

# ANNUAL REPORT FY 2025



## MISSISSIPPI DEPARTMENT OF MENTAL HEALTH



The governing board of the Mississippi Department of Mental Health is composed of nine members appointed by the Governor of Mississippi and confirmed by the State Senate. Members' terms are staggered to ensure continuity of quality care and professional oversight of services. By statute, the nine-member board is composed of a physician, a psychiatrist, a clinical psychologist, a social worker with experience in the field of mental health, and one citizen representative from each of Mississippi's congressional districts.

## **BOARD OF MENTAL HEALTH MEMBERS**

Alyssa Killebrew, Ph.D., Chair Teresa Mosley, Vice Chair Sara Gleason, M.D. **Sue Gallaspy** 

Jim Herzog, Ph.D. John Mitchell, M.D. **Courtney Phillips Stewart Rutledge** 

## **EXECUTIVE DIRECTOR**

Wendy D. Bailey

**DEPUTY EXECUTIVE DIRECTOR: BEHAVIORAL HEALTH SERVICES** 

Jake Hutchins

DEPUTY EXECUTIVE DIRECTOR: INTELLECTUAL/DEVELOPMENTAL DISABILITY SERVICES

**Craig Kittrell** 

## STATUTORY AUTHORITY OF THE DEPARTMENT OF MENTAL HEALTH

The Mississippi Department of Mental Health was created in 1974 by an Act of the Mississippi Legislature, Regular Session, as outlined in Sections 41-4-1 et seg. of the Mississippi Code of 1972, Annotated. The statute placed into one agency mental health, alcohol/drug abuse, and intellectual and developmental disabilities programs which had previously been under the direction of the State Board of Health, the Interagency Commission on Mental Illness and Intellectual and Developmental Disabilities, the Board of Trustees of Mental Institutions, and the Governor's Office. The statute also addresses the Department of Mental Health's responsibilities concerning services for persons with Alzheimer's disease and other dementia. The network of services comprising the public system is delivered through three major components:

## **State-Operated Programs**

DMH administers and operates state behavioral health programs, a specialized behavioral health program for youth, regional programs for persons with intellectual and developmental disabilities, and a specialized program for adolescents with intellectual and developmental disabilities. These programs serve designated counties or service areas and offer community living and/or community services.

The behavioral health programs provide inpatient services for people (adults and children) with serious mental illness and substance use disorders. These programs include: Mississippi State Hospital and its satellite programs, Specialized Treatment Facility, East Mississippi State Hospital, North Mississippi State Hospital, and South Mississippi State Hospital.

The programs for persons with intellectual and developmental disabilities provide residential services. The programs also provide licensed homes for community living. These programs include Boswell Regional Center and its satellite program, Mississippi Adolescent Center; Ellisville State School and its satellite program, South Mississippi Regional Center; North Mississippi Regional Center; and Hudspeth Regional Center.

## **Regional Community Mental Health Centers**

Regional Community Mental Health Centers (CMHCs) operate under the supervision of regional commissions appointed by county boards of supervisors comprising their respective service areas. The regional centers make available a range of community-based mental health, substance abuse, and in some regions, intellectual and developmental disabilities services. The governing authorities are considered regional and not state-level entities. The Department of Mental Health is responsible for certifying, monitoring and assisting the regional community mental health centers.

## **Nonprofit Service Agencies/Organizations**

These make up a smaller part of the service system, are certified and may also receive funding through the Department of Mental Health to provide community- based services. Many of these nonprofit agencies may also receive additional funding from other sources. Programs currently provided through these nonprofit agencies include community-based alcohol/drug abuse services, community services for persons with developmental disabilities and community services for children with mental illness or emotional problems.



Supporting a better tomorrow by making a difference in the lives of Mississippians with a mental illness, substance use disorder and/or intellectual and developmental disability one person at a time.



We envision a better tomorrow where the lives of Mississippians are enriched through a public mental health system that promotes excellence in the provision of services and supports.

## A better tomorrow exists when . . .

- All Mississippians have equal access to quality mental health care, services and supports in their communities.
- People actively participate in designing services.
- The stigma surrounding mental illness, intellectual/developmental disabilities, substance abuse and dementia has disappeared.
- Research, outcome measures and technology are routinely utilized to enhance prevention, care, services and support.

# **CORE VALUES**



#### People

We believe people are the focus of the public mental health system. We respect the dignity of each person and value their participation in the design, choice and provision of services to meet their unique

#### Commitment

We believe in the people we serve, our vision and mission, our workforce, and the community-at-large. We are committed to assisting people in improving their mental health, quality of life and their acceptance and participation in the community.

#### Accountability

We believe it is our responsibility to be good stewards in the efficient and effective use of all human, fiscal and material resources. We are dedicated to the continuous evaluation and improvement of the public mental health system.

#### **Awareness**

We believe awareness, education and other prevention and early intervention strategies will minimize the behavioral health needs of Mississippians. We also encourage community education and awareness to promote an understanding and acceptance of people with behavioral health needs.

#### Integrity

We believe the public mental health system should act in an ethical, trustworthy, and transparent manner on a daily basis. We are responsible for providing services based on principles in legislation, safeguards and professional codes of conduct.

#### Community

We believe that community-based service and support options should be available and easily accessible in the communities where people live. We believe that services and support options should be designed to meet the particular needs of the person.

#### Excellence

We believe services and supports must be provided in an ethical manner, meet established outcome measures and are based on clinical research and best practices. We also emphasize the continued education and development of our workforce to provide the best care possible.

#### Respect

We believe in respecting the culture and values of the people and families we serve. We emphasize and promote diversity in our ideas, our workforce and the services/supports provided through the public mental health system.

#### Collaboration

We believe that services and supports are the shared responsibility of state and local governments, communities, family members and service providers. Through open communication, we continuously build relationships and partnerships with the people and families we serve, communities, governmental / nongovernmental entities and other service providers to meet the needs of people and their families.

#### Innovation

We believe it is important to embrace new ideas and change in order to improve the public mental health system. We seek dynamic and innovative ways to provide evidence-based services/supports and strive to find creative solutions to inspire hope and help people obtain their goals.

# **GENERAL HIGHLIGHTS**

# **DMH Serving Mississippians**

1,835

acute psychiatric admissions to the four state hospitals 3,113

people served across all services at behavioral health programs

657

people served on campus at the ICF/IID Regional Programs 514

people served at ICF/IID Community Homes 2,806

people received Support Coordination



# **Crisis Support & Response**

17,678

calls to 988 in Mississippi

4,295 calls to the DMH Helpline.

8,513

calls made to Mobile Crisis Response Teams

2,637
Mobile Crisis face-to-

Mobile Ćrisis face-toface visits, resulting in 31% of all calls receiving personal contact 3,611

admissions to Crisis Stabilization Units

92%

CSU discharges diverted from requiring a higher level of care at a state hospital

## **Court Ligisons**

DMH is continuing to fund 33 Court Liaison positions at CMHCs throughout the state. The Court Liaison program aims to reduce the number of involuntary commitments to state hospitals through diversion strategies and increasing the awareness and usage of community-based services. In FY25, Court Liaisons conducted 2,670 assessment interviews and diverted 1,270 people from placement under a writ or involuntary commitment, for a diversion rate of approximately 48%.



## **Outreach & Training**

DMH continues to provide Mental Health First Aid, Applied Suicide Intervention Skills Training (ASIST), Shatter the Silence suicide prevention trainings, and other trainings offered through a partnership with the Mississippi Public Health Institute.

#### **Shatter The Silence**

10,155 people reached through training

8,566 people trained in Youth

720 people trained in Adult

21 people trained in Older Adult

146 total training sessions completed

#### **ASIST**

16 people reached through training

2 organizations participated in training

2 total training sessions completed

#### **Mental Health First Aid**

1,881 people reached through training

137 organizations participated in training

122 total training sessions completed

## **Behavioral Health Learning Network**

4,208 people reached through training

25 DMH Certified Providers participated in training





## **MSH Psychiatric Residency Program**

Mississippi State Hospital's Psychiatry Residency Program marked a major milestone with its first class of residents graduating in June 2025. DMH remains optimistic that the program will strengthen long-term retention of psychiatrists in Mississippi and continue attracting talented doctors to train at MSH. With 21 residents currently in training, the program is helping build the state's psychiatric workforce, which includes 278 practicing psychiatrists.



Of the 5,252 people who received services through Regional Programs, the Waiver, the CSP, Targeted Case Management, or other IDD grant services, 4,595, or 87%, were served in the community.



DMH operates Substance Use Disorder Units (SUD) at Mississippi State Hospital (MSH) in Rankin County and East Mississippi State Hospital (EMSH) in Meridian. MSH's adolescent unit also provides substance use treatment services for young people. In FY25, the SUD units served a total of 600 people, 191 at MSH and 409 at EMSH. At MSH, the average wait time for admission to the SUD unit was 7.69 days. Average wait time at EMSH was 11 days. DMH also certifies and helps fund 630 community residential beds operated by CMHCs or other providers that served 3,563 people in high-intensity residential treatment in FY25.

## **Acute Psychiatric Services**

2,094 people received acute psychiatric services in FY25. There were 1,835 acute psychiatric admissions to the four state hospitals in FY25. There was a notable decrease in wait time for admissions, from approximately 4.5 days to 2.95 days. In addition to acute psychiatric services, services available through DMH's behavioral health programs include continued treatment services, substance use disorder treatment, forensic services, child and adolescent services, and nursing home services. DMH has continued to emphasize diversion to community services, utilizing the commitment process only when there are no other alternatives, and limiting the use of jail as a holding location. The length of time spent waiting in jail after the commitment order has been sent to the hospital but prior to admission has decreased from 2.3 days reported in FY24 to 1.23 days in FY25.



#### **PACT**

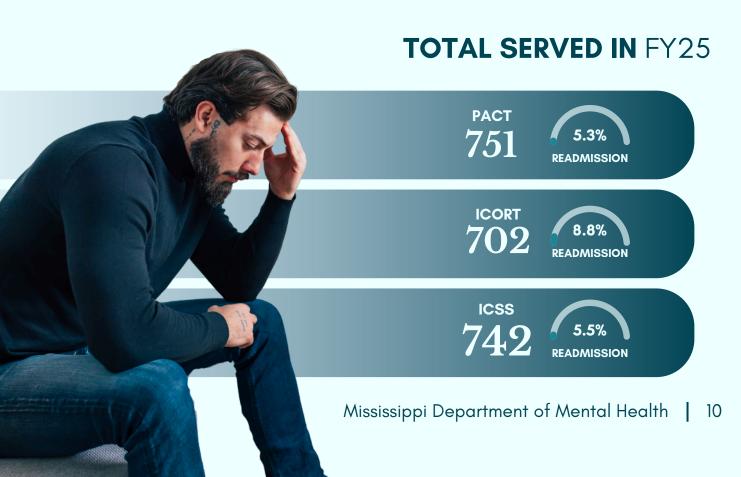
Programs of Assertive Community Treatment (PACT) Teams help people who have the most severe and persistent mental health problems who have not benefited from traditional outpatient services to live successfully in the community while receiving mental health treatment services. DMH funds 10 PACT teams that are operated by the Community Mental Health Centers.

#### **ICORT**

Intensive Community Outreach and Recovery Teams (ICORTs) are a modification of PACT with fewer staffing requirements and higher client-staff ratios than a traditional PACT Team. An ICORT is an opportunity for CMHCs unable to sustain a PACT Team to provide a similar intensive service to help keep people out of the hospitals. DMH funds 16 ICORTs that are operated by CMHCs.

#### **ICSS**

Intensive Community Support Services (ICSS) are provided by specialists who have a direct involvement with the person receiving services. These services are similar to targeted case management, but they maintain lower client to staff ratios and provide services primarily in the community instead of office settings. DMH funds 35 ICSS positions at the Community Mental Health Centers.



## **Discharges**

During FY25 there were 1,797 total discharges from all four of DMH's state hospitals. DMH continued its formal audit of the discharge process during FY25 that measures discharge plans, intakes or meetings with CMHCs, follow-up appointments and more.

**TOTAL DISCHARGES** FY25

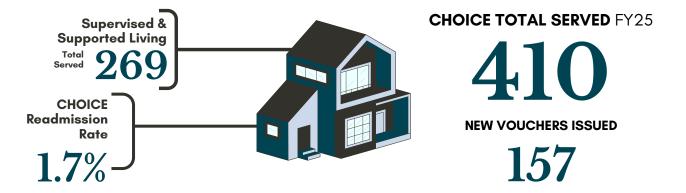






## **CHOICE & Housing Services**

The CHOICE housing program provides temporary rental assistance to make housing affordable throughout the state of Mississippi for people with serious mental illness. In FY25, the CHOICE program issued 157 new housing vouchers and served 410 unduplicated people during the year. In addition to the CHOICE program, Supervised and Supported Living programs available through CMHCs served 269 individuals in FY25.



#### Children & Youth

In FY25, a total of 2,628 children and youth were served by local level MAP Teams, Navigate, and Wraparound facilitation services across the state.



**Percentage** Maintained in the Home



# **Navigate**

The NAVIGATE program is a specialized system of coordinated care for adolescents and young adults (ages 15-30) who have experienced first-episode psychosis. The evidence-based program focuses on strengthening abilities, recovery from the impact of symptoms associated with mental illness, and resiliency at home, school, work and in the community.



Percentage Needing Higher Level of Care



#### **MAP Teams**

MAP Teams are local multidisciplinary teams that review cases concerning children and youth who have serious emotional disorder and who are at immediate risk for an inappropriate 24 hour institutional placement. The members of these teams meet on a monthly basis to identify communitybased services and resources that may divert children from inappropriate inpatient care.



Received Wraparound as Alternative to a **Higher Level of** Care

## Wraparound

Wraparound Facilitation is a family and youth guided process that gathers individuals from different parts of the entire family's life to create a child and family team. The team develops a single plan of care to address the needs of youth with complex mental health challenges and their families. The team meets every 30 days to monitor and evaluate treatment and services.

#### **Forensic Services**

In April 2025, Mississippi State Hospital held a ribbon cutting and dedication for its newly renovated maximum-security building, advancing forensic mental health care across all 82 counties. The state-of-the-art facility features enhanced safety measures, AI technology, and supports a secure, therapeutic environment for patients involved in the criminal justice system. The facility eases the burden on county jails and law enforcement while expanding access to appropriate treatment. State leaders and mental health officials attended the grand opening and ribbon-cutting ceremony, celebrating this milestone in the state's mental health system. Staff began the official move into the new Maximum Security Forensic Services Unit in June 2025.

The newly designed and renovated maximum-security building at Mississippi State Hospital is a major advancement in our mission to provide comprehensive forensic mental health services. This state-of-the-art facility is enhancing DMH's ability to conduct competency evaluations and provide restoration services while delivering high-quality care for individuals with serious mental illness who require maximum security. The new facility is expected to dramatically decrease wait times for people awaiting admission to Forensic Services at MSH.



#### House Bill 1640

During the 2024 Legislative Session, Mississippi lawmakers introduced and passed House Bill 1640. The bill made significant changes to the civil commitment process through the use of a pre-affidavit screening that must be completed before someone can file an affidavit for commitment. This change connects someone in need of services with a mental health professional as the first step in the process, before the chancery court or law enforcement become involved. The bill also placed limits on the use of jails as a holding location

We believe the effects of HB 1640 have had a positive effect during FY25. There was a reduction in both the numbers of people admitted to state hospitals from jail and the wait time they experienced in jail. There was a 31% reduction in the number of admissions from jail to state hospitals compared to FY24. Wait times in jail decreased by approximately 47%, from 2.3 days in FY24 to 1.23 days in FY25



### House Bill 1222

HB 1222 from the 2023 Legislative Session, the Mississippi Collaborative Response to Mental Health Act, took effect in FY24, and work has continued to conduct Mental Health First Aid and Crisis Intervention Team training for law enforcement offices throughout the state.

Trainings in FY25 included train-the-trainer sessions, enabling more people to go back to their communities to train law enforcement officers in Mental Health First Aid.



## Law Enforcement Agencies Trained

These include sheriff's departments, municipal police departments, representatives from the Attorney General's office, the Capitol Police, and college police departments.



## **Canopy Children's Solution CARES Center**

DMH was proud to be a part of a groundbreaking ceremony in June 2025 with Canopy Children's Solutions and the Mississippi Department of Child Protection Services for the expansion of the CARES Center, a psychiatric residential treatment facility that will provide a growing and urgent need - a new level of care for children with severe mental health challenges.

"Today, we celebrate more than the construction of a building," DMH Executive Director Wendy Bailey said at the groundbreaking. "We celebrate the creation of a safe, healing space where children struggling with serious emotional disturbance can begin a journey toward hope, stability, and recovery."

While there are acute psychiatric care programs and other psychiatric residential treatment facilities (PRTF) in the state, this expansion of the CARES Center will provide a specialized, sub-acute, step-down level of care that will bridge the gap between acute care and PRTFs, a need that has not been met before in Mississippi. It is a partnership between DMH, Canopy Children's Solutions, and the Mississippi Department of Child Protection Services.



## 988 in Mississippi: One of Highest In-State Answer Rates in the Nation

988, the new three-digit dialing code for the Suicide and Crisis Lifeline (formerly the National Suicide Prevention Lifeline) launched on July 16, 2022. The Lifeline provides free and confidential support through calls, texts, and chats. Nationwide, 988 has already received approximately 6.5 million engagements. Mississippi contracts with CONTACT the Crisis Line in Jackson and Contact Helpline in Columbus as call centers for 988. The state has one of the highest in-state answer rates in the nation, with 98% of calls routed to the call centers answered.



IN-STATE ANSWER RATE 98%



## **DMH Begins Partnership With Network of Care**

In late FY25, DMH announced it was joining the nation's oldest and largest behavioral health platform, the Network of Care for Behavioral Health. As an innovative, webbased platform provided in partnership with the National Association of State Mental Health Program Directors, the Network of Care for Behavioral Health will provide critical support and access to behavioral health resources for individuals, families, and service providers across Mississippi.

This web-based tool provides a one-stop resource for not just mental health services, but social services of all kinds – primary health care, food assistance, housing and shelter services, criminal and juvenile justice, and much more. DMH has continued working with the service and plans a formal launch in FY26.

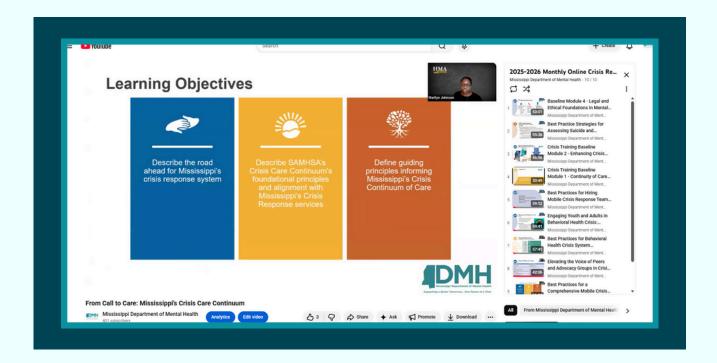


## Strengthening the Crisis Care Continuum in Mississippi

In the spring of 2025, DMH kicked off a year-long focus on strengthening the crisis continuum in Mississippi with a successful one-day convening, bringing together professionals from across the state's crisis system continuum — including 988 counselors, Mobile Crisis Response Teams, MYPAC, CSU staff and more. The event featured two impactful panel discussions:

- Systems to Support a Full Crisis Continuum
- Complex Populations and Connecting Clients to Systems of Care

Following that day-long event, DMH began hosting a year-long series of virtual trainings designed to empower crisis workers with the skills and knowledge needed to effectively respond to behavioral health crises. The trainings are free of charge and take place live on Zoom; they are also recorded so they can be shared later. Topics have ranged from discussing the foundations of a crisis system and best practices for mobile crisis teams to the inclusion of peers and other hiring practices for crisis teams. In addition to the monthly training, a series of "baseline" modules are also available to help provide further foundations for a crisis continuum. These trainings are shared online and archived on the DMH YouTube page for everyone to access and share as needed.



## Mental Health Mississippi App & DMH Website

To complement the Mental Health Mississippi website, DMH has released an app that is now available on the Apple App Store and the Google Play Store for Android phones. The app allows users to search for mental health services in Mississippi and provides information on crisis services, advocates, and connects them to free online mental health screenings. It was released in May 2024. The Mental Health Mississippi web site had more than 30,000 users with more than 42,000 sessions in FY25.

In addition, the DMH web site had 66,251 users and 121,808 sessions in FY25.

Active Users **32,605** 

Sessions **42,507** 



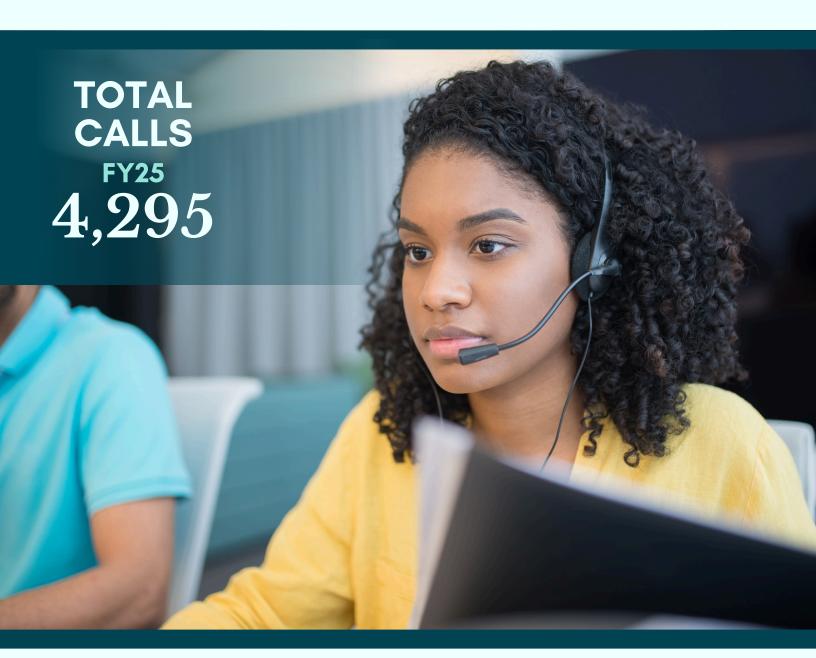


Users 66,251

Sessions 121,808

## **DMH Helpline**

The Office of Consumer Support (OCS) serves as the point of contact for DMH for information/referral and for expressing grievances and concerns. DMH staff answers the Helpline during weekday working hours, and DMH contracts with CONTACT the Crisis Line to answer the Helpline after hours and on weekends.



# **BEHAVIORAL HEALTH PROGRAMS**

The state behavioral health programs are administered by the Department of Mental Health. All programs offer acute psychiatric services with admissions handled through the court commitment process. In addition, East Mississippi State Hospital and Mississippi State Hospital both offer nursing home services and substance use disorder services. East Mississippi State Hospital also provides a community living program, and Mississippi State Hospital provides Forensic Services for Circuit Court defendants.

#### Mississippi State Hospital

James G. Chastain, FACHE, Director P.O. Box 157-A Whitfield, MS 39193 Phone: 601-351-8000 www.msh.state.ms.us

#### **Specialized Treatment Facility**

Shannon Bush, Director 14426 James Bond Road Gulfport, MS 39503 Phone: 228-328-6000 www.stf.ms.gov

#### East Mississippi State Hospital

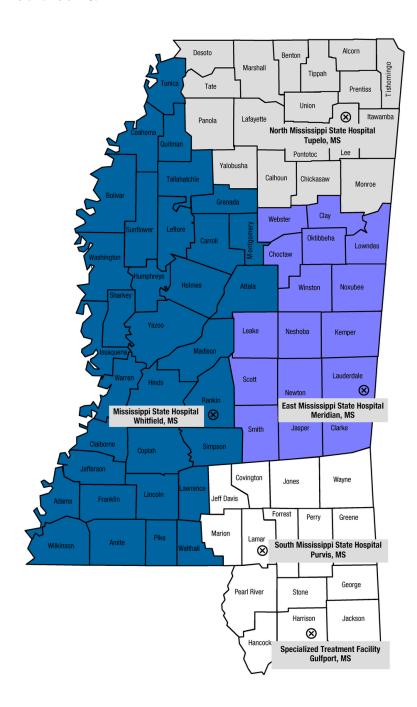
Kathy Crockett, Ph.D., Director P.O. Box 4128 West Station Meridian, MS 39304-4128 Phone: 601-581-7600 www.emsh.state.ms.us

#### North Mississippi State Hospital

Paul A. Callens, Ph.D., Director 1937 Briar Ridge Rd. Tupelo, MS 38804 Phone: 662-690-4200 www.nmsh.state.ms.us

#### South Mississippi State Hospital

Sabrina Young, Director 823 Highway 589 Purvis, MS 39475 Phone: 601-794-0100 www.smsh.ms.gov



# BEHAVIORAL HEALTH PROGRAMS

- FY25 Acute Psychiatric Served
- FY24 Acute Psychiatric Served
- FY25 Psychiatric Admissions
- FY24 Psychiatric Admissions





Mississippi State Hospital					
Service	Active Beds	FY25 Individuals Served			
Acute Psychiatric	79*	626			
Continued Treatment	55	63			
Child and Adolescent	22	119			
Forensic	97	143			
Substance Use Disorder	25	216			
Jaquith Nursing Home	198	208			

<sup>\*</sup> MSH operates 100 acute psychiatric beds for adults at full capacity, but ongoing projects related to Joint Commission accreditation have led to temporary closures. MSH was operating 79 of these beds on 6/30/25.

North Mississippi State Hospital					
Service Active Beds FY24 Individuals Served					
Acute Psychiatric	50	458			

South Mississippi State Hospital					
Service Active Beds FY24 Individ					
Acute Psychiatric	50	427			

Specialized Treatment Facility						
Service Active Beds FY25 Individuals Served						
Psychiatric Residential Treatment Facility	32	95				

East Mississippi State Hospital					
Service	Active Beds	FY25 Individuals Served			
Acute Psychiatric	75*	488			
Substance Use Disorder	25**	416			
Nursing Home	140	159			
Community Transition	56	109			
Footprints Alzheimer's Program	20	125			

<sup>\*</sup>One unit remains closed due to staffing and one unit is utilized to house only forensic patients (15 on that unit)

<sup>\*\*</sup>One unit remains closed due to staffing. The SUD facility can house 50 patients total.

# **VIORAL HEALTH PROGRAMS**

Adult psychiatric admissions by county, CMHC Region, and DMH behavioral health program. This table represents admissions from July 1, 2024 through June 30, 2025.

Region 2	MSH	EMSH	SMSH	NMSH	Total
Calhoun	1	6	2	9	18
Lafayette	1	7	1	9	18
Marshall	1	3	0	12	16
Panola	1	5	0	24	30
Tate	0	2	0	8	10
Yalobusha	0	2	0	3	5
Total	4	25	3	65	97

Region 6	MSH	EMSH	SMSH	NMSH	Total
Attala	4	1	0	0	5
Bolivar	18	0	0	0	18
Carroll	27	1	0	0	28
Coahoma	1	0	0	0	1
Grenada	8	0	0	0	8
Holmes	10	0	0	0	10
Humphreys	4	0	0	0	4
Issaquena	0	0	0	0	0
Leflore	21	0	0	0	21
Montgomery	3	1	0	0	4
Quitman	3	0	0	0	3
Sharkey	1	0	0	0	1
Sunflower	6	1	0	0	7
Tallahatchie	4	1	0	0	5
Tunica	3	0	0	0	3
Washington	13	0	0	0	13
Total	126	5	0	0	131

Region 9	MSH	EMSH	SMSH	NMSH	Total
Hinds	206	6	0	0	212
Total	206	6	0	0	212

Region 14	MSH	EMSH	SMSH	NMSH	Total
George	0	1	7	0	8
Jackson	0	3	60	0	63
Total	0	4	67	0	71

Region 3	MSH	EMSH	SMSH	NMSH	Total
Benton	1	0	0	2	3
Chickasaw	4	13	0	21	38
Itawamaba	6	1	0	16	23
Lee	8	17	0	126	151
Monroe	0	14	0	24	38
Pontotoc	1	4	0	12	17
Union	1	2	0	9	12
Total	21	51	0	210	282

Region 7	MSH	EMSH	SMSH	NMSH	Total
Choctaw	0	6	0	0	6
Clay	0	30	0	1	31
Lowndes	0	67	0	1	68
Noxubee	0	9	0	0	9
Oktibbeha	0	24	0	0	24
Webster	0	2	0	0	2
Winston	0	9	0	0	9
Total	0	147	0	2	149

Region 10	MSH	EMSH	SMSH	NMSH	Total
Clark	1	4	0	0	5
Jasper	1	15	1	0	17
Kemper	1	4	0	0	5
Lauderdale	2	71	1	1	75
Leake	1	11	0	0	12
Neshoba	0	8	1	0	9
Newton	0	10	0	0	10
Scott	1	34	0	0	35
Smith	0	10	0	0	10
Total	7	167	3	1	178

Region 15	MSH	EMSH	SMSH	NMSH	Total
Adams	29	0	1	0	30
Claiborne	5	0	0	0	5
Jefferson	7	0	1	0	8
Warren	11	0	0	0	11
Wilkinson	7	0	0	0	7
Yazoo	4	0	0	0	4
Total	63	0	2	0	65

Region 4	MSH	EMSH	SMSH	NMSH	Total
Alcorn	2	4	0	34	40
DeSoto	7	11	0	55	73
Prentiss	2	4	0	21	27
Tippah	2	3	0	16	21
Tishomingo	0	3	0	7	10
Total	13	25	0	133	171

Region 8	MSH	EMSH	SMSH	NMSH	Total
Copiah	9	1	0	0	10
Lincoln	9	0	0	0	9
Madison	45	1	0	0	46
Rankin	20	0	1	0	21
Simpson	9	0	0	0	9
Total	92	2	1	0	95

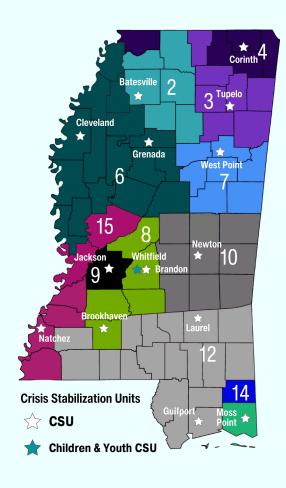
Region 12	MSH	EMSH	SMSH	NMSH	Total
Amite	4	0	1	0	5
Covington	0	0	3	0	3
Forrest	1	9	74	0	84
Franklin	4	0	2	0	6
Greene	0	0	2	0	2
Hancock	1	1	15	0	17
Harrison	3	7	120	0	130
Jeff Davis	0	2	5	0	7
Jones	2	1	13	0	16
Lamar	1	1	29	0	31
Lawrence	5	1	0	0	6
Marion	0	0	17	0	17
Pearl River	0	4	8	0	12
Perry	0	1	3	0	4
Pike	19	4	0	0	23
Stone	0	0	2	0	2
Walthall	5	0	0	0	5
Wayne	0	1	13	0	14
Total	45	32	307	0	384

#### **Crisis Residential Units**

Crisis Residential Units (CRUs) offer time-limited residential treatment services designed to serve adults with severe mental health episodes that if not addressed would likely result in the need for inpatient care. The community-based service setting provides intensive mental health assessment and treatment. Follow-up outreach and aftercare services are provided as an adjunct to this service. CRUs are partially funded through DMH grants to the Community Mental Health Centers.

Prior to 2019, the state had eight, 16-bed CRUs. In FY19, DMH began shifting funding from DMH-operated behavioral health programs to allow additional crisis beds to open in CMHC regions that did not have CRUs. DMH has continued to monitor the utilization of those beds and some beds/units have opened or closed depending on the needs and situations at the CMHCs. There are now 14 adult CRUs and 196 certified CSU beds in Mississippi.

In addition to the adult CRUs, Region 9 operates a children and youth unit that, though located on the grounds of Mississippi State Hospital, is staffed and fully operated by the CMHC.



CRU	Beds	FY25 Admissions
Batesville	16	454
Brandon	16	173
Brookhaven	16	258
Cleveland	16	301
Corinth	16	351
Gautier/Moss Point*	8	56
Grenada	16	299
Gulfport	16	342
Jackson	16	407
Laurel	16	183
Natchez	12	189
Newton	16	308
Tupelo	8	161
West Point	8	129
Total	196	3,611
Region 9 Children and Youth	12	118 Served

CRU admissions info here is compiled from monthly paper reporting provided by the CMHCs.

<sup>\*</sup>This CRU closed and stopped accepting referrals during FY25.

# **IDD REGIONAL PROGRAMS**

The Department of Mental Health operates regional programs for persons with intellectual and developmental disabilities and a specialized program for adolescents with intellectual and developmental disabilities. These programs serve designated counties or service areas and offer residential services, licensed homes for community living, and other community services. They also offer evaluation services for the ID/DD Waiver and IDD Community Support Program (1915i).

#### North Mississippi Regional Center

Dr. Edie Hayles, Director 967 Regional Center Drive Oxford, MS 38655 Phone: 662-234-1476 www.nmrc.ms.gov

#### Hudspeth Regional Center

Jerrie Barnes, Director P.O. Box 127-B Whitfield, MS 39193 Phone: 601-664-6000 www.hrc.state.ms.us

## Boswell Regional Center

Clint Ashley, Director P.O. Box 128 Magee, MS 39111 Phone: 601-867-5000 www.brc.state.ms.us

#### Mississippi Adolescent Center

Renee Burton, Director 760 Brookman Dr. Extension Brookhaven, MS 39601 Phone: 601-823-5700

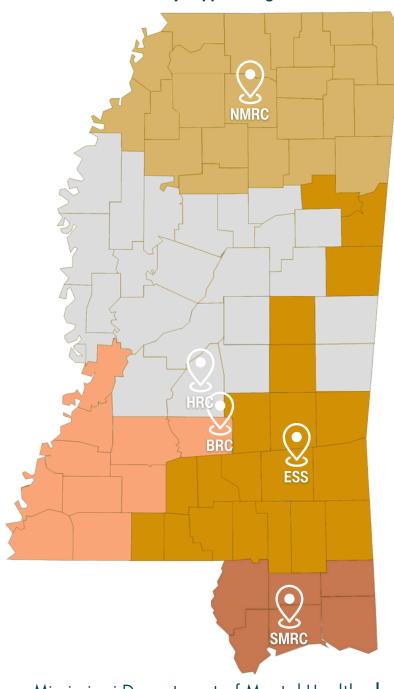
#### Ellisville State School

Dr. Rinsey McSwain, Director 1101 Highway 11 South Ellisville, MS 39437-4444 Phone: 601-477-9384 www.ess.ms.gov

#### South Mississippi Regional Center

Cindy Cooley Caples, Director 1170 W. Railroad St. Long Beach, MS 39560-4199 Phone: 228-868-2923 www.smrc.ms.gov

#### ID/DD Waiver & IDD Community Support Program Evaluation Sites



#### **IDD Regional Programs**

The types of services offered through the programs for individuals with intellectual and developmental disabilities vary according to location but statewide include ICF/IID residential services, psychological services, social services, diagnostic and evaluation services, speech/occupational/physical therapy, employment-related services and community services programs.

North Mississippi Regional Center						
Service	FY25 Individuals Served					
ICF/IID Campus	158					
ICF/IID Community Homes	167					
ID/DD Waiver Support Coordination	591					
Targeted Case Management (1915i)	247					

Hudspeth Regional Center					
Service	FY25 Individuals Served				
ICF/IID Campus	153				
ICF/IID Communiity Homes	97				
ID/DD Waiver Support Coordination	812				
Targeted Case Management (1915i)	329				

Ellisville State School						
Service	FY25 Individuals Served					
ICF/IID Campus	183					
ICF/IID Communiity Homes	89					
ID/DD Waiver Support Coordination	807					
Targeted Case Management (1915i)	270					

South Mississippi Regional Center						
Service	FY25 Individuals Served					
ICF/IID Campus	46					
ICF/IID Communiity Homes	77					
ID/DD Waiver Support Coordination	596					
Targeted Case Management (1915i)	139					

Boswell Regional Center						
Service	FY24 Individuals Served					
ICF/IID Campus	92					
ICF/IID Communiity Homes	80					
Supervised Living	102					
Supported Living	9					
Shared Supported	50					

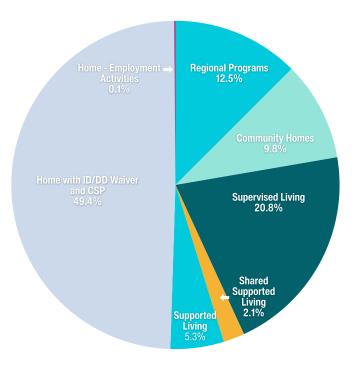
Mississippi Adolescent Center						
Service FY25 Individuals Serv						
ICF/IID Campus	38					

# **ID/DD SERVICES**

## **Where They Live**

Of the 5,252 individuals served in FY25, approximately 87% received services in the community. A total of 4,595 individuals received services in the community: 514 individuals were served in an ICF/IID Community Home; 2,965 were served by the ID/DD Waiver; 1,110 received 1915(i) Community Support Program and/or IDD Targeted Case Management (TCM); and 6 received IDD Grant Services (employment related). There was a total of 657 individuals that received services in an institutional setting.





## **IDD Regional Program Census**

	1/1/12	6/30/16	6/30/18	6/30/20	6/30/22	6/30/23	6/30/24	6/30/25	% Reduced
NMRC	277	233	207	185	166	161	159	157	43%
HRC	280	243	217	185	170	164	151	140	50%
ESS	436	277	244	231	195	182	177	170	61%
BRC	139	96	95	87	93	88	86	89	36%
SMRC	160	125	104	89	56	45	45	35	78%
MAC	32	31	32	29	28	27	31	29	9%
Total	1,324	1,005	899	806	708	667	649	620	53%

Percentage reduced is overall reduction in campus census since 2012

# **ID/DD WAIVER SERVICES**

Mississippi's ID/DD Waiver provides individualized supports and services to assist people in living successfully at home and in the community and are an alternative to care in institutional settings. These Medicaid funded supports and services are available as long as the cost of supporting individuals in the home or community does not exceed the cost of caring for individuals in institutional settings. The ID/DD Waiver includes an array of services aimed at assisting people to live as independently as possible in their home and community. Services include: Supported Employment, Home and Community Supports, Supervised Residential Habilitation, Day Services-Adult, In-Home Nursing Respite, Community Respite, ICF/MR Respite, Prevocational Services, Specialized Medical Supplies, Behavior Support/Intervention Services, and Speech, Occupational and Physical Therapy. To access ID/DD Waiver services, contact the appropriate ID/DD Regional Centers to arrange for an evaluation.

Since FY12, the number of people enrolled in the ID/DD Waiver has increased from 1,831 individuals enrolled at the end of FY12 to 2,965 individuals served in FY25.

#### **New Enrollment in ID/DD Waiver**

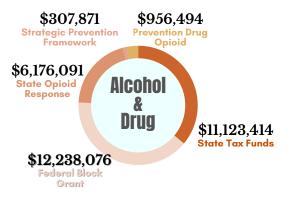
**End of FY Census for ID/DD Waiver** 

	From Institutions	From Planning List	Total
FY12	39	56	95
FY13	166	89	255
FY14	123	168	291
FY15	105	96	201
FY16	88	237	325
FY17	69	133	202
FY18	5	81	86
FY19	69	78	147
FY20	63	41	104
FY21	25	57	82
FY22	27	110	137
FY23	27	96	123
FY24	31	167	198
FY25	24	182	206
Total	803	1,328	2,131

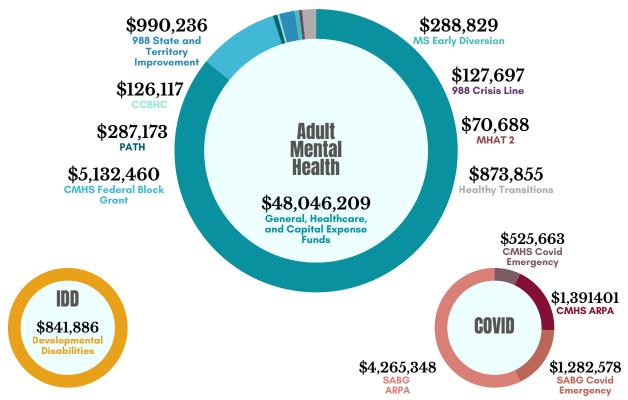
	Newly Enrolled	Total Enrolled
FY12	95	1,831
FY13	255	1,961
FY14	291	2,189
FY15	201	2,296
FY16	325	2,503
FY17	202	2,646
FY18	86	2,682
FY19	178	2,675
FY20	104	2,759
FY21	82	2,765
FY22	137	2,747
FY23	123	2,733
FY24	198	2,868
FY25	205	2,965
Total Increa	62%	

Prior to FY20, the Total Number Enrolled figure represents an end-of-year census. From FY20 onward, the figure is an unduplicated total number of individuals served from the Medicaid 372 report.

# FUNDING







## **FUNDING SOURCE EXPENDITURES**

\$25,028,931 Legislative ARPA \$19,328,323 Healthcare \$38,662,972 Federal Funds \$380,958,483 Other Special Funds \$425,968 Capital Expense Funds

\$33,579,694 IDD Programs \$49,181,348 Service Budget (Community Services) \$105,686,545 Behavioral Health Programs \$62,882,100 Medicaid (State Share/Bed Taxes) \$4,395,882





