

North Country Behavioral Healthcare Network

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Testimony to the New York State Joint Legislative Budget Hearings: Health/Medicaid, Human Services and Mental Hygiene Committees

Executive Summary:

North Country Behavioral Healthcare Network (NCBHN) is comprised of twenty nonprofit member agencies providing mental health (MH) and substance use disorder (SUD) services in New York's seven northernmost counties as well as the Akwesasne Mohawk Reservation, together making up New York State's "North Country."

NCBHN appreciates the opportunity to provide testimony to the Joint Committee on Human Services with regard to issues salient to the behavioral healthcare (BHC) community at a time of continuing fiscal and professional challenge to the system.

New York State faces significant challenges this year posed by a widening budget gap driven, for the most part, by the Medicaid expenditures that have provided and continue to provide essential healthcare services to a growing percentage of the State's residents. The executive budget proposal provides little detail with regard to closing that gap, instead charging a new iteration of the Medicaid Redesign Team with that task. In order to be successful, it is imperative that BHC providers are included as equal partners in models moving forward, and that they are funded as such. The National Institutes of Health report that 80% of Medicaid super-utilizers have comorbid mental illness with 44% having serious mental illness. It is well known that the greatest healthcare costs accrue when these conditions are left untreated or are inadequately treated. Meanwhile, the devastation of the opioid epidemic goes on largely unchecked, and we are now facing a new health crisis in the form of vaping.

Children and adolescents present especially vulnerable populations, and the Governor has voiced a commitment to increasing access to behavioral health services for them. NCBHN therefore calls upon the Legislature to support a moratorium on any cuts to BHC services for children and adolescents as proposed by the New York State Coalition for Children's Behavioral Health.

In making application for DSRIP 2.0 funds, New York aligned its strategies with Federal objectives and core practices which are heavily geared toward addressing behavioral health conditions including "***investing in the behavioral health workforce.***" In light of the current fiscal challenges associated with healthcare costs, ***a significant investment in behavioral healthcare will substantially eliminate the considerable and far-reaching downstream costs of untreated mental illness and addiction.***

NCBHN therefore calls upon the Legislature to initiate the process of prioritizing BHC in the State budget as follows:

- Enact the investment called for by the “3-for-5” campaign; a 3% cost of living adjustment (COLA) for all human service workers for the next five years, beginning with this budget;
- Considering that this is a very challenging budget year, NCBHN is appreciative of the Governor’s commitment of \$20M toward existing mental health housing. While much more is needed, this is a positive beginning, and we strongly urge the Legislature to retain this funding in the 2020-2021 budget;
- We note that Rural Health Network Development and Rural Healthcare Access Development budget lines have been cut by 38%. After devastating reductions of 21% for these services in the 2017-2018 budget, NCBHN calls upon the Legislature to eliminate these cuts and restore funding for these critical rural health services to the full 2019-20 levels;
- The executive budget proposes the legalization of recreational marijuana for adult use. Given the real experience of other states who have engaged in the legalization of marijuana for recreational purposes, as well as the potential for greater access for NYS’s youth, NCBHN cannot support a budget initiative to accomplish legalization. However, we fully understand that there is an enthusiastic lobby in favor of it, and we describe below some guidelines that we encourage should legalization occur.

Testimony:

Workforce; “3for5” Campaign:

NCBHN, in concert with our statewide colleagues in behavioral health, seeks the return to the budget of the long-promised cost of living adjustment (COLA) which has been removed by the Governor each year since it became a permanent budget line over a decade ago, and has rarely been restored by the Legislature. This year we are calling for recognition of the broad alliance of advocates involved in the “3for5” campaign, and the enactment of a 3% *across the board* increase for nonprofit human service sector workers for the first in a series of five consecutive years in lieu of the much more modest increases proposed for select workers in the sector. Since the COLA was enacted and removed each year, the sector has lost over \$1B that could have supported services to high-needs New Yorkers who otherwise employ extensive use of emergency medical services.

NCBHN sees a 3% COLA as a first step toward addressing a crisis in funding that has created unmanageable turnover rates and professional vacancies across New York’s behavioral health provider community. Results of a workforce survey of 126 NYS BHC provider agencies released in January, 2019 revealed an annual turnover rate of 34% and a vacancy rate of 14%. A recent survey by The Center for Human Services Research found that addiction prevention and treatment professionals annually receive \$5,000 to \$7,500 less than comparable professionals in other settings. An investment in the BHC

workforce that is critical to attaining the goals of DSRIP and, potentially, DSRIP 2.0 is of the utmost importance.

Recommendation: Enact the COLA of 3% across the nonprofit human services sector for the first of five consecutive years as called for by the “3for5” campaign.

Housing:

Supportive housing is an essential ingredient for the successful transition of multi-diagnosed “high-end users” from inpatient care to the community. Safe and secure housing is, in fact, acknowledged to be an indispensable component of comprehensive healthcare, and needs to be available statewide. NCBHN, therefore, supports the Governor’s commitment of \$20M for mental health housing in this, a year of significant budgetary challenges.

A stable environment is vital and fundamental to the recovery from psychiatric and addiction disorders. Safe and affordable housing programs which incorporate recovery oriented support services are the cornerstone of successful recovery from serious mental illness (SMI) within the community setting, yet accessing these essential programs remains a tremendous challenge. Further, safe and affordable housing is essential for successful recovery from addiction disorders.

In recent years, the Office of Mental Health (OMH) has focused on reducing the number of people in the most expensive housing environments such as inpatient beds at state psychiatric hospitals, state operated supervised community residences, and other state funded residential settings. To achieve this, OMH has given priority status in access to housing to individuals residing in these settings. While we acknowledge the necessity to reduce costs, we must ensure that housing opportunities are made equally available to individuals who do not come from these priority populations but are still in need of housing supports and services.

Additionally, we need to ensure that individuals who are being transitioned from these highly supervised settings are being moved to residential settings that adequately meet their high level of need for supports and services in order to maximize their recovery, **avoid future hospitalizations**, and ensure the best possible quality of life.

Recommendation: NCBHN strongly encourages the Legislature to retain the executive budget commitment to an additional \$20M for mental health housing.

Rural Health Network Development and Rural Health Access Development

The 2017-2018 budget reduced funding for important programs that have a great impact on New York State’s rural communities, primarily by coordinating healthcare resources.

The resulting 2018 21% funding cut devastated portions of these programs. This year's *budget cuts amount to a crippling 38%* (2019-20 total state funding \$6,080,000 to 2020-21 proposed funding of only \$3,764,000). If enacted, these cuts would cripple the ability of Rural Health Networks to sustain their community focused missions. The viability of rural communities is also threatened as health care is a much more significant economic driver in rural than it is in urban areas. In the case of this rural health network, NCBHN, we have

been able to match dollar for dollar the state's investment with federal dollars that flowed into our North Country communities to improve the efficiency of our health care system.

Since 2015 we have attracted well over \$2 million federal dollars to reduce homelessness, position behavioral healthcare providers to compete in a value based payment health care market, and provide work force development trainings.

Recommendation: Reverse the proposed cuts that would have devastating effects on rural New Yorkers, and return funding for Rural Health Network Development and Rural Health Access Development to the full 2019-20 level of \$6,080,000.

Rural healthcare access in NYS is already significantly challenged; life expectancy is two years shorter than it is for urban dwellers. The proposed funding cuts would exacerbate these problems in devastating fashion.

Recommendation: Reverse the proposed cuts that would have devastating effects on rural New Yorkers, and return funding for the Rural Health Access Development program to the full 2019-20 level of \$8,800,000.

Legalization of the Recreational Use of Marijuana for Adults:

The legalization of marijuana for recreational use by adults represents a seismic policy shift that requires proper deliberation. All relevant information must be used to determine guiding principles. This includes recently released studies and data from other states, and health and safety issues that arise from behavioral healthcare research. The watchdog group Smart Approaches to Marijuana (SAM) has a wealth of this data available. While NCBHN cannot support an initiative for legalization, we understand that there is an energetic lobby in favor of it. Therefore, we urge NYS to proceed cautiously, to deliberate properly, and only then to consider implementation with significant restrictions.

We note that the proposal creates a "marijuana cannabis trust fund" and that 5% of the monies collected would be ear-marked for transfer to OASAS. That figure is small, based on the projected impact on the OASAS-regulated prevention, treatment and recovery systems, and NCBHN recommends that 25% be ear-marked for OASAS with the caveat that it constitutes funding in addition to the existing OASAS budget, and cannot be used to supplant general fund dollars if, in fact, the legalization of marijuana for recreational use is enacted.

Recommendation: NCBHN strongly urges the legislature to reconsider the legalization of marijuana for recreational use in NYS. We do, however, recognize the significant advocacy forces in favor of legalization, and recommend that if it is enacted, 25% of marijuana cannabis trust fund monies go directly to OASAS as additional funding.

To summarize, NCBHN, representing twenty nonprofit BHC agencies across New York's North Country, makes the following recommendations in order to address the BHC needs of the citizens and communities of New York:

- Enact a 3% cost of living adjustment (COLA), applicable to all nonprofit human service workers in accordance with the recommendations outlined in the "3for5" campaign;
- Support the executive budget commitment of an additional \$20M for mental health housing;
- We strongly encourage the Legislature to restore Rural Health Network and Rural Health Access Development funds to current year levels, reversing the devastating 38% cuts contained in the budget proposal;
- Support a moratorium on any and all cuts to BHC services for children and adolescents as proposed by the New York State Coalition for Children's Behavioral Health.
- Finally, NCBHN stands in opposition to the legalization of marijuana for recreational use by adults, but recognizes that there is an energetic lobby in favor of legalization. We therefore encourage the Legislature to deliberate fully, considering all relevant information, before moving forward with this initiative including the appropriation of adequate trust fund monies as additional funding to OASAS.

Thank you very much for your consideration of these issues as they pertain to the development of the New York State budget,

Barry B Brogan

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