



Mental Health Association in New York State, Inc.

Glenn Liebman, CEO

Sylvia Lask, Board Chair

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Testimony to:

**Assembly Ways and Means
and Senate Finance
Mental Hygiene Budget Hearing**

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...working to ensure available and accessible mental health services to all New Yorkers

194 Washington Avenue, Suite 415, Albany, New York 12210-2314
Telephone: 518-434-0439 Fax: 518-427-8676 www.MHANYS.org

Thank you very much for the opportunity to testify today. I would like to acknowledge Assembly Ways and Means Chair, Farrell and Senate Finance Chair, Krueger. We are also appreciative of the participation of several legislators including Assembly Mental Hygiene Chair, Peter Rivera and Senate Mental Hygiene Chair, Thomas Morahan.

My name is Glenn Liebman and I am the CEO of the Mental Health Association in New York State. Our organization is comprised of 31 affiliates in New York State in fifty four counties. Most of our members provide mental health services in their communities. We also provide training and education about mental illness and we advocate for the positive transformation of the mental health system.

1) Community Mental Health Funding

To the credit of Governor Paterson, the Division of the Budget and the New York State Office of Mental Health, the cuts to community based mental health services proposed in this year's budget do not dramatically impact our community based service infrastructure.

Eight days ago the entire mental health community came together and we brought over 1500 people to Albany for our largest rally ever. Our message was to protect the mental health safety net. Without this safety net, many individuals will end up in institutionalized settings such as emergency rooms, hospitals and the criminal justice system.

During the Deficit Reduction Plan negotiations, the Governor proposed a cut to mental health of ten percent, the final number at the end of negotiations ended up being 12.5%. We need your help this year in making sure that if there are other areas of the budget that get restorations, mental health funding is not used to help in restoring cuts to these other areas. First and foremost, please protect our safety net by supporting a funding increase before the safety net continues to erode.

There are five reasons why we urge you to support a 2% mental health funding increase:

A) The Need is Increasing: The Economic Crisis is a Mental Health Crisis

We all know how difficult these times are in New York State and the country. The economic recession has hit us all very hard---unemployment, foreclosures, bankruptcies have become part of the everyday existence for many people.

One of the most unfortunate byproducts of this recession is the increasing need for mental health services. The statistics validate our perceptions. Numbers of calls to suicide hotlines have dramatically increased, clinical visits to mental health professionals have increased and the numbers of completed suicides have also increased. As noted in a Wall Street Journal article about the mental health impact of the economy, *“Research shows that suicides and psychiatric hospitalizations tend to peak at the lowest point of a recession when unemployment is at its height.”*

As our members across New York State can tell you, there is also a dramatic increase in the people who are entering the public mental health system because of this recession. Given all that is going on, I believe one of the most important messages I can leave you with today is that The Economic Crisis is indeed a Mental Health Crisis.

B) Community Mental Health Services are Cost Effective and Efficient

Community based services are the lifeblood for mental health services. They also provide the best bang for their buck. They are much less expensive than state operated programs and they provide strong outcomes. Our mental health associations throughout the state work in partnership with peers (several of our agencies are run by peers), families, county and state government to insure successful outcomes for individuals with psychiatric disabilities. Community based services are also the ultimate safety net for many people who would end up in emergency rooms, hospitals, the shelter system or in the criminal justice system without these services. We save the state a great deal of money by running community based services.

C) Mental Health Has Received Less Percentage Funding than other Areas of the Budget

Despite the state's support, the mental health funding has still lost ground even in good times. The community system has been underfunded for many years. Finally, a few years ago, we were able, through the help of the Legislature and the Executive to get a three year commitment for a COLA for our workforce. For two years, we received this funding then last year we did not get the COLA nor is it funded for this year. If our community had gotten the COLA last year, it would have represented a 5.7% increase for community mental health programs.

D) Other Well Deserving Providers are Receiving a Proposed COLA

In this year's proposed budget, other sectors have been recommended to receive additional funding including nutritional assistance groups, school health, asthma services, pre-natal care, lead poison prevention, regional prenatal centers, Alzheimer's research, tobacco control, rabies, developmental disabilities, tuberculosis control and many other areas. All are very worthy causes and well deserving of additional funding. Yet, there is not one additional dollar added for community mental health.

E) Agency Expenses Keep Rising Dramatically

The other reason there is a desperate need for more funding is that the expenses of running an agency keep increasing, health care cost, electricity, gas are all costs that continue to rise dramatically. I run an agency and our health premiums went up well over eighteen percent this year. We need help to run programs in our communities.

Though we have to protect what we have, we can ill afford any more erosion of the system. We all know how tight the times are but given how inexpensive it is to run community based services, how inequitable funding has been for our sector and how much money we save the state, we strongly believe it is a good investment to provide additional funding in the budget for mental health.

For those many reasons, MHANYS and many of our colleagues are urging your support for a 2% funding increase this year for community mental health funding. This comes to approximately \$20 million.

Recommendation

- **Please provide a 2% across the board increase for community based mental health funding at a cost of \$20 million.**

2) Health Care Enhancements

Health Care Enhancements are incentives to help defray the high cost of health care for direct care workers in the OMRDD community. In the five years of this program, there has been over \$140 million in funding to help direct care workers in OMRDD with their health insurance. These incentives are used to pay for co-pays, deductibles and health care accounts for direct care workers. It is a wonderful program and it is well deserved for the hard working direct care workers in the OMRDD system.

Thanks to the leadership of Senator Thomas Morahan and the strong support of Assemblyman Peter Rivera and Commissioner Michael Hogan, for the first time ever two years ago, there was a one time allocation of \$300,000 for a study of health care enhancements in the mental health side. Due to funding constraints the money did not come out till last year and it was cut by 25%. However, part of that funding has been used to survey mental health agencies across New York State to find out about their health insurance costs for their direct care workers. In March, we will be providing a full report for the legislature about these findings. However our preliminary findings indicate that health care costs have risen dramatically and many direct care workers with families are barely able to pay for health insurance and some do not even receive any health insurance.

Concurrent, with that study, funding has been used to help create resource centers around the state to help link direct care workers in mental health with existing plans such as Family Health Plus and Child Health Plus. This project is only established for another six months. It is a win/win as it saves money for the agency and provides better health insurance for the individual.

Unfortunately, this is one-time money, so we urge your support in providing funding of \$200,000 in this year's budget to continue this program. Ultimately, we want to make sure that there is funding in

place for health care enhancements as part of the state budget for the mental health workforce, but for the short term, we urge your support for this funding.

Recommendation

- **Provide \$200,000 in funding for the continuation of the Health Care Enhancement Project.**

3) Parents with Psychiatric Disabilities

Despite all the major changes that have been made to alleviate the stigma of mental illness from society, there are still many areas in which stigma is still incredibly pervasive. One of those areas is for parents with psychiatric disabilities. Over fifty percent of all adults in the mental health system are parents.

Unfortunately in many cases, much of it having to do with the stigma of mental illness, many of these parents have had their rights terminated simply because of their diagnosis. This has to change and we thank Senator Huntley and Assemblyman Rivera for introducing legislation last year to end that stigma.

Several states have had similar laws and the trend around the country appears to take disabilities including mental illness out of the law completely. In New York State, we are urging the elimination of diagnosis from any criteria involving the termination of parental rights. Never should a New Yorker lose custody of their child simply because of their diagnosis.

Because of the work of the Legislature, there was \$850,000 added to the budget for the first time to help provide legal advocacy to these parents as well as help in development of community based services for these parents. Our colleagues at Central New York Legal Services and the Urban Justice Center have been doing a wonderful job with providing legal counsel to these parents and we urge your support in helping to fund this project. This project also saves the state millions of dollars by helping to reunite families instead of a child ending up in the much more costly foster care system.

We have also received funding for the project to work on community based services for these parents through training initiatives, educational programs and tool kits to help provide them with stronger parenting skills to help insure that they keep custody of their child.

Recommendation

- **We urge the legislature to support \$850,000 in continued funding for parents with psychiatric disabilities.**

4) Adult Homes

Though this funding comes out of the Health Budget, it is an important issue to discuss because it greatly impacts individuals with psychiatric disabilities in adult homes.

In the past few years, there have been three distinct funding pools for adult home residents and the operators. There is QUIP funding which is largely used by operators to provide help in capital and infrastructure projects, there is ENABLE funding which is largely used to help in the quality of life and activities of daily living skills for residents and there is, thanks to the legislature, funding for air conditioning for residents.

This year the Department of Health has proposed combining all these funding streams into one large funding pool.

We do not support this proposed budget change. We think that each of the funding streams has its distinct purposes. Also included in combining the funding was the elimination of residents' council sign off on funding for these projects. We strongly believe that the residents should continue to have a say in how this funding is utilized.

In early September an appellate court judge ruled that the state must provide 4300 units of supported housing over the next three years for adult home residents. The state has sent a remedial plan in response to the Judge that includes 1000 units of supported housing over the next five years. We think that the state's plan is not responsive to the needs of residents who want to leave the homes.

There are existing resources at the state's disposal (assessments, independent case managers and ENABLE funding) that they can use to help residents move forward in their lives to more independent housing. These resources should be utilized so that residents who want to leave the homes can immediately do so.

Given this current atmosphere and the significance of some of these funding streams, the state should do what ever it can to empower residents, including the assurance of as much resident council input as possible, as well by making sure that the ENABLE funding and the Air Conditioning funding remain in place separately from other funding arenas.

We also note that the major advocacy group for adult home residents, the Coalition of Institutionalized and Aged Disabled (CIAD) has had its funding cut this year. They do an impressive job in helping to empower residents of adult homes in making their own decisions and providing the resources to help these people move forward in their lives. We urge your support for refunding their program.

Recommendations

- **We urge that the legislature reject the Department of Health's funding program to combine mental health funding streams. Instead leave them distinct and insure that there is resident council sign-off for all of these funding streams.**

- **Provide \$75,000 in funding for the CIAD for their lay advocacy on behalf of adult home residents.**

5) Medication Accessibility

For the last several years, the state has proposed the elimination of the carve-out for anti-depressant medications as part of the Preferred Drug List. The legislature led by Assemblyman Peter Rivera has been a leader in rejecting these proposals.

This year, while there is no proposed cut, we are still concerned about the administrative language crafted by the Department of Health regarding usage of mental health medications.

A full carve out for mental health medications for people on Medicaid with psychiatric disabilities has been an important protection. We are not completely sure what this new language means but we urge your support in insuring that accessibility to all classes of mental health medication remains in place.

Recommendation

- **Closely monitor the Department of Health Language around medication accessibility for mental health medications**

6) Juvenile Justice

There have been several reports recently including one from the Department of Justice regarding the myriad of issues surrounding juvenile justice in New York State. One of the consistent findings in all the reports is the large percentage of youth with mental illness that enter the juvenile justice system.

It is incumbent that the state provides greater support to our community to help develop alternative models for youth with psychiatric disabilities. We have heard constant refrains from judges that that they would place kids in their communities if they had better mental health treatment programs in their communities.

The framework for such interventions should involve a strong screening and assessment process as well as diversion services to alternative community based mental health models that include clinical components such as Motivational Interviewing, Family Functional Therapy, and Multi Systemic Therapy. There should also be other non-clinical components including mentoring, budgeting and Actives of Daily Living Skills Training.

Recommendation

- **Work to develop an alternative community based mental health model that incorporates best practices to divert youth with mental illness from entering the juvenile justice system.**

7) Other Significant Mental Health Issues

One of the most important priorities for individuals with psychiatric disabilities is housing. Much of the pipeline for mental health housing has been delayed because of the economic crisis. We must continue to fund housing options for individuals with psychiatric disabilities. There are several priority populations including individuals discharged from hospitals, those leaving adult homes and nursing homes and individuals released from correctional settings. We also ask that you remember the population of children with psychiatric disabilities living with their parents. This is also a significant population that must be addressed in the state's public policy towards housing.

The legislature has been our leaders on issues of senior and mental health services. You have funded the groundbreaking Geriatric Mental Health Act which is the first legislation in the country that addresses the mental health needs of this population. We urge your continued support for this initiative.

You have also been leaders in the funding of suicide prevention programs. As we noted earlier, the economic crisis has led to an increase in the number of individuals who have completed suicide. We need your help in continuing to fund suicide prevention programs in New York State. Now more than ever, we need your support on this issue.

One of the other areas of significance that the legislature and administration continues to address in recent years is issues of returning veterans with mental health issues, most notably Post Traumatic Stress Disorder. We urge your support for a Veterans Mental Health Act, similar to the Geriatric Mental Health Act and we also urge your continued support for the NASW-NYS Veterans Mental Health Training initiative.

We also urge your help ending the mental health system funding for sex offenders in the state's psychiatric system. These offenders are much more appropriately treated in the correctional system where they can receive appropriate services at less cost to the state while providing even greater protections for our citizens.

Summary

In summary, we want to thank the legislature for all you have done in the past years for individuals with psychiatric disabilities. Given the mental health impact of the economy combined with the lack of equity in funding for mental health and rising costs, we urge your help in adding a 2% increase in the budget for the mental health workforce.

We also urge your support for essential programs such as health care enhancements and parents with psychiatric disabilities.

Even though these areas are not specific to the mental health table, we urge your support for equitable funding for adult home residents, insurance of medication accessibility and support of alternative models for juvenile justice.

Thank you very much for your time and support.