



TEXAS DEPARTMENT OF STATE HEALTH SERVICES

DAVID L. LAKEY, M.D.
COMMISSIONER

P.O. Box 149347
Austin, Texas 78714-9347
1-888-963-7111
TTY: 1-800-735-2989
www.dshs.state.tx.us

December 8, 2008

Mr. Joey Longley
Director
Sunset Advisory Commission
P.O. Box 13066
Austin, Texas 78711-3066

Dear Mr. Longley,

Thank you for providing us with a copy of the Sunset Staff Report on the Texas Youth Commission (TYC), Texas Juvenile Probation Commission and Office of Independent Ombudsman and the opportunity provide comments on this report.

In reference to your request for comments on Issue I, Recommendation 1.9 (Require the Department to adopt a memorandum of understanding (MOU) with TCOOMMI for continuity of care for juvenile offenders with mental impairments), there are currently a number of barriers to accessing outpatient Mental Health Services for TCOOMMI youth exiting TYC. These include: 1) the youth exiting TYC do not begin the Medicaid eligibility process until their discharge from TYC and the process to acquire Medicaid coverage can take up to several months; 2) Despite TCOOMMI's current efforts to transport youth to screening/assessment appointments and pay for these services from local Mental Health/Mental Retardation (MHMR) Centers, there is still a very high no-show rate among these individuals; and 3) at the discretion of the MHMR Centers, youth who are age 17 who request MHMR services may be screened/assessed for either adult MH services or children's MH services. Most of these youth are screened as adults and do not meet the priority population requirements and are assessed as ineligible for services.

The proposed MOU requiring each of the named agencies to work collaboratively to solve continuity of care issues could result in youth eligible to be screened/assessed for out-patient MH services as early as the same day as discharge from TYC. This would certainly also result in more youth entering the MHMR system at a time when the average Local Mental Health Authority (LMHA) is serving these clients at near or well above their performance targets, a situation which may create funding implications for the Department of State Health Services (DSHS) and the LMHAs.

We would also like to take this opportunity to comment on Issue I, Recommendation 1.10, which includes a recommendation for a data sharing blueprint to develop common data systems and improving the integration of juvenile justice data systems with systems in other youth-serving agencies (including DSHS). DSHS concurs that such an effort would assist in the improvement

Mr. Joey Longley
December 8, 2008
Page 2

of continuity of care issues across state agencies. DSHS believes this would also assist in improving service delivery among these populations in terms of substance abuse services which is a critical need at this time.

Thank you again for providing us the opportunity for input into this process. Please contact me directly should you require any additional input from this agency.

Sincerely,

A handwritten signature in black ink, appearing to read "D. L. Lakey, M.D.", written in a cursive style.

David L. Lakey, M.D.
Commissioner