INDIANA COUNCIL
of Community Mental Health Centers, Inc.

Newsletter

September - October 2026

News, programs and training opportunities / Distributed to all members

Together, building the health and well-being of all Hoosiers!

Making an Impact with Hamilton Center

Learning the lessons of CCHBC - *see page 16 - 19*

Also this issue:

State & Federal updates

Pages 20 - 23

Celebrating 50 Years of Indiana Council

Pages 26 - 27

Letter from Zoe

PRESIDENT & CEO, INDIANA COUNCIL OF COMMUNITY MENTAL HEALTH CENTERS

Dear Members, Partners and Key Collaborators,

Happy fall!

Thank you to everyone who joined us for our Fall CCBHC Conference and 50th Anniversary Celebration! Our members, partners, agency leaders, speakers, alumni, past and current Board members, and staff. Your presence made this milestone meaningful and reminded us of the strength of our network. Congratulations to the board members who were nominated to serve another term - **Melvin Burkes**, Hamilton Center; **Matthew Burden**, Porter Starke; and **Lisa Dominisse**, Centerstone Indiana. To see more about both of these events and the board members **see pages 10 and 26-27**

A special thank you to former **Council CEOs Matt Brooks and Jim Jones** for sharing their perspectives on our history. We stand on the shoulders of those who built this organization, and I am grateful for 50 years of leadership, collaboration, and advocacy that have helped strengthen access to mental health and substance use services across Indiana.

While we had much to celebrate, I recognize that this conference also felt heavy. Uncertainty about the direction of CCBHCs in Indiana, the possibility of a custom-built model, and concerns about Medicaid coverage brought difficult questions about the future of our services and the people who rely on them.

We are moving forward on two parallel tracks: **continuing to advocate for the CCBHC** demonstration and expansion while developing recommendations for a **potential custom-built model for FSSA**. Our three workgroups – advocacy, financing structure, and services and outcomes – will help shape this work. Alongside our policy platform and advocacy letters, these discussions will guide our collective next steps. You can read our policy platform on **page 7.**

We also know that **Medicaid changes** and the risk of coverage loss create challenges for members and the individuals and families you serve. This newsletter includes resources to help navigate these changes, and Amanda is available to provide guidance.
Helping people understand their coverage, applicable exemptions, and required next steps will be an important part of protecting access to care. These resources can be found on **pages 24-25.**

CONTENTS

September - October 2026

Letter from Zoe	2 - 3
About Indiana Council	4 - 5
Indiana Council News	6 - 10
Community News	11 - 15
CCHBC Spolight - Hamilton Center	16 - 19
State Updates	20 - 21
Federal Updates	22 - 23
Medicaid / Grant News	24 - 25
Events	26 - 27
Our Providers Map *Indiana Council member providers - serving all 92 Indiana counties*	28 - 29
Calendar	30

You will also find a CCBHC highlight featuring **Hamilton Center** (**pages 16-19**) and updates on **INSIGHT-BH** (**page 6**), and the work happening across **our member organizations** (**page 12-13**). These efforts reflect our continued commitment to demonstrating impact, strengthening collaboration, and supporting our network.

As we reflect on September's **Recovery Month** and **Suicide Prevention Awareness Month** (**page 8**) and recognize October's **Bullying Prevention Month** (**page 9**), we are reminded of why this work matters -helping people find support, safety, hope, and opportunities to thrive.

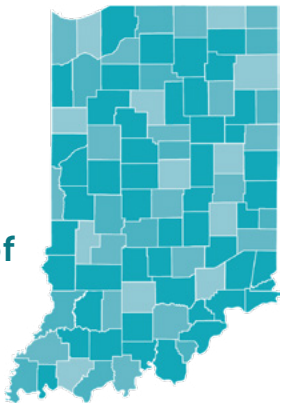
The Council is here to help navigate these times. I believe the work we undertake together today will help lay the foundation for another 50 years of sustainability and access for Hoosiers with mental illness and substance use disorders.

Thank you for your trust, your partnership, and your commitment to moving our system forward.

In Service,

Zoe Frantz President, CEO
zfrantz@indianacouncil.org

Together, building the health and well-being of all Hoosiers!



© 2026 Indiana Council of Community Mental Health Centers

indianacouncil.org

LinkedIn **Twitter**

Facebook

Design by John Fordham Design

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 ninety-two counties in Indiana.

CMHCs in Indiana served over 300,000 behavioral health consumers in 2025. CMHCs provide services primarily to those suffering from severe behavioral health and substance abuse conditions which further reduce additional costs to society by directing coordinated care to our most vulnerable citizens.

Click the image below to view / download our flyer on the benefits provided to our communities by our network of CMHCs.

or scan this QR code:

KEY CONTACTS:

Zoe Frantz
President, CEO
812-298-4533 **zfrantz@indianacouncil.org**

Denise Wade
Chief Administration Officer
317-684-3684 **dwade@indianacouncil.org**

Lee Ann Jordan
Director of Communication & Membership
317-650-4972 **ljordan@indianacouncil.org**

Nancy Henry
Quality Assurance Data Analyst
nhenry@indianacouncil.org

Sydney Moulton
Director of State & Local Government Affairs –
smoulton@indianacouncil.org

Amanda Deaton
Reimbursement & Revenue Compliance Manager
adeaton@indianacouncil.org

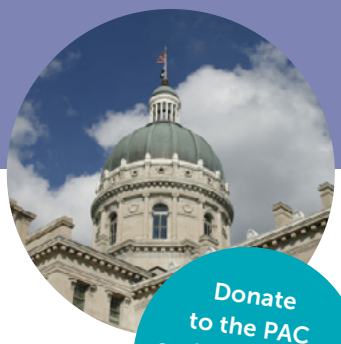
LOBBYISTS:

Kelli Waggoner
1816 Public Affairs Group
317-213-3876

Grant Waggoner
1816 Public Affairs Group
317-430-9860

Gus Habig
1816 Public Affairs Group
317-361-3237

Abigail Kaercher
Federal Lobbyist
Hall & Render
akaericher@hallrender.com
202-742-9674



Donate to the PAC and get our new Indiana Council scarf!

Friends of Indiana Council PAC

WHAT IS THE CMHC-PAC?

The Friends of Indiana Council-PAC is a political action committee made up of representatives from community mental health centers across the state of Indiana. Its sole purpose is to advance community mental health providers' position in the Indiana General Assembly.

Friends of Indiana Council-PAC does just what its name says: takes action on the political issues that matter to you and the people you serve.

OUR PURPOSE:

To serve as the voice of behavioral healthcare inthe Indiana General Assembly.

OUR MISSION:

- To inform elected officials about policies, programs and initiatives that impact the public behavioral healthcare system.
- To build relationships with public officials and candidates for state elected office.

WHY IS CMHC-PAC NEEDED?

Government activity at both state and federal levels has a direct impact on behavioral healthcare providers. A strong political action committee is an essential tool for any effective governmental relations effort. Your individual participation in the political action process can shape public policy that is responsive to the needs of CMHCs and the communities they serve.

WHO CAN CONTRIBUTE?

Voluntary contributions to the Friends of Indiana Council-PAC may be accepted from any U.S. citizen.

WHERE WILL MY CONTRIBUTION GO?

A contribution to the Friends of Indiana Council-PAC fundraising campaign will help your voice be heard across the state of Indiana. Funds raised are used to present issues of concern to candidates for state elected offices. This support is given to candidates and elected state office holders that share the goals of CMHCs. Contribution decisions are made by the Indiana Council Board members and public policy committee members.

HOW DO I CONTRIBUTE?

Contributions can be made by a direct donation via our website:

- **Click here to go to our donation page.**

Otherwise, checks can be made out to
Friends of Indiana Council-PAC
and sent to: PO Box 609 Jeffersonville, IN 47131.

IS MY CONTRIBUTION TAX DEDUCTIBLE?

Contributions to PACS, including Friends of Indiana Council-PAC, are not deductible for income tax purposes.

If you have any questions
please reach out to Sydney Moulton:
smoulton@indianacouncil.org

CALL FOR NEW AFFILIATE MEMBERS

Join the Indiana Council as an Affiliate Member and be part of Indiana's leading voice for behavioral health.

The Indiana Council invites government agencies, nonprofits, healthcare partners, and academic institutions, to join us as Affiliate Members.

As an Affiliate Member, you'll:

- Connect with leaders from across Indiana's mental health landscape and collaborate on statewide initiatives and policy efforts
- Access exclusive events, trainings, and data insights
- Support the advancement of behavioral health services across Indiana

Your membership strengthens a statewide network committed to improving lives through accessible, quality mental health and addiction services.

Interested? Click here to visit our Member Application page!

PRESS RELEASE

Indiana Council is excited to launch INSIGHT-BH, Advancing Statewide Behavioral Health Data Initiative

INDIANAPOLIS, IN — 10.15.26 —

New nonprofit initiative will strengthen data-driven collaboration between primary health care and behavioral health networks across Indiana.

The Indiana Council of Community Mental Health Centers is proud to announce a major milestone for **INSIGHT-BH**, its 501(c)(3) sister corporation created to advance a statewide population health data tool for member organizations. **INSIGHT-BH—Indiana State Integrated Graphing & Health Tracking for Behavioral Health**—received federal tax-exempt status from the Internal Revenue Service (IRS) last quarter, clearing the way to pursue grant funding and accelerate implementation.

This milestone represents an important step toward building a statewide resource designed to help community mental health centers and their partners better understand population health needs, identify trends, and strengthen data-informed decision-making to improve behavioral health outcomes for Hoosiers.

Working in collaboration with the **Indiana Primary Health Care Association** (IPHCA), INSIGHT-BH will support a first-of-its-kind partnership between primary health care and behavioral health networks to build this type of population health tool. By bringing these sectors together, the initiative aims to strengthen collaboration, expand opportunities for shared insights, and support a more integrated approach to health care across Indiana.

"Receiving federal tax-exempt status is an exciting milestone for INSIGHT-BH and an important step toward making this vision a reality," said **Zoe Frantz**, President and CEO of the Indiana

Council of Community Mental Health Centers. "By bringing primary care and behavioral health together around data, we have an opportunity to strengthen collaboration, better understand the needs of the people we serve, and support meaningful improvements in health outcomes across our state."

With its tax-exempt status secured, INSIGHT-BH can pursue grant opportunities and additional resources to support development and implementation of the statewide tool. The initiative reflects a broader commitment to innovation, partnership, and the use of meaningful data to inform decisions that benefit individuals, families, and communities.

As implementation moves forward, the Indiana Council and its partners will continue working to advance a collaborative, data-driven approach to population health—one that helps strengthen Indiana's behavioral health system and supports better coordination between primary care and behavioral health providers.

Click here to read more

2027 Legislative Agenda: Transforming the Mental Health Safety Net System

The Certified Community Behavioral Health Clinic (CCBHC) model provides an opportunity to build a more responsive, sustainable system—one grounded in Indiana's vision of Someone to Call, Someone to Respond, and Somewhere to Go.

Click here to read the 2027 Legislative Agenda

Recovery Month: Celebrating Hope, Healing and Resilience

In September we mark National Recovery Month, a time to celebrate the strength and resilience of individuals in recovery from mental health and substance use disorders. It is also an opportunity to recognize the families, providers, and communities who support people on their recovery journeys.

Recovery looks different for everyone, but it begins with hope, access to care, and the support needed to move forward. Indiana's community mental health centers play a vital role in providing services that help individuals build healthier, more fulfilling lives.

This month, we recognize the individuals whose stories inspire us, honor the professionals who walk alongside them, and reaffirm our commitment to strengthening Indiana's behavioral health system.

Recovery is possible, support matters, and every person deserves the opportunity to thrive.

National Suicide Prevention Month

September is also National Suicide Prevention Month – a time to raise awareness, encourage open conversations about mental health, and remind individuals that help and hope are always possible. Suicide prevention is a shared responsibility, and recognizing warning signs, reaching out, and connecting people with support can make a life-saving difference.

Indiana's community mental health centers play a critical role in providing behavioral health services, crisis support, and resources for individuals and families. By reducing stigma and making it easier to seek help, we can build stronger, more connected communities where everyone feels supported.

If you or someone you know is struggling, help is available. Call or text 988 to connect with the Suicide & Crisis Lifeline, available 24/7. Together, we can help save lives and remind every person that they are not alone.

National Bullying Prevention Month

is a time for everyone to:

- **UNITE:** It is important to amplify the unified message that no one deserves to be bullied and all students deserve to feel safe and supported and to inspire everyone to act with kindness, acceptance, and inclusion.
- **RAISE AWARENESS:** Talking about bullying prevention helps build understanding. All schools, organizations, and communities are encouraged to widely share and post information about how to prevent bullying in their communities. Partners will be listed on **PACER's bullying prevention website** and will have access to resources to get involved at their schools or in their community.
- **LEARN:** It's empowering to know what to do when you see or experience bullying. Everyone can access the **free web-based resources** that can be used by schools, parents, and students to better understand opportunities to prevent bullying. Educational opportunities include interactive websites, classroom toolkits, and contests.
- **TAKE ACTION:** Actions have impact. Educators can access and share the free toolkits for student-led activities and downloadable posters and other visual displays, as well as bookmarks and other promotional items. Parents can visit **PACER's bullying prevention websites** with their children. Communities can participate in **Unity Day** or Run, Walk, Roll Against Bullying events.

Indiana Council Board Members Re-Elected to Serve Another Term

NDIANAPOLIS, Ind. 10.3.26 — The Indiana Council of Community Mental Health Centers is pleased to announce the re-election of three dedicated board members who will continue serving another term on the Council's Board of Directors: Melvin Burks of Hamilton Center, Dr. Matt Burden of Porter-Starke Services, and Lisa Dominisse of Centerstone.

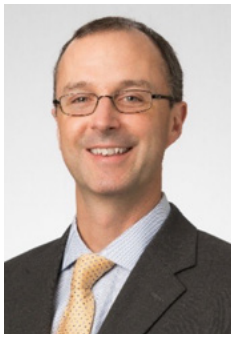
Their continued service reflects their commitment to strengthening Indiana's behavioral health system and advancing the mission of community mental health centers across the state.

The Indiana Council is grateful for the leadership, expertise, and perspective each brings to the board. Their ongoing involvement will help guide the Council's advocacy efforts, support its members, and advance policies and partnerships that improve access to mental health and substance use disorder services for Hoosiers.

"We are grateful to Mr. Burks, Dr. Burden, and Ms. Dominisse for their continued commitment to the Indiana Council and the communities we serve," said Zoe Frantz, President and CEO of the Indiana Council of Community Mental Health Centers. "Their leadership and dedication are invaluable as we work together to strengthen Indiana's behavioral health system and ensure community mental health centers have the support they need to serve Hoosiers."

The Indiana Council looks forward to continuing this important work with its board leadership and members statewide.

Melvin Burks



Dr. Matt Burden

Lisa Dominisse

COUNCIL STAFF UPDATE

I want to share an update regarding Sydney Moulton. Effective October 2, Sydney will transition out of her employee role with the Council. She will return to work with the Council in a contracted capacity beginning December 1.

We appreciate Sydney's continued commitment to the Council, our members, and our advocacy work, and we look forward to continuing to work with her in this new capacity beginning in December.

Northeastern Center adds three new leaders to team

NORTHEASTERN CENTER
YOUR COMMUNITY COUNSELING CENTER

KENDALLVILLE, Ind. – Northeastern Center has added three new leaders to its team of employees.

Liz Germano has joined Northeastern Center as health information manager, leading the clinical and electronic medical records team. She has an associate degree in health information management technology from Ivy Tech Community College, and she earned her bachelor's and master's degrees in health information management and administration from Western Governors University. In addition to being a registered health information administrator, Germano has experience managing release of information services across healthcare organizations nationwide.

Alyshia Umber is a reimbursement compliance coordinator on Northeastern Center's finance team. She earned her bachelor's degree in psychology and her master's degree in business administration, both from Purdue University Fort Wayne. Umber brings 11 years of finance experience to her role, including seven years with nonprofit and behavioral health organizations.

Alysha Neumann is a quality improvement coordinator at Northeastern Center, helping to manage quality and reporting metrics for the organization. She earned her bachelor's degree from Cincinnati Christian University and is a registered behavioral technician. Prior to joining Northeastern Center, Neumann worked in the behavioral health field for more than seven years.

For more information about Northeastern Center, including how to become client, visit **www.nec.org.**

Indiana's community mental health system is at a crossroads

By Dottie Fuentes, Chief Clinical Officer, Northeastern Center

Indiana has spent years working to build a better behavioral health system, one in which a person experiencing a mental health crisis can receive behavioral health care.

But building a better system requires more than changing policies, creating innovative programs, or changing what we call the system.

It requires adequately funding the organizations and people expected to provide that care.

For years, Community Mental Health Centers have cared for some of the most vulnerable people across Indiana. During that time, the need for mental health and addiction services has grown. The cost of providing those services has risen. Administrative and regulatory requirements have increased.

Yet reimbursement has not kept pace with what it actually costs Community Mental Health Centers to maintain the level of care they are expected to provide.

We can debate how to pay for behavioral health care, but we cannot pretend we aren't already paying the consequences when people cannot access it.

We pay for it in emergency departments.

We pay for it in jails.

We pay for it through law enforcement.

We pay for it in our schools, workplaces, and families.

And, sometimes, we pay for it with lives.

Indiana has an opportunity to strengthen this system through the Certified Community Behavioral Health Clinic, or CCBHC, model.

Indiana began its CCBHC Medicaid demonstration with eight pilot sites and has since been working toward expanding the model to additional communities across the state. CCBHC is designed to create a comprehensive behavioral health system that includes crisis services and expanded mental health and substance use treatment.

But transformation requires more than changing what we call the system.

Indiana's own Behavioral Health Commission recognized this in a 2022 report. The Commission estimated that sustaining and expanding Indiana's 988 and CCBHC behavioral health infrastructure would require approximately $100 million in State Fiscal Year 2026 and $120 million in State Fiscal Year 2027. With $50 million annually already appropriated through the Community Mental Health Fund, the Commission estimated an additional need of approximately $50 million in SFY26 and $70 million in SFY27 to continue building the system.

That investment should not be viewed only as another expense in the state budget. Effective community behavioral health and crisis services can reduce reliance on more costly systems, including emergency departments, inpatient hospitalization, law enforcement, and incarceration.

Indiana will pay for behavioral health needs one way or another. The question is whether we invest earlier in treatment, crisis intervention, and recovery – or pay later when people reach the most expensive and restrictive points in our healthcare and criminal justice systems.

For Community Mental Health Centers, these are not abstract budget decisions. They determine whether we can maintain the workforce necessary to provide care, expand crisis services in local communities, and adapt services to meet the unique needs of the communities we serve.

Locally, we are operating programs at a deficit, not because our staff are not working hard enough and not because the need for services is absent.

Quite the opposite.

The need is enormous.

Community Mental Health Centers operate differently from many other behavioral health providers. We maintain services for people with complex needs. We provide crisis response. We serve people experiencing serious and persistent mental illness, addiction, homelessness, and other significant challenges. We partner with hospitals, law enforcement, schools, and community organizations.

Community Mental Health Centers are not simply another type of behavioral health provider. We are an essential part of Indiana's behavioral health safety net.

Indiana has spent years preparing for a transformation of its behavioral health system.

We now have an opportunity to decide whether we are willing to invest in sustaining it.

I am asking FSSA Secretary Mitch Roob, members of the Indiana General Assembly, and other state leaders to support the continued expansion and adequate funding of CCBHCs and Indiana's community behavioral health system.

This isn't simply about funding Community Mental Health Centers.

It's about choosing a behavioral health system we want to be available when someone we love needs it.

Indiana's communities deserve this investment.

So do the people who show up every day to provide the care.

NORTHEASTERN CENTER
YOUR COMMUNITY COUNSELING CENTER

13 Northeastern Center, Inc.
220 South Main Street, Kendallville IN 46755
Designated in: DEKALB, LAGRANGE, NOBLE, STEUBEN

EMS DISPATCH

Message from EMS Director Kraig Kinney

As we move into the final months of 2026, Indiana EMS continues to experience significant growth and change.

Across the state, EMS clinicians, agencies, training institutions, medical directors and community partners are working every day to strengthen emergency medical services and expand the role EMS plays within Indiana's healthcare and public-safety systems.

The Indiana Office of EMS continues to focus on several priorities, including improving certification and licensure processes, expanding Mobile Integrated Health, strengthening pediatric and obstetric readiness, supporting the EMS workforce, improving statewide data systems and making it easier for Indiana's EMS professionals to access needed resources.

Many of these efforts are moving from planning to implementation. Over the coming months, EMS agencies can expect additional information about new resources, training opportunities and statewide initiatives.

Thank you to Indiana's EMS professionals for the work you do every day. Whether you serve a large urban system, a rural community, a fire-based service, hospital-based service, a private provider, a volunteer organization or another part of Indiana's EMS system, your work matters.

Kraig Kinney

EMS Director, Office of Emergency Medical Services

EMS Commission appointments made by the Governor

With all current EMS Commission memberships expiring on Sept. 30, 2026, Governor Mike Braun has appointed members to the EMS Commission for the next four-year term, running from Oct. 1, 2026, through Sept. 30, 2030.

The following individuals were reappointed:

- **Dr. Sara Brown**, Trauma Physician representative
- **Dr. Lisa Clunie**, Hospital with Ambulance Service representative
- **Patrick Hutchison**, Municipal Fire EMS representative
- **Dr. Jim Nossett**, Emergency Physician representative

New appointments were:

- **Marjorie Clouse** (IU Health), Emergency Nurses representative
- **Kiely Culberson** (Vernon Township Fire Department), EMT representative
- **Carmen Elliott** (Ivy Tech Madison), ALS Training Institution representative
- **Tom Fentress** (Keener Township Volunteer Fire Department), Volunteer Fire representative
- **Dr. Stephanie Gardner** (Ascension Health), Air Medical representative
- **Jeremy Mast** (Tri-County EMS), Private Ambulance representative
- **Katie Morgan** (Carlisle Lions Community Ambulance), Volunteer Ambulance representative
- **Kelly Russ** (Putnam County EMS), Paramedic representative
- **Zoe Frantz** (Indiana Council of Community Mental Health Centers), Public representative

Dr. Eric Yazel, the State EMS Medical Director, remains the IDHS executive director designee and will serve as the interim chairperson until the Commission meets again on November 18.

The Indiana EMS Commission is created in statute, and its representative composition is defined by **Indiana Code 16-31-2**. Its duties include establishing standards for the EMS scope of practice, EMS certification requirements and EMS education requirements.

State EMS Director Kraig Kinney said, "We thank the departing EMS Commissioners for their service. Their contributions have substantially strengthened the Indiana EMS system. We also look forward to seeing the direction the new EMS Commission will take as EMS continues to grow."

EMS Commission: Stay involved

The Indiana EMS Commission plays an important role in the state's EMS system, including professional standards, administrative rules and other matters affecting emergency medical services.

EMS professionals are encouraged to stay informed about Commission activities.

Meeting schedules, agendas, meeting materials, minutes, administrative rules, policies and other resources are available through the **IDHS Boards and Commissions webpage.**

Participation and engagement from Indiana's EMS community help ensure that those working within the system remain informed as EMS continues to evolve.

Hamilton Center's annual butterfly release event is held each September during Recovery Month to honor the courage of those in recovery, remember those lost to substance abuse disorder and remind all of us that hope and recovery is possible.

Pictured is Margie Anshutz, Consultant & President of Hamilton Center Foundation, Chelsea Wells, Executive Director of Marketing and Zach Jenkins, IS Data Analyst.

Hamilton Center Demonstrates the Impact of CCBHC Services in Indiana

Expanding access, strengthening crisis response, and connecting Hoosiers to the care they need

Hamilton Center's journey toward becoming a Certified Community Behavioral Health Clinic (CCBHC) demonstrates how sustained investment, collaboration, and community-based care can transform behavioral health services across Indiana.

Hamilton Center began its CCBHC journey in May 2020 with a two-year, $3.7 million federal grant from the Substance Abuse and Mental Health Services Administration (SAMHSA). Additional federal and state funding helped sustain services, expand crisis response capabilities, and prepare the organization for Indiana's CCBHC demonstration. In January 2025, Hamilton Center officially entered the state demonstration, marking a significant step toward a more comprehensive and sustainable behavioral health system.

Expanding Access and Strengthening Crisis Care

Through the CCBHC model, Hamilton Center has expanded access to mental health and substance use disorder services, strengthened coordination with hospitals and community partners, and developed a multidisciplinary approach to care. Services now emphasize timely access, integrated primary and behavioral health care, support for high-risk individuals, and treatment based on measurable outcomes.

A key milestone has been the expansion of crisis services, including a robust mobile crisis team, integration with the **988 Suicide & Crisis Lifeline**, and a new crisis and receiving stabilization unit providing 24/7/365 support for individuals who need short-term crisis care.

The results reflect the impact of these efforts. During its first year of implementation in 2025, Hamilton Center delivered more than 173,000 CCBHC services. During the first 18 months of the demonstration, the organization served 10,002 unique individuals, facilitated 1,433 same-day or rapid-access encounters, and recorded 9,461 crisis encounters.

Hamilton Center also reported an average crisis response time of 37 minutes and 3 seconds between July 2025 and July 2026, compared with the statewide average of 45 minutes and 35 seconds. In 2025, the organization achieved 93.37% compliance with CCBHC service requirements, compared with the statewide average of 70.91%, ranking it as the top aggregate performer among the eight demonstration pilot sites.

Hamilton Center's new Crisis Response and Stabilization unit which was funded through the CCBHC initative. Left to right: Devon Miller (CCBHC Certified Peer Support Specialist), Hillary Reedy (CCBHC Healthcare Technician), Gabe Harrison (Registered Nurse).

Additional progress includes a 28% increase in the number of services provided per client, reflecting a shift toward more comprehensive, ongoing support rather than isolated service encounters. Eight of nine CCBHC quality measures also maintained a positive annual upward trend of 5%.

Real Stories, Lasting Impact

Behind these numbers are individuals whose lives are changing through consistent support and access to care.

One individual experiencing homelessness and active substance use reached out to crisis services during a particularly vulnerable period. With encouragement from a Crisis

Stacie Amerman, Dir. of Vigo County Outpatient and Andy Jones, Consumer Rep. Specialist, host a Hamilton Center table at one of the many back to school events in the community.

Diversion Peer Support Specialist, the individual agreed to stay at a local shelter while sober living options were explored. The specialist maintained frequent contact, adapting outreach to accommodate limited phone access and providing continued encouragement.

When safety concerns and the risk of relapse increased, the individual reached back out to the crisis team. Staff coordinated a crisis assessment, provided advocacy, and expedited connections to transitional housing. Within just 11 days, the individual moved from homelessness and active substance use to secure transitional housing and full-time employment.

In another case, an individual leaving jail experienced significant mental health symptoms and initially required inpatient care. Following discharge, the crisis team maintained consistent contact and worked to build trust. Over time, the individual became more engaged, learned to recognize early warning signs, and began reaching out proactively for support. With continued assistance, the individual connected with ongoing care, avoided further legal involvement, and established goals for recovery and independence.

These experiences highlight the value of relationship-based care, peer support, coordinated services, and follow-up that continues beyond an immediate crisis.

A Stronger, More Coordinated Crisis Response

Hamilton Center's fiscal year 2026 crisis services data further demonstrate the reach of its expanded approach.

The organization reported:

- 277 incoming crisis calls
- 276 mobile crisis responses
- 209 admissions to the Crisis and Receiving Stabilization Unit
- 851 outgoing calls to individuals needing additional support, often helping divert a potential crisis

The crisis team also averages 110 follow-up calls each month to individuals who experienced a crisis or were discharged from an inpatient psychiatric unit within the previous

24 hours. These proactive connections help individuals navigate transitions, maintain stability, and connect with the appropriate level of care.

Alongside service expansion, Hamilton Center remodeled its **Crisis Diversion Center,** constructed a new crisis and receiving stabilization unit, and developed its mobile crisis capabilities to better meet community needs.

Hamilton Center's renovated Crisis Diversion Center

Lessons Learned and Looking Ahead

Implementing the CCBHC model has also brought important lessons. Hamilton Center emphasizes that transformation requires ongoing communication and collaboration across all departments, as well as consistent engagement with community partners.

Organizations must be prepared to adapt as state and federal priorities evolve, particularly in areas such as billing, data collection, and information sharing.

CCBHC implementation has created opportunities to add staff, including peer support professionals whose lived experience can strengthen engagement and recovery. However, recruitment and retention remain challenges across the behavioral health workforce. Hamilton Center notes that continued staff development and a strong, ongoing training plan are essential to sustaining progress.

The organization's experience demonstrates how the CCBHC model can strengthen crisis response, improve access to comprehensive care, and help individuals move toward greater stability and independence.

As Indiana continues to advance its behavioral health system, Hamilton Center's progress offers a valuable example of what coordinated, community-based care can accomplish for Hoosiers and the communities that support them.

HAMILTON CENTER, INC.

9 **Hamilton Center, Inc.** CCBHC

620 Eighth Avenue, Terre Haute IN 47804

Designated in: CLAY, GREENE, PARKE, SULLIVAN, VERMILLION, VIGO

HIP Work Requirements

FSSA estimates that over 58,000 HIP members are currently not in compliance with pending HIP Work Requirements.

The Family and Social Services Administration (FSSA) estimates that more than 58,000 Healthy Indiana Plan (HIP) members may not currently be in compliance with — or exempt from — the HIP Work Requirements that will begin January 1, 2027. This figure reflects the most recent data available and underscores the urgent need for members to review their status to avoid losing coverage.

Beginning January 1, 2027, FSSA will enforce work requirements for new applicants and existing HIP members. These requirements reflect a balanced, values-driven approach: pairing compassion with responsibility, and ensuring that access to healthcare is supported by work, job training, education, or qualifying community engagement activities.

To ensure members are aware of what they need to do to keep their coverage, FSSA is conducting a statewide, multi-channel communications effort that began in June 2026. This outreach included notifications to more than 500,000 HIP members, partner communications, social media messaging, listserv alerts, and eight in-person town halls across Indiana, with additional town halls planned. These efforts were designed to help every HIP member clearly understand the steps needed to remain compliant.

"We are sharing this information to strongly encourage HIP members to take personal responsibility for their coverage. Please review the HIP Work Requirements at myfssa.in.gov, set up a Benefit Portal account if you don't already have one, and use the pre-screening tool to determine

if HIP Work Requirements apply to you," said Mitch Roob, FSSA Secretary. "Our goal is for every eligible HIP member to do what's necessary to keep their coverage."

What Are HIP Work Requirements?

To stay eligible for HIP coverage, members and applicants must complete certain activities each month, known as HIP Work Requirements. These activities include:

- Working at a job
- Attending school
- Participating in an apprenticeship
- Joining a work program
- Volunteering in the community

To meet HIP Work Requirements, you have three options:

- You can combine any of the listed activities—such as working, volunteering, participating in a work program, or an apprenticeship—to reach a total of at least 80 hours each month.
- Alternatively, you can fulfill the requirement by attending school or an apprenticeship at least half-time, without needing to track hours.
- Meet the monthly income threshold by earning $580 or more in the month or are a seasonal worker with an average monthly income of $580 over the prior six months.

This flexibility allows you to mix and match activities and income or simply attend school/apprenticeship half-time to maintain your HIP coverage.

Who must meet HIP work requirements:

Adults enrolled in HIP must meet the work requirements if all of these are true (absent any exemptions):

- Are ages 19-64
- Are not pregnant
- Are not enrolled in or eligible for Medicare

HIP Work requirements exemptions:

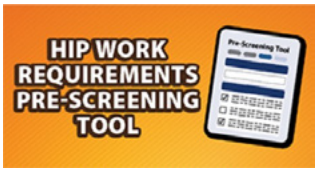
HIP members do not have to meet the work requirements for a month if, for at least one day that month, you:

- Are under 26 and were formerly in foster care.
- Are a member of a federally recognized Tribe.
- Are a parent or caregiver of a child age 13 or younger.
- Are a caregiver of a person with a disability.
- Are a veteran with a total (100%) disability rating.
- Are pregnant, or it has been 12 months or less since your pregnancy ended.
- Are in jail or prison or were released in the last 90 days.
- Are following the work rules for SNAP or TANF.
- Are in a drug or alcohol treatment program.
- Are medically frail or have special medical needs. This includes:
  - Being blind or having a disability.
  - Having a substance use disorder.
  - Having a serious mental health condition
  - Having a serious physical, intellectual, or developmental disability.
  - Having another serious or complex medical condition.
- Other exemptions may also apply.

FAQ Available

HIP Work Requirements are coming soon, and we want to help members stay informed and prepared. Beginning January 1, 2027, most HIP members ages 19–64 will need to meet new work and community engagement rules to keep their coverage. These requirements can be met through a mix of work, volunteering, classes, or job training—or by earning enough monthly income.

Click here for an FAQ



HIP Work Requirements Pre-Screening Tool

To help HIP members determine whether they may be subject to or exempt from the upcoming requirements, FSSA has launched the **HIP Work Requirements Pre-Screening Tool.**

The tool asks individuals to provide information about:

- Applicable exemptions
- Health-related factors
- Work activities
- Income

After submitting their information, users can immediately see whether they may be required to meet HIP Work Requirements.

Learn more here

Partner Toolkit

To help raise awareness of HIP Work Requirements, FSSA has created a **partner toolkit.** The toolkit includes handouts, posters, social media posts, informational videos and much more.

Please consider sharing materials and promoting available resources and events.

Get the Partner Toolkit here

Senate Committee Advances Westlake, Leaves Town

The Senate heads to recess, joining the House away from Washington for much of the period leading up to the November midterm elections. The Senate's official calendar identifies Oct. 5 through Nov. 6 as a state work period. The House is already in recess, with its return scheduled for Monday, Nov. 9. Before they left, on Sept. 30, the Senate Health, Education, Labor and Pensions Committee advanced Timothy Westlake's nomination to serve as Assistant Secretary for Mental Health and Substance Use at the Department of Health and Human Services (HHS). His nomination moved forward as part of the same en bloc committee vote that advanced surgeon general nominee Nicole Saphier. A final confirmation vote by the full Senate has not yet been scheduled.

House Energy & Commerce Republicans Release Medicaid/Medicare Fraud Report

Despite being in recess, House Energy and Commerce (E&C) Committee Majority Staff published a report called: **The Real Costs of Fraud: Examining Program Integrity Requirements and Exposing Fraud in Medicare and Medicaid.** The report argues that Medicare and Medicaid fraud remains widespread, costing billions of dollars annually and harming both taxpayers and beneficiaries. The report was accompanied by a 14-bill package introduced to address fraud, though the package cannot be considered until the House is back in session. National Council will continue to evaluate the recommendations listed in the report, which include enhanced provider screening and enrollment controls, more aggressive auditing and oversight, increased scrutiny of Home and Community-based Services (HCBS) and waiver-funded services, expanded fraud analytics and AI-driven monitoring, and greater federal pressure on states to strengthen Medicaid program integrity systems.

H.R.1 Work Requirements: 42 CFR Part 2 Update

Earlier this week, the HHS Office for Civil Rights **unveiled new guidance** on the use of substance use disorder treatment records to exclude individuals from mandatory compliance with community engagement requirements under HR1. Under 42 CFR Part 2, certain substance use disorder patient records are subject to federal confidentiality restrictions. In the interim final rule issued earlier this year by the Centers for Medicare and Medicaid Services (CMS), the agency "recognized that processes for the identification and verification of individuals who may be specified excluded individuals intersect with Part 2, and stated its intention to work with OCR to provide technical assistance to states on this intersection." The new guidance provides examples of how a state Medicaid agency is permitted to use an applicant's or beneficiary's substance use disorder patient records protected under Part 2 to verify an exclusion from the community engagement requirement.

White House Pursues $810 Million "Pocket Rescission"

The White House submitted a request to Congress on Sept. 25 proposing the rescission of $810 million across 11 federal accounts. Because the request arrived just days before the end of fiscal year 2026, the Administration sought to withhold the affected funding through its expiration on Sept. 30,

an approach commonly referred to as a "pocket rescission." National Council's analysis shows no direct recission requests to Substance Abuse and Mental Health Services Administration (SAMSHA) programs. **Review the White House rescission package.**

The Government Accountability Office concluded that the President may not force congressionally approved funding to expire by withholding it beyond its period of availability. GAO argued that the practice would circumvent the process established under federal impoundment law and undermine Congress' constitutional power of the purse. The dispute is expected to keep executive spending authority and congressional control of appropriations in the spotlight. **Read more about GAO's conclusion.**

SAMHSA Awards Nearly $250 Million for Treatment, Prevention and Recovery

SAMHSA announced $247.9 million in grants to expand addiction treatment, mental health services and recovery support nationwide. The awards include $69.4 million to expand access to medications for opioid use disorder, $34.6 million to train first responders and community members to administer and distribute opioid overdose-reversal medications, and more than $96 million for children's mental health and trauma services. **Review SAMHSA's complete grant announcement.**

CCBHC holds its ground in Washington:

- The administration's FY 2027 budget request proposes eliminating a couple dozen behavioral health programs while holding CCBHC expansion grants flat at $385.5 million.
- In May, HHS added ten states to the CCBHC Medicaid demonstration.
- When an administration is looking hard for cuts, what it chooses to keep says a lot. Together with the May expansion, it signals continued federal support for the model.
- Since 2024, states have also had a permanent option to cover CCBHC services in Medicaid.

Year-end deadlines:

- Congress passed a stopgap that funds the government through December 11.
- Final FY 2027 funding levels, including for SAMHSA programs, will be decided after the election. That could happen in the lame-duck session or, if Congress passes another stopgap, in the new Congress.
- Several health provisions expire December 31, including community health center funding. They will likely ride on the same package.

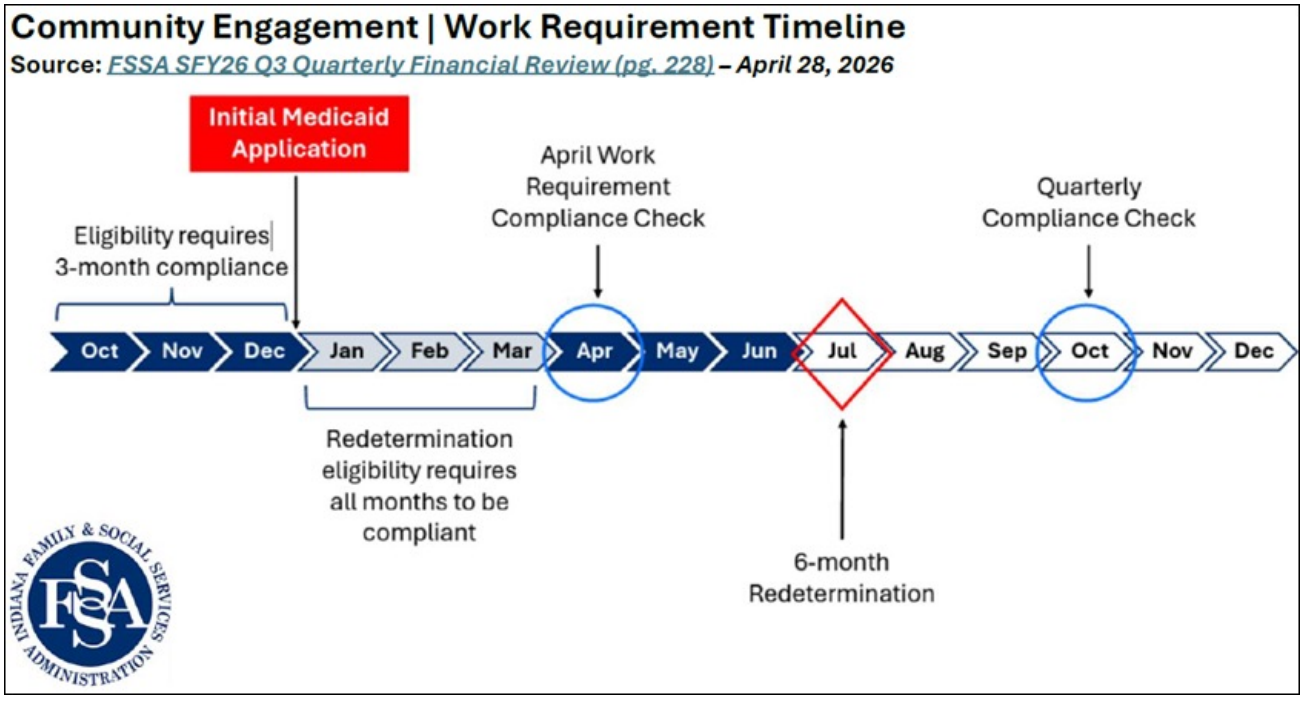
Indiana Medicaid Key Changes and Updates:

HIP Work Requirements

- **Beginning January 1, 2027, members enrolled in the HIP expansion population will be required to meet work requirement activities to maintain coverage, unless they qualify for an exemption.**
- Individuals who are medically frail may qualify for an exemption, however much of that process is still in development and we are waiting on state direction on many of the details around medically frail exemptions.
- **A HIP Work Requirement Pre-Screening Tool** has been developed and allows individuals to complete a form to see if they are subject to HIP Work Requirements.
- Qualifying activities include employment, education, workforce training and volunteer service.
- A 3 month lookback period is in place for Medicaid recipients with a January 2027 redetermination or new applicants, this requires compliance for October, November and December 2026.

Medically Frail Changes

- **Beginning in 2027, Indiana is implementing significant changes to the medically frail determination process.**
- The state is expected to establish a new clinical review process for medically frail individuals. Details about the process, criteria and documentation requirements remain under development. Indiana Council continues monitor these changes and their impact on individuals, while advocating for protections to those with serious mental illness, substance use disorder and other complex behavioral health conditions.



Eligibility Redeterminations Increase to Every Six Months

- Beginning January 1, 2027, Indiana is moving from annual Medicaid eligibility renewals to redeterminations every six months. This change increases the risk of coverage disruptions for individuals who miss notices or fail to submit requested documentation. Patients are encouraged to update their contact information in the **FSSA Benefit Portal.**

Presumptive Eligibility Changes

- Effective October 1, 2026, household size and income calculations for presumptive eligibility (PE) will include all household members, including individuals ineligible for Medicaid because of immigration status. Additional verification requirements may affect eligibility determinations and application workflows.

New Presumptive Eligibility Provider Standards

- New compliance standards for qualified PE providers became effective September 3, 2026. Providers may face corrective actions, mandatory training or loss qualification status if performance standards are not met.

Questions? Please contact **Amanda Deaton** at **adeaton@indianacouncil.org**

Grant Updates

- **Behavioral Health and Aging Certificate Program:**
  Through support from the Humana Aging Workforce Initiative, centers have access to Boston University's Behavioral Health and Aging Certificate Program at no cost.
  - The self-paced, online program provides practical training to support the behavioral health workforce in serving older adults.
- **Group Home Grant Closeout:**
  The grant provided funding to support group home renovations and facility improvements. While the grant period ended on June 30, 2026, closeout activities and final claims processing remain underway. We will continue to monitor the processing of outstanding claims and distribute funding until all eligible claims have been finalized.
- **CCBHC Bridge Grant Finalization:**
  The grant period concluded on Jun 30, 2026. The final reconciliation is in progress, and Q2 (final) payment was disbursed on 10/9/2026.

A sincere thank you to our members for your prompt responses to follow-up questions and documentation requests throughout the grant closeout process. We appreciate your continued partnership as we bring these important initiatives to completion.

Questions? Please contact **Amanda Deaton** at **adeaton@indianacouncil.org**

1 Members in attendance at our **Fall Quarterly meeting**

2 Southwestern staff enjoy 50th anniversary – **Scott Branam, Heather Hertel, Dr. Lionel Phelps**

3 Thank you to **Cedelia Ellis** (Southwestern Behavioral Healthcare), **Todd VanBuskirk** (Porter-Starke) and our key stakeholders with **Indiana Sheriffs Association** for serving on our panel – "Best practices in serving SMI and SUD with our sheriffs".

4 **Zoe Frantz**, at Indiana Council's 50th Anniversary celebration

5TH ANNIVERSARY
INDIANA COUNCIL
of Community Mental Health Centers

50 YEARS. ONE VISION.
STRONGER TOGETHER
1976 - 2026

5 Indiana Council welcomed back former members & CEO's. Great seeing you **Suzanne Koesel (**former CEO Centerstone) & **Chuck Clark** (former CEO Park Center)

6 **Jim Jones** (former Indiana Council CEO) and **Zoe Frantz** (current Indiana Council CEO) celebrate the Council's 50 years.

7 Former Indiana Council CEOs gather for a fun night to celebrate 50 years!

8 Great time celebrating Indiana Council's 50th anniversary with former CEO of Adult & Child **Alan Brown**, and **Kelli Waggoner** (1816, Indiana Council lobbyist)

Our Providers - *Serving all 92 Indiana Counties*

Indiana Council of Community Mental Health Centers, Inc.
P.O. Box 609 Jeffersonville, IN 47131 (317) 684-3684 **indianacouncil.org**

- **Numbers show head office locations**
- **Click provider logos to visit their sites**

>> Click here to view provider details on our site

CCBHC DEMO indicates provider is a designated CCBHC demonstration site in the counties shown in **GREEN on the map >>>**

These centers provide **Mobile Crisis - Someone to respond**

These centers provide **Crisis Centers- A safe place for help**

1 Adult & Child *(dba Centerstone)* CCBHC
603 E. Washington St. – 9th Floor, Indianapolis IN 46204 *Designated in:* MARION, JOHNSON

2 Aspire Indiana Health, Inc.
9615 E. 148th St., Noblesville, IN 46060
Designated in: BOONE, HAMILTON, MADISON, MARION, HANCOCK, SHELBY

3 Bowen Health
2621 E Jefferson St, Warsaw, IN 46580
Designated in: HUNTINGTON, KOSCIUSKO, MARSHALL, WABASH, WHITLEY

4 Centerstone of Indiana, Inc. CCBHC
645 S. Rogers Street, Bloomington, IN 47403
Designated in: BARTHOLOMEW, BROWN, DECATUR, FAYETTE, JACKSON, JEFFERSON, JENNINGS, LAWRENCE, MONROE, MORGAN, OWEN, RANDOLPH, RUSH, UNION, WAYNE

5 Cummins Behavioral Health Systems, Inc.
6655 East US 36, Avon IN 46123
Designated in: HENDRICKS, PUTNAM

6 Edgewater Systems for Balanced Living, Inc.
1100 West Sixth Avenue, Gary IN 46402
Designated in: LAKE

7 Family Health Center
515 Bayou Street, Vincennes IN 47591
Designated in: DAVIESS, KNOX, MARTIN, PIKE

8 4C Health CCBHC
401 E. 8th Street, Rochester, IN 46975
Designated in: CASS, FULTON, HOWARD, MIAMI, PULASKI, TIPTON

9 Hamilton Center, Inc. CCBHC
620 Eighth Avenue, Terre Haute IN 47804
Designated in: CLAY, GREENE, PARKE, SULLIVAN, VERMILLION, VIGO

10 INcompass Healthcare
285 Bielby Road, Lawrenceburg IN 47025
Designated in: DEARBORN, FRANKLIN, OHIO, RIPLEY, SWITZERLAND

11 LifeSpring Health Systems
460 Spring Street, Jeffersonville IN 47130
Designated in: CLARK , CRAWFORD, DUBOIS, FLOYD, HARRISON, JEFFERSON, ORANGE, PERRY, SCOTT, SPENCER, WASHINGTON

12 Meridian Health Services
240 N. Tillotson Avenue, Muncie IN 47304
Designated in: DELAWARE, HENRY, JAY

13 Northeastern Center, Inc.
220 South Main Street, Kendallville IN 46755
Designated in: DEKALB, LAGRANGE, NOBLE, STEUBEN

14 Oaklawn Psychiatric Center, Inc. CCBHC
330 Lakeview Drive, Goshen IN 46528
Designated in: ELKHART, ST. JOSEPH

15 Park Center
909 East State Boulevard, Fort Wayne IN 46805
Designated in: ADAMS, ALLEN, WELLS

16 Porter-Starke Services
601 Wall Street, Valparaiso IN 46383
Designated in: PORTER & STARKE

17 Radiant Health CCBHC
505 N. Wabash Avenue, Marion IN 46952
Designated in: GRANT, BLACKFORD

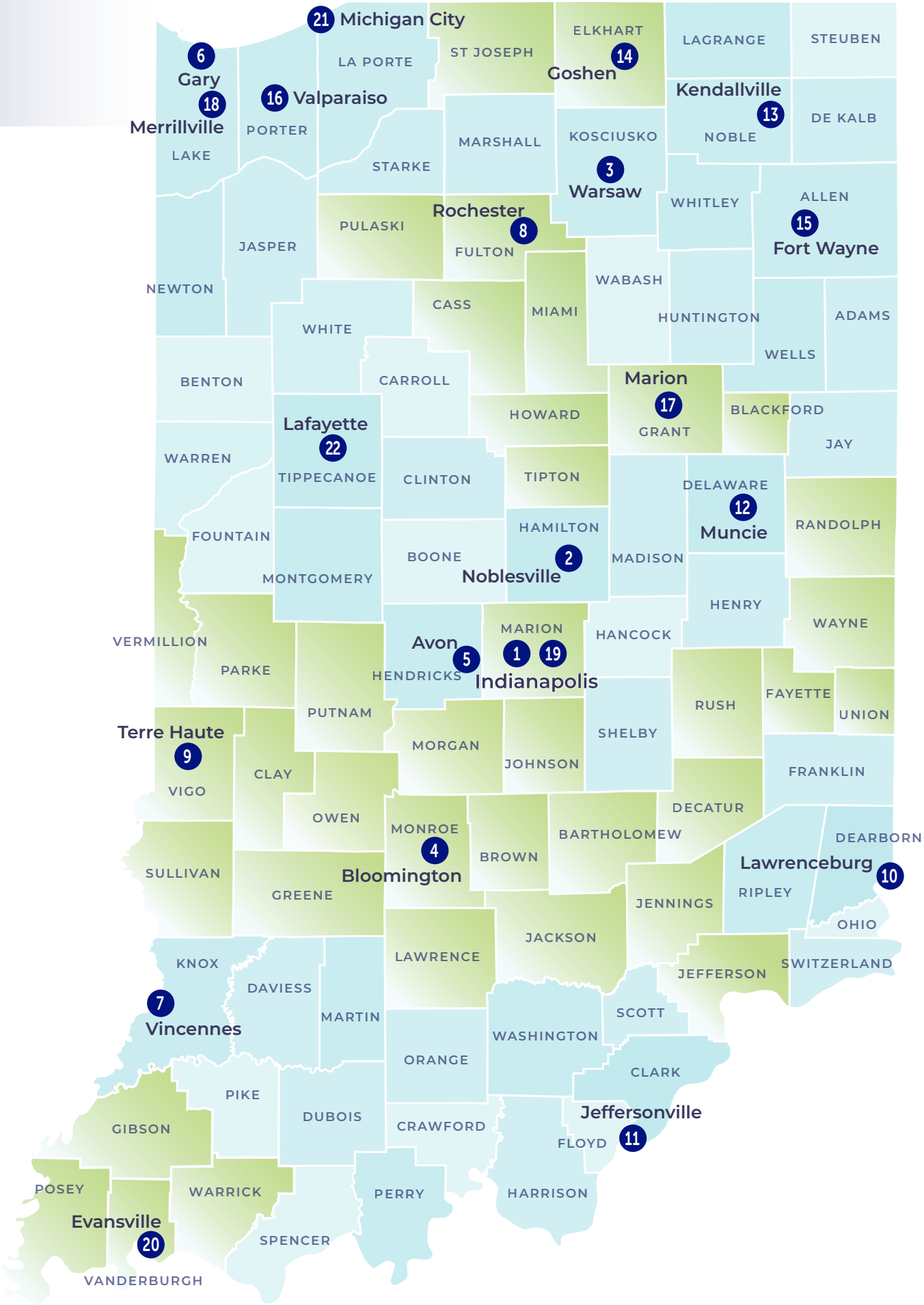
18 Regional Health Systems
8555 Taft Street, Merrillville, IN 46410
Designated in: LAKE

19 Sandra Eskenazi Mental Health Center CCBHC
720 Eskenazi Avenue, Indianapolis IN 46202
Designated in: MARION

20 Southwestern Behavioral Healthcare, Inc. CCBHC
415 Mulberry Street, Evansville IN 47713
Designated in: GIBSON, POSEY, VANDERBURGH, WARRICK

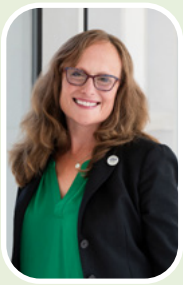
21 Swanson Center
7224 W. 400 N., Michigan City IN 46360
Designated in: LAPORTE

22 Valley Oaks
415 N. 26th Street, Lafayette, IN 47904
Designated in: BENTON, CARROLL, CLINTON, FOUNTAIN, JASPER, MONTGOMERY, NEWTON, TIPPECANOE, WARREN, WHITE


21 Michigan City
6 Gary
18 Merrillville
16 Valparaiso
LA PORTE
ST JOSEPH
ELKHART
14 Goshen
LAGRANGE
STEUBEN
Kendallville
13
DE KALB
NOBLE
LAKE
PORTER
STARKE
MARSHALL
KOSCIUSKO
3 Warsaw
WHITLEY
ALLEN
15 Fort Wayne
PULASKI
Rochester
8
FULTON
JASPER
NEWTON
WHITE
CASS
MIAMI
WABASH
HUNTINGTON
WELLS
ADAMS
BENTON
CARROLL
Marion
17
GRANT
BLACKFORD
JAY
Lafayette
22
TIPPECANOE
HOWARD
WARREN
CLINTON
TIPTON
DELAWARE
12 Muncie
RANDOLPH
FOUNTAIN
MONTGOMERY
BOONE
HAMILTON
2 Noblesville
MADISON
HENRY
WAYNE
VERMILLION
PARKE
PUTNAM
Avon
5
HENDRICKS
MARION
1
19
Indianapolis
HANCOCK
RUSH
FAYETTE
UNION
Terre Haute
9
VIGO
CLAY
MORGAN
JOHNSON
SHELBY
FRANKLIN
OWEN
MONROE
4
Bloomington
BROWN
BARTHOLOMEW
DECATUR
DEARBORN
SULLIVAN
GREENE
Lawrenceburg
10
RIPLEY
JENNINGS
OHIO
JACKSON
LAWRENCE
SWITZERLAND
JEFFERSON
KNOX
DAVIESS
7
Vincennes
MARTIN
SCOTT
WASHINGTON
ORANGE
CLARK
PIKE
DUBOIS
CRAWFORD
Jeffersonville
11
FLOYD
GIBSON
POSEY
WARRICK
PERRY
HARRISON
Evansville
20
SPENCER
VANDERBURGH

Calendar

DATES FOR YOUR DIARY ...



Cup of Joe with Zoe

Half hour State leader meet and greet with our members and partners.

Second Tuesday of every month at 8:30am EST

>> Click here for Zoom link

Meeting ID: 210-953-5684 Password: ICCMHC

DID YOU KNOW? -

You can watch past Cup of Joe meetings on YouTube - **Click here to subscribe!**

2026 dates

- November 10
- December 8

SAVE THE DATES:

Click here to visit our event pages

2027 Winter Conference – Legislative Day - March 15

Location: Downtown Indianapolis (additional details soon)

2027 Spring Conference – May 6-7 - VIRTUAL (additional details soon)

2027 Summer Quarterly: July 14-16 (Fort Wayne – additional details soon)

2027 Fall Quarterly: October 13-15 (Bloomington – additional details soon)

For further information on all events please contact **LeeAnn Jordan**