



# County Mental Health Funding Increase – Frequently Asked Questions (FAQs)

Counties, as the providers of community-based mental health services, are seeing demands for mental health services in communities that far exceed state funding levels. Over the past decade, counties have continued to advocate for increased funding for county mental health services. In addition to the previously released report, [County Mental Health Services Survey Finding and Report](#), counties have pulled together answers to some of the most commonly asked questions about this critical state budget request.

## What is county mental health base funding?

- Simply put, it's community mental health for education, prevention, and service provision - the foundation of the mental health system, which is critical to support other investments like school-based services and crisis.
- These funds are flexible and can be used by a county to fit their local community needs.
- Examples of programs that only county mental health funds can pay for include student assistance programs in schools, respite, hotlines, prevention, community education and outreach, employment supports, and other programs not covered under insurance plans.

## What are counties asking for?

- The *need* remains an increase of \$250 million to the County Mental Health Base Line.
- Given the fiscal constraints the commonwealth is expected to face, counties are requesting **\$100 million** in the FY 2025-26 state budget to address the immediate crisis of county mental health funding gaps to ensure services can continue, with a commitment from the legislature for sustainable and adequate funding moving forward.
- While \$100 million is a significant investment, a recent survey of counties estimates community-based mental health service needs at an additional \$1.6 billion in funding.
- Counties are advocating for long-term sustainable and adequate funding to ensure that they can continue to provide these critical services in the years to come.

## Why is a comprehensive funding investment important?

- Counties want coordinated, holistic investments that do not further silo the system as counties continue to compete for limited funding, resources and workforce for mental health.
- During several legislative hearings, including the House Education Committee hearing on student mental health earlier this year, counselors and mental health professionals cited the need for investments in prevention and the larger overall base to provide for whole-family mental health and broader community-based prevention services.
- County funding will ensure any other investments we make, including school or crisis-based services, are not made in silos and can be supported by the broader overall mental health services continuum.

## **What was the impact of the \$40 million increase counties received in FY 2023-2024 and FY 2024-2025?**

- In FY 2023-2024 and FY 2024-25, counties received a combined increase of \$40 million, which were the first increases in 15 years for county mental health funding.
- How counties used this increase in funding:
  - Established mental health respite care programs, anger management, and parenting initiatives, as well as independent living programs to foster self-sufficiency
  - Expanded Student Assistance Programs in schools, providing mental health and support services for students
  - Enhanced access to mobile psychiatric rehabilitation services, increase availability and reach across communities
  - Expanded peer specialist programs
  - Funded community residential rehabilitation initiatives, improved personal care homes, and strengthened community-supported housing programs
  - Launched supported living programs to help individuals achieve greater independence
  - Bolstered crisis service providers and expanded crisis intervention programs to ensure effective responses during mental health emergencies
- While this investment was significant, few counties reported being able to do little more than keep up with their existing programming and maintain status quo, let alone offer new or expanded services to continue supporting those in need.

## **What would counties do with the \$100 million?**

- Decrease pressures on other parts of the system, including schools, law enforcement, jails, hospitals and emergency departments.
- Counties have reported significant wait times for services, some ranging 6-12 months.
- When asked, counties noted they would:
  - Rebuild the “infrastructure” of community services and programs:
    - Mobile treatment programs
    - Assertive Community Treatment Teams
    - Peer Support Programs
  - Add and bolster crisis services:
    - Mobile crisis expansion
    - Crisis prevention and response
    - Behavioral health crisis walk-in centers
  - Address justice-involved populations through:
    - In-Jail mental health services
    - Reentry, uninsured and recidivism services
  - Serve youth:
    - Student assistance programs in schools
    - School-based therapy
    - Summer youth programming
  - Address staff recruitment and retention (county and providers):

- Provider rate increases
    - Direct support professional wages
  - Supportive Housing
    - Housing residential services
    - New housing initiatives
    - Additional residential beds
- This funding will help counties to ensure that the safety net of services already in place is strong and sustainable, especially in this time when so much else is uncertain.

### **What happens if there is minimal to no increase in county mental health funding?**

- Counties have continued their obligations to their communities for mental health services despite the lack of funding, but they cannot hold on much longer.
- With the rapidly rising demands for services, counties cannot continue to sustain the social services safety net, comprised of programs and services these dollars pay for.
- Jail admissions where individuals suffer from untreated behavioral health conditions will continue to increase, and emergency rooms will continue to fill with individuals seeking mental health services.
- The provider and workforce network will continue to dwindle, further expanding wait times for all Pennsylvanians, regardless of their MA or private insurance status.
- Continued division of the system through disproportionate investments will further strain our already limited workforce and resources, limiting care and service capacity.

### **Why does this matter now?**

- Service demand far outweighs capacity.
- This is being actualized in increased emergency department wait times as individuals seek treatment without knowing where else to go, students are having trouble accessing appropriate services, creating issues within our schools and children and youth systems, law enforcement is being called to respond to more crisis calls and suicide rates have tragically increased.
- An investment in community-based mental health services is an investment in Pennsylvania's communities, children and families, our first responders, local governments, medical providers and overall wellbeing.