



The New York State Conference of Local Mental Hygiene Directors, Inc.

***Joint Legislative Budget Hearing on Mental Hygiene
SFY 2020-2021 Executive Budget Proposal***

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Testimony Presented By:

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Executive Director***

Chairwoman Krueger, Chairwoman Weinstein, Senator Carlucci, Assembly member Gunther, Senator Harckham, Assembly member Rosenthal, and other distinguished Committee Members, thank you for this opportunity to testify before you regarding the SFY 2020-21 Executive Budget.

My name is Kelly Hansen and I am the Executive Director of the New York State Conference of Local Mental Hygiene Directors (the Conference).

The Conference represents the Directors of Community Services (DCSs)/County Commissioners of Mental Health) for each of the counties in the State and the Department of Mental Hygiene for the City of New York, also referred to as the Local Governmental Unit (LGU). The DCSs are county officials and have specific responsibilities and authority under the Local Services provisions of Article 41 of the Mental Hygiene Law (MHL) for planning, development, implementation, and oversight of services to adults and children in their counties affected by mental illness, substance use disorder, and developmental disabilities.

My testimony outlines the Conference's State Budget priorities for SFY 2020-21:

- Continued State Aid Funding to the LGUs to sustain jail-based substance use disorder (SUD) treatment programs and transition services in county correctional facilities (outside of NYC)
- Support for the #3for#5 Campaign to secure a 3% investment for the Human Services Sector for 5 years
- Increased State Aid Funding for the Office of Mental Health (OMH) Supported Housing Programs
- Significant concerns regarding a new cost to County Mental Hygiene Departments related to individuals receiving inpatient treatment at State Psychiatric Centers pursuant to a 730.20 order for competency restoration

LGU Role in County Correctional Facilities

The LGUs/DCSs are charged with specific responsibilities under Mental Hygiene Law (MHL) to plan for and oversee integrated services in their counties. In order to carry out this role, the DCSs have a bird's-eye view of the mental health, substance use disorder and developmental disabilities services systems, and linkages to the related services in the county.

The people we serve never need just one service. Their needs are complex and extend beyond the scope of behavioral health care and into other distinct areas, such as housing, public benefits, the criminal justice system and the county jail.

The County Mental Health Commissioners have long recognized the need for an appropriate level of resources to initiate SUD treatment program and transition services in jail settings. The opioid epidemic exacerbated the number of individuals with substance use disorder cycling from their communities, into the local jail and back to the community.

With your support, New York has developed a comprehensive networks of addiction treatment services in the community, yet, funding was not available to the LGU's to develop services in the jail, despite strong evidence that such programming reduces crime and saves lives. We were missing a unique opportunity to offer treatment and support during periods when people are experiencing abstinence and may be more receptive to begin treatment. It is a critical time to engage an individual in choosing a lifestyle of abstinence and recovery.

The Need for Continued State Aid Funding to the LGUs to sustain Jail-Based SUD Treatment and Transition Services Programs

Over the past two budget cycles, the State has committed to provide \$3.75 million in State Aid funding to the LGUs to develop and sustain jail-based SUD treatment programs and transition services in forty-nine (49) county jails. These services include, peer support, CASAC services, group and individual therapy, co-occurring treatment, relapse prevention, medication assisted treatment programs and re-entry planning. An additional \$1 million was also included through a legislative add in the SFY 2019-20 Enacted Budget to support the cost of the medications used in providing medication assisted treatment (MAT) in 24 jails, with 16 jails receiving \$50,000 and 8 jails receiving \$25,000.

As part of the \$3.75 million for jail-based SUD programs, the majority of counties received \$60,000 each, which includes jails with large census. As you can imagine, this level of funding does not offer enough support in those counties to offer needed programming to all individuals positively screened for SUD.

Additionally, seven counties have allocations ranging from \$115,000-\$200,000 and were able to considerably expand programming. To illustrate the impact of a \$200,000 State Aid award, Broome County has been able to now offer a strong set of clinical protocols and interventions, as well as transition services, all forms of MAT and Naloxone at the time of release. It is also important to note that Broome County is uniquely situated to offer Buprenorphine and Methadone, with twenty-four (24) Buprenorphine waived prescribers and an available Opioid Treatment Program (OTP) clinic provider.

The Conference is pleased to report that all counties have been successful in developing basic level programs or offer an expansion of certain SUD treatments and/or transitions services. In August 2019, CLMHD surveyed counties that received funding from prior budget years to identify how the funding has been spent. Our survey specifically asked which treatment and transition services including MAT services were developed for the first time, and if the jail had previously offered services, which of those services were enhanced.

Results showed an increase in treatment and transition services in all awarded counties. Those counties that previously offering no services were successful in establishing SUD screening and assessments, individual and group counseling and some transitional services. Counties that received higher levels of State Aid funding expanded services and expanded MAT programs using existing clinical protocols and support activities.

| Jail-Based SUD Services | New Service | Enhanced Service | Total |
|--------------------------------|--------------------|-------------------------|--------------|
| Screening & Assessment | 12 | 22 | 34 |
| AA/NA | 5 | 13 | 18 |
| Counseling: Indiv and/or Group | 20 | 19 | 39 |
| Co-Occurring Disorder | 6 | 20 | 26 |
| Psychoeducation | 13 | 17 | 30 |
| Peer Supports | 14 | 15 | 29 |
| Transition/Reentry | 15 | 22 | 37 |

| MAT | Buprenorphine | Methadone | Vivitrol |
|---------------------|----------------------|------------------|-----------------|
| Total # of counties | 13 | 10 | 34 |

(As of August 2019)

Continued funding for these existing programs is critical for their sustainability and we are grateful that the Governor has included another \$3.75 million in the SFY 2020-21 proposed Executive Budget for the existing 49 jail programs. Unfortunately, the \$1 million to cover the costs of MAT medications in 24 jails was not continued in the Executive's budget.

The Conference graciously asks for your support of an additional \$3.25 million in State Aid funding to support jail-based SUD programs in all unfunded counties outside of NYC, and for the continuance of the 24 jail MAT programs, for a total State Aid investment of \$7 million in SFY 2020-2021.

| State Fiscal Year | Appropriation Request |
|-------------------|--|
| 2020-21 | Total appropriation request is \$7 million Executive Budget Proposal \$3.75 million + new \$3.25 million |

#3for#5 Campaign – 3% Investment for the Human Services Sector for 5 Years

The Conference is part of the statewide #3for#5 campaign that is calling for a three percent increase in funding for not-for-profits in the human services sector every year for the next five years.

This campaign is unprecedented in its scope through the inclusion of every major statewide not-for-profit agency in the mental health, addiction disorder, developmental disabilities, child welfare, foster care and aging community.

Unfortunately, for the last decade, funding increases for these agencies have not been included in the State’s Enacted Budgets. This has resulted in a loss of over \$1 billion in promised financial support. The result is that the quality of services are declining, many agencies have had to institute waiting lists for care, facilities are deteriorating and agencies are unable to offer competitive living wages to attract and retain the skilled staff necessary to deliver quality care and support – all which restricts access to care and jeopardizes the sustainability of critical treatment services programs.

As the demand for these services continues to rise, the DCSs see first-hand how a lack of adequate financial investment by the State negatively affects the people in their communities because access to care is compromised. Providers who rely heavily on State funding, are now faced with the reality of no longer being able to effectively serve their clients and facilitate meaningful, long-term engagement that is so critically important to human services.

The Conference strongly supports an investment in these critical sector and urges you to continue your leadership for the human services sector through your support of #3for#5.

Increased OMH Housing Rates - Bring It Home Campaign

The Conference strongly supports the Bring It Home Campaign’s efforts to address the \$165 million deficit by requesting an additional \$20 million for OMH supported housing providers to match the appropriation included in the SFY 2020-21 Executive Budget proposal.

Long-term viability of housing programs for individuals with Serious Mental Illness (SMI) and Substance Use Disorder (SUD) is an essential component of recovery and critically important to the DCSs and the communities they serve.

Supported housing providers are expected to serve clients with the highest and most challenging needs. However, the current level of funding is based on an outdated model of care and does not account for the complex and comorbid behavioral and physical health conditions. Additionally, the reimbursement does not adequately support the appropriate management of this higher level of service, specifically the staffing levels required to safely serve medically-complex individuals which is causing significant waiting lists for supported housing.

Access to well-staffed supported housing is also critically important for individuals under an Assisted Outpatient Treatment order. The outdated housing models and reimbursements for higher-need clients continues to negatively impact a county's ability to provide appropriate access to this, and all levels of care.

The Conference appreciates the Governor's commitment to increase State Aid by \$20 million in SFY 2020-21 however this investment will only support a limited number of housing providers. We hope to count on your support this budget cycle for the additional funding necessary to sustain the entire OMH supported housing system of care.

Increased cost to counties of 730.20 Competency Restoration of individuals in State Psychiatric Centers

There are multiple proposals included in this budget which, if enacted, would have a fiscal impact to counties. Among them is an action which would have a direct and devastating fiscal impact on County Mental Health Department budgets. The Conference will be providing more detailed information to you very soon.

The proposal would require counties to pay 100% of the cost of individuals receiving inpatient treatment at State Psychiatric Centers pursuant to a 730.20 order for competency restoration. The result is hundreds of thousands of dollars of state costs shifted to counties for the cost of treatment of individuals in state psychiatric centers who are in the care and custody of the state. The revenue to the state is allocated directly to the General Fund.

It is imperative that the Legislature support the counties in eliminating this cost shift to local mental health departments which would erode funding available for community services.

Recognition of Dr. Theodore Kastner, Commissioner of the Office of People with Developmental Disabilities (OPWDD)

Finally, the Conference would like to acknowledge the great work of Dr. Theodore Kastner, Commissioner of the Office of People with Developmental Disabilities (OPWDD) and his team thus far, and the collegial and collaborative engagement with the Conference and its members since his arrival. The Conference is extremely appreciative of the Agency's time and efforts in meeting with the DCSs on a regular basis and are very appreciative of the open door policy we now have with OPWDD. On behalf of the entire Conference, we look forward to continuing our work together to advance the goals of our two organizations for the individuals and families we serve in our communities.

I, again, thank you for the opportunity to address you regarding the Conference's budget requests for the SFY 2020-21 State Budget and I am happy to provide you with any further information or answer any questions at this time.

