one satellite facility closure, restructuring of services and other reduction measures;
- Reduced the ODMHSAS workforce by over 10% through VOBO, RIF and unfilled vacancies.

Such drastic decreases in availability of care threaten the health of our families and our communities. They have a direct impact in other areas such as local hospitals, all aspects of our criminal justice system, foster care, our schools, and the overall health and well-being of our state.

Impact of Additional Cuts:

Should the ODMHSAS be forced to take additional budget reductions in the range of 10% to 20%, on top of cuts already endured, it will mean that the community services network (both private and public) will experience devastating cuts to services. This will significantly impact consumers, families and service providers, along with other state and local resources. In addition to these impacts, further reductions would limit ODMHSAS’s ability to leverage federal funds through Medicaid matching, required state match for Systems of Care, and mandated maintenance of effort requirements for the state’s federal mental health, substance abuse and prevention services block grants.

Possible consequences of additional cuts:

- Closing CMHC satellite facilities, both public and private;
- Decreasing hours and days of operation for both public and private providers;
- Reducing inpatient beds;
- Reducing community based services to a level below that which is clinically indicated;
- System wide furloughs for state employees, although any savings from this approach would be mitigated by possible overtime and other coverage costs associated with mandatory staffing ratios at 24/7 facilities.

These actions are likely to lead to job loss, and will have far-reaching effects on the statewide service delivery system and economy, as delivery of these services involves both the public and private sector. Should this occur, it is quite possible that some private providers would be at risk of closure.

Additional cuts would require denial of care on the front-end of our system (early interventions), resulting in illnesses progressing to an acute stage before a person would be eligible to access treatment services. The state would experience a significant cost-shift (actually a cost-multiplier) as Oklahomans needing services would become involved with the correctional system or become increasingly engaged in foster care cases (a primary commonality of child neglect cases is untreated substance abuse by a parent).

Other costs that would ultimately impact our state budget and/or state economy would be increases in uncompensated care in emergency departments, increased demand for transportation and intervention by local law enforcement, loss of life and injuries associated with suicide, and disruptions to education, both in terms of classroom disruption, delinquency and drop-outs. The total direct cost to Oklahoma taxpayers when these services are cut is far greater than the costs of providing access to treatment.

Specifically, it is expected that the following consequences would result if these cuts were enacted:

- Cuts in the range of 10-20% will mean that between 8,043 and 16,087 Oklahomans will be left without services. These individuals will remain in the community, becoming more ill and vulnerable to the negative consequences of their illness.

- The impact does not stop with the individual. In addition to those unable to access care, their families will be affected. It is estimated that between 15,282 and 30,565 immediate family members, such as spouses and children, will also be directly influenced by the negative aspects of these unattended illnesses.
• Suicides, which already were increasing throughout the state at an alarming rate and more than 38% above the national rate, will continue to skyrocket resulting in tragic situations such as we have recently seen in specific communities and school systems.

• The state’s jail and prison systems could see an influx of between 2,654 to 5,309 individuals whose only crime will be that they are unable to obtain services to treat their illnesses, and as a result have inevitably found themselves engaged in the criminal justice system. Approximately 33% of the clients served by ODMHSAS have a previous arrest history. The treatment they receive has been proven to significantly reduce further involvement with the criminal justice system. Without the safety net of appropriate treatment, these individuals are significantly more likely to re-offend and eventually end up in jail, or the state prison system.

• Even if we just look at the impact of projected cuts on existing programs such as mental health and drug courts, the potential impact on the criminal justice system could be significant. It is estimated that between 450 and 910 fewer participants would be able to access these programs. If these individuals are instead remanded to DOC custody, the resulting cost to the state could be between $8,771,157 and $17,542,315.

• During FY09, 628 women were diverted from prison into drug court or mental health court. Among these women, there were 811 children. The avoided costs for this diversion and the subsequent costs of the children for foster care, TANF or Medicaid are estimated at $20,015,137 in one year.

• Cases of abuse and neglect are on the rise. In Oklahoma County alone, it is estimated that 1,167 new cases of confirmed “substance involved” cases of child abuse and neglect occurred in the last year alone.

• There is no doubt that costs will be shifted to the community if ODMHSAS is forced to further cut services. Increased reliance on emergency room care and other, more costly, services is due, in part, to the overall poor health of individuals with a mental illness or addictive disorder resulting from their lack of access to appropriate care and limited prevention efforts. It is estimated that between 1 in 4 emergency room visits are for psychiatric disorders.

• A study by the American College of Emergency Physicians tracked the impact of a 15% cutback in the Oregon Health Plan enrollment, which resulted in a 20% increase in the number of uninsured patients visiting the emergency department. The increase in emergency department visits related to alcohol and drug dependencies and psychiatric illnesses, however, was much larger. After the cuts, alcohol-related visits by uninsured patients rose by 82%, drug-related visits by uninsured patients rose by 173% and visits by uninsured patients with psychiatric illnesses rose by 106%.

• It is also likely that other high-end cases related to untreated mental and addictive disorders will impact local hospitals, in terms of people accessing emergency room services for DUI injuries, accidents, domestic violence issues, self-harm attempts or other medical emergencies.

<table>
<thead>
<tr>
<th>Number of Oklahomans to Lose Services Due to Additional Cuts</th>
<th>Percentage Cut to Current Number of Oklahomans Served By ODMHSAS</th>
</tr>
</thead>
<tbody>
<tr>
<td>10.0%</td>
<td>15.0%</td>
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<tr>
<td>8,043</td>
<td>12,065</td>
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</table>

<table>
<thead>
<tr>
<th>Number of Persons At Risk to Impact the Criminal Justice System</th>
<th>Immediate Family Members Also Impacted</th>
</tr>
</thead>
<tbody>
<tr>
<td>10.0%</td>
<td>15.0%</td>
</tr>
<tr>
<td>2,654</td>
<td>3,981</td>
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