

**TESTIMONY OF
PATRICK J. MONAHAN II
ON BEHALF OF THE
CONNECTICUT HOSPITAL ASSOCIATION
BEFORE THE
PUBLIC HEALTH COMMITTEE
Friday, March 16, 2007**

HB 6921, An Act Concerning Behavioral Health

My name is Pat Monahan. I am a partner in the law firm of Garfunkel, Wild & Travis, and I appreciate the opportunity to testify on behalf of the Connecticut Hospital Association (CHA) on **HB 6921, An Act Concerning Behavioral Health**.

CHA supports the bill's proposals in Sections 1 and 2 for reimbursement of necessary expenses to consumer representatives serving on the Behavioral Health Partnership Oversight Council and the revised timing of the Council's annual report to the General Assembly.

CHA also supports the concept of a pilot program as described in Section 3 of the bill, the purpose of which would be to examine and develop effective measures for ensuring that children with mental health needs who present to emergency departments receive timely and appropriate treatment in the treatment setting best suited to their needs. CHA believes that piloting potential measures over the next two years can be extremely helpful in reducing the number of instances in which a child with mental health needs must wait in the emergency department for lengthy periods of time until he or she can be placed for treatment with an appropriate mental health professional or in an appropriate behavioral health facility.

While we agree with the purpose and concept of the pilot program, CHA respectfully suggests that Section 3 should be modified in certain respects to maximize the prospect for success of the program. For instance, while we believe that the Health Resources and Services Administration federal designations referenced in the bill could be helpful factors in selecting appropriate regions for the pilot, we do not think those designations should be absolute conditions to participation. In addition, at this point, we believe it is premature to mandate the implementation of any methods prior to any consideration or examination by pilot participants, and for that reason, we suggest modifying Section 3 to indicate that the methods listed in that section are to be examined for potential implementation.

Further, to take full advantage of the significant efforts already undertaken by hospitals, mental health providers and other healthcare professionals to assist in the timely placement of children with behavioral health needs, we urge the Committee to form an Advisory Group comprising hospital and other representatives to work with the

Departments of Social Services and Children and Families in designing and implementing the pilot. If the Committee permits, CHA would be pleased to offer proposed revisions to the bill on these points for the Committee's consideration.

CHA also urges the Committee to include in this bill recommendations approved by the Behavioral Health Partnership (BHP) Oversight Council at its meeting on March 14, 2007, including a provision that would mandate that BHP providers receive from DSS annual rate increases that are no less than the average of the annual rate increases granted to the participating Medicaid managed care companies, and a provision allocating funding to enable the Council to conduct an external, independent evaluation of the Behavioral Health Partnership.

Thank you for your consideration of our position.

For additional information, contact CHA Government Relations at (203) 294-7310.