



2026 PUBLIC POLICY PLATFORM

Together building the health and wellbeing of all Hoosiers

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The Indiana Council of Community Mental Health Centers represents the collective interests of all community mental health centers (CMHCs) currently certified and accredited to provide community-based behavioral health services across all 92 counties in Indiana. CMHCs in Indiana **served over 350,000** behavioral health and substance use disorder clients this past fiscal year. CMHCs provide services primarily to those suffering from severe mental health and substance use disorder conditions which further reduce additional costs to society by directing coordinated care to our most vulnerable citizens.

2026 LEGISLATIVE AND ADMINISTRATIVE ACTION REQUIRED

CCBHC (Certified Behavioral Health Clinic):



The promise of certified community behavioral health clinics (CCBHC) is already yielding positive early results. This model has shown to greatly increase access to services. The demonstration sites have seen wait times decrease from 6-8 months to now providing same-day services.

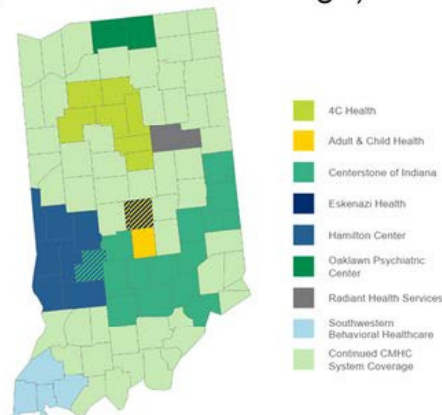
The Need for Action in Indiana:

Indiana is facing a mental health crisis that has been exacerbated by the pandemic, economic challenges, and gaps in our current system. According to recent reports, many Hoosiers with severe mental illnesses and substance use disorders are unable to access timely and adequate care, leading to devastating consequences for families, increased strain on law enforcement, and overcrowding in emergency departments. This is why we need to continue the progress and make sure every Hoosier has access to the full range CCBHC services.

Supporting CCBHCs will allow Indiana to:

1. **Expand Crisis Services:** By providing real-time, 24/7 access to care, CCBHCs reduce reliance on emergency rooms and law enforcement for behavioral health emergencies.
2. **Address Severe Mental Illness and Substance Use Disorder:** Comprehensive services tailored to individuals with severe and persistent mental illness and substance use disorders ensure they receive the long-term support necessary for recovery.
3. **Leverage Federal Funding:** Expanding CCBHCs enables Indiana to tap into federal funding streams, such as Medicaid demonstrations and Substance Abuse and Mental Health Services Administration (SAMHSA) grants, to sustainably enhance behavioral health services.
4. **Integrated Care Models:** Promote whole-person care by advancing integration of behavioral health and primary care services under the CCBHC framework.
5. **Data-Driven Accountability:** Increase data collection and transparency to assist with identifying key metrics that will inform the demonstration process.

Initial Competitively Selected Demonstration Pilot CCBHC Service Areas (2025)
(40% CCBHC coverage)



Long-Term CCBHC Implementation
(100% CCBHC coverage)



Full Continuum of Care: Indiana can strengthen hospital throughput and community safety by aligning the CCBHC model with a support services - ensuring safe discharges, fewer readmissions, and reduced emergency department/jail recidivism.



By prioritizing these issues, the administration has an opportunity to address systemic inequities, improve public safety, and support the well-being of all Hoosiers. The CCBHC model is not just a policy solution - it is a lifeline for individuals, families, and communities in need. As well as the future for behavioral health care delivery in Indiana.

2026 LEGISLATIVE AND ADMINISTRATIVE ACTION REQUIRED

MEDICAID

Medicaid is the primary payer for behavioral health services in Indiana. A recent survey showed that across our CMHC network, approximately 83% of all clients seen were on some form of Medicaid. Medicaid is crucial to ensuring equitable access to care for vulnerable populations. As we navigate state and federal, we want to ensure minimal impact to services. Also keeping at the forefront, the unique needs and struggles of the populations we serve and how that can influence compliance with work requirements and eligibility redeterminations.

Medicaid in Indiana:

1. **Maintain Reimbursement:** Maintain Medicaid reimbursement rates that reflect the true cost of care in behavioral health.
2. **Protect Against Service Reductions:** Any cuts in Medicaid funding or covered behavioral health services would disproportionately harm low-income Hoosiers and increase pressure on emergency departments, law enforcement, and other systems.
3. **Assist with Best Practices:** Supporting policies that help providers navigate the Medicaid eligibility determination process with their clients.



ADMINISTRATIVE BURDEN:

Indiana's CMHCs serve as the backbone of the State's behavioral health system, providing vital care to Hoosiers across all 92 counties. CMHC staff face increasing administrative demands that take away from direct care. Reducing these burdens is critical to strengthening access and sustainability of behavioral health services in Indiana.

1. **Streamline documentation requirements:** Align state and federal documentation standards to eliminate duplicative paperwork and provide parity for behavioral health services.
2. **Modernize Data reporting systems:** Having a single reporting data portal that all CMHC providers would utilize. This would cut down on duplication of reporting and provide accurate outcomes as there would be one portal. The Council is making a significant investment by creating a data warehouse and developing a population health tool.
3. **Reduction in duplicative audits:** Federal and State audit processes that collect the same data points can be used across multiple platforms and allow for reporting to multiple agencies.
4. **Streamline prior authorization requirements:** Current prior authorization practices slow access to care and increase administrative complexity. Adjusting or reducing these requirements for routine behavioral health services, with the option for other cost-saving measures, would improve efficiency, ease provider workload, and promote timely treatment.

With your support we will improve the mental wellbeing of Hoosiers!



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NEWTON, TIPPECANOE, WARREN, WHITE