

Integrating Behavioral Health in Rural Kansas: Building a Sustainable System from the Start



“It’s so important to me to normalize and destigmatize therapy...and the importance of helping people realize that it’s just a stepping stone. It’s another tool in your belt.”

In the heart of Kansas, **Greeley County Health Services** is redefining how small, rural communities approach behavioral health. With funding from SAMHSA, the county has launched an initiative to integrate behavioral health into its local hospital clinics, an ambitious effort to make mental health care a routine part of medical care. Now in year two of a five-year grant, the program aims to bridge gaps across multiple systems, from primary care to schools and senior centers. Simultaneously, they aim to reduce stigma and increase access to mental health and substance use treatment in farming communities where services have long been lacking.

Consistent with a collaborative care model, the program works to ensure a warm handoff, meaning mental health conversations are not separate from medical care but embedded within it. This integrated approach allows for real-time communication between providers about patients’ mental health symptoms, medications, and service and resource needs.

Even amid the program’s early success, the team knows that grant funding won’t last forever and that building sustainability from the start is essential. This begs the question: How do you build a sustainable integrated health care system in a rural community?

Factors Behind the Success

At the center of the program’s progress is the people. Collaboration between local medical providers and other community systems like senior centers and schools has created new pathways for connection and referral. The grant has also provided essential infrastructure, enabling the program to begin hiring and retaining behavioral health staff.

The program’s success has largely been driven by the presence of the local medical system’s first licensed therapist who has served as the program’s “champion”. Their work to actively build roots in the community and gain credibility among patients has already helped increase awareness of behavioral health needs and services in the community. This connection has been vital for building trust and reducing stigma, which can go a long way towards highlighting the value of sustaining the program.

Grant requirements also include collecting evaluation data, like the Patient Health Questionnaire-9 and the National Outcome Measures, to track clinical improvement, intending to guide the program’s sustainment and provide evidence of the program’s impact.

Challenges Along the Way

Like many rural areas, Greeley County faces ongoing challenges to sustaining behavioral health services long term. Funding remains a pressing concern since services are currently offered at no cost and rely heavily on grant dollars. With limited alternative funding streams in the county, there is uncertainty about how services will continue once the SAMHSA grant ends.

Recruitment and workforce shortages present another hurdle. The county currently has only one licensed therapist, and attracting additional providers is difficult given the rural location and the lengthy credentialing process required by the state.

Stigma remains another barrier, especially among the farming community where isolation, financial stress, and cultural attitudes can deter individuals from seeking care.

Pathways to Lasting Change

“The goal was to really integrate the medical side of things with the behavioral health.”

Despite these challenges, the program remains steadfast in actively planning for sustainability. The county is exploring new billing strategies, including Medicaid and insurance reimbursement, to keep services available after the grant period ends. Cross-training medical assistants in life coaching and mental health certification is building internal champions and creating a tiered system of support even when staffing is limited. Additional staff education efforts, such as their suicide prevention in farming communities training, are further deepening local capacity.

The program continues its efforts to embed behavioral health into familiar community settings such as the previously mentioned senior centers and schools. These partnerships not only expand reach but also help normalize mental health care as part of everyday life in Greeley County. The program is also working to implement new treatment plans with measurable data to track patient progress, show positive outcomes, and make the case for long-term investment.

Results That Last

For Greeley County Health Services, sustainability will mean more than continuing a program. It will mean changing a system and changing a culture. As program staff puts it, success will come when stigma has decreased, when the farming communities are engaged in care, and when behavioral health is embedded in the county’s systems as a first line of support. So far, early results are promising. Demand for services has been strong, signaling both community need and acceptance. Program staff report that patients are engaging in services, and mental health awareness has grown across county systems that once had limited involvement.

Beginning as a vision from a small team of dedicated health providers, the program is quickly becoming one of the county’s only structured behavioral health systems and a model for how rural communities can build sustainable, integrated health care. Greeley County is showing what’s possible when behavioral health is no longer seen as separate from medical care, but as an integral part of it.



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