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Testimony
Public Health and Human Services Committee
Public Hearing on Privatization of DMHAS and DDS Services
Thursday September 3, 2009
By Barry Kasdan Pres/CEO, Bridges...A Community Support System Inc.

I am Barry Kasdan, Pres/CEO of Bridges...A Community Support System Inc. We are a full service non-profit, DMHAS funded LMHA. We are also a lead agency funded by DCF for the delivery of community based behavioral health services for children. Each year over 5000 people receive help from Bridges.

I am pleased to have the opportunity to speak to you on an issue that is dear to my heart and professional career. I would like to focus my comments in an attempt to redefine the privatization debate and take it beyond the current paradigm which tends to pit providers against providers, consumers against consumers, unions against non-union, and state operated against non-profits.

Unfortunately the so called privatization issue has historically distorted information that is need for a sound analysis. An analysis that should form the basis for funding decisions to select the most appropriate setting, service model and provider. Past debates have detached the process from the critical issues of core competencies, best and evidence based practices, economics, budgets and cost effectiveness. In short the debate has fallen into the quagmire of emotions, special interest groups and accusations that have had little basis in fact. We need to elevate the debate based on facts that are available to you. You will probably hear some of that today.

The very large non-profit human service sector currently funded through fees and grants from the state, demonstrates the value and benefits of government contracting for services. This sector serves hundreds of thousands of Connecticut families, children and adults. From hospitals to community service agencies, from prevention programs to crisis and emergency services you cannot find a component of this vast continuum of human services that is not performed by community non-profits. You have invested in us for decades and we have delivered quality and cost effective care to Connecticut.

Analyze the program and cost data that is available to you from the state and non-profit sector.

Today we are in the midst of the rebidding of many non-profit human service contracts. To detach the public sector from that process is poor fiscal management of scarce state funds. A two tiered system of care wastes state dollars and puts a premium on special interests over quality & cost effective care. How in all good conscience can you cut services, lay off staff, close programs and short change the most vulnerable of our citizens when we know that we have an alternative that is true, tried and tested by the State of Connecticut itself ?

Over twenty years ago Bridges participated in a comprehensive program of community reentry for adults that had spent a good portion of their adult life in state hospitals, funded by state dollars through DMHAS. Throughout Connecticut, thousands of adults were mainstreamed back into their communities. With careful planning continuity of care was assured for patients and family members. Today the great majority of them reside, work and socialize in harmony with friends and family in almost every community. The naysayers said it could not be done and tried to use fear and misinformation to discourage the process. There were some courageous family members and legislators who recognized the humanity, cost effectiveness and the quality of life benefits to push the cause forward.

These are not easy initiatives but done in partnership with a community system that has a demonstrated track record, you will not go wrong.