February 3, 2020

Testimony of The NYS Office of Mental Health to NYS Assembly & NYS Senate Fiscal Committees



Good morning, I am Dr. Ann Sullivan, Commissioner of the New York State Office of Mental Health (OMH). Chairs Krueger, Weinstein, Carlucci, Gunther, and members of the respective Committees, I want to thank you for the invitation to address OMH's 2020-21 proposed Budget.

I would like to thank the Legislature for your continued support of Reinvestment funding, which emphasizes providing care in community-based settings. Since 2014, with a commitment of more than \$100 million in annualized investments to date, OMH has been able to provide services to more than 70,000 new individuals, bringing the total to over 800,000 people served in the public mental health system. Examples of the new community services that have been funded are Supported Housing Units, Child and Adolescent Crisis/Respite Beds, Clinic Program Expansion, additional OnTrackNY Teams, Crisis Intervention Programs, Assertive Community Treatment (ACT) Teams, Long-Stay Transition Support Teams.

Because these community services are available, New Yorkers can get the support they need to avoid hospitalization, access inpatient services only when needed, and live successfully in their communities.

Building on these investments, the 2020-21 Executive Budget recommends significant investments for the OMH not-for-profit workforce. These investments include resources to leverage over \$40 million in new annual funding to provide targeted compensation increases to direct care and support and clinical staff and to support provider costs for minimum wage increases.

The Executive Budget increases support for OMH housing initiatives by an additional \$20 million for existing residential programs. Since 2015, OMH support for these programs will have increased by \$70 million. Additionally, the Budget includes \$60 million in capital to maintain and preserve community-based residences. The Budget provides an additional \$12.5 million for certain individuals living in transitional adult homes in New York City who wish to transition to more integrated settings in the community.

The comprehensive parity reform enacted last year will enhance State oversight of insurers and require them to apply the same treatment and financial rules to behavioral health services that are used for medical and surgical benefits. Importantly, this new law authorizes OMH review and approval of medical necessity criteria used by plans.

Additionally, the creation of the Behavioral Health Ombudsman program, otherwise called CHAMP (Community Health Access to Addiction and Mental Health Care), and the enactment of the Mental Health Substance Use Disorder Parity Reporting Act have assisted individuals and their families in accessing behavioral health services. CHAMP has handled 1,600 cases while providing education to an additional 5,000 individuals, family member, caregivers, or providers.

In October 2015, New York State was one of 23 states who were awarded a one-year planning grant and an implementation grant two years later from the federal government

to create Certified Community Behavioral Health Clinics (CCBHCs). CCBHCs improve health outcomes through increasing access to care; reducing avoidable hospital use; and providing behavioral health care entities in underserved areas with more financial stability; and integrating mental health, substance use, and physical health services. OMH's experience has been increased access to enhanced behavioral health services and decreased need for acute care for both mental and physical health.

School based mental health clinics are another area where New York State continues to increase Access to treatment by providing services on-site. Currently there are 806 School-based Mental Health Clinics in New York State. Three years ago, there were less than 300 such clinics.

Suicide prevention continues to be a priority issue. OMH has partnered with State agencies and communities to implement recommendations from the Governor's Suicide Prevention Task Force. The Task Force also identified gaps in suicide prevention efforts and made recommendations to identify at risk populations where increased engagement efforts are needed, including Latina youth, LGBTQ, Black Youth, Veterans, and individuals living in rural communities.

The FY 2021 Executive Budget includes a plan to transform the Kingsboro PC campus into a "Recovery Hub Facility", focused on shortening lengths of stay and providing centralized community support services including a {voluntary-operated,} step-down transition to community residence program. This transition is consistent with OMH's patient centered approach to care with an emphasis on recovery.

Finally, OMH's goal is to increase access to prevention and community services intervening prior to the need for more intensive and costlier care. For those who continue to need inpatient hospitalization, New York State has the highest number of psychiatric inpatient beds, per capita, of any large state in the nation and we will continue to preserve access to inpatient care as we transform the system.

Again, thank you for this opportunity to report on our efforts to support and continue the work that we have jointly embarked upon to transform New York's mental health system.