



Good Evening, Chairman and members of the Appropriations Committee. My name is Philip Wyzik. I am President and CEO of the Mental Health Association of CT, Inc., (MHAC). MHAC is a 100-year old private non-profit dedicated to service, education and advocacy for people with mental health disabilities. I would like to thank you for the opportunity to speak to you about my concerns for increased community support of persons with serious mental illness. People with serious and persistent mental illness are entitled to have a life in the community in accordance with the 1999 *Olmstead* Supreme Court Decision affirming the rights of individuals with disabilities to live in the least restrictive environment. States have also found community support services less expensive than restrictive hospital or institutional care they formerly provided in state mental institutions. However, persons with severe and persistent mental illness need the appropriate medications to maintain themselves and be successful in the community.

Psychiatric medications are the primary support to stabilize persons with severe and persistent mental illnesses. We ask you to keep the protections for people with mental illnesses on Medicaid and SAGA who are stable on psychiatric medications. Connecticut has deviated from its wise policy decision of the past to exempt mental health medications from the restrictions of a preferred drug list. Currently, only persons who have already been stabilized on psychiatric medication in the last 12 months are exempted from prior authorization requirements when they are picking up a medication that is not on the preferred drug list. Remember that effective medications are the primary reason for maintaining stability and success in the community. However, requiring co-payments of \$3.00 on certain medical services and prescription co-pays of up to \$20.00 per month on certain individuals enrolled in Medicaid will make it more likely that persons will not take their prescribed medications resulting in relapse, decompensation and possibly hospitalization due to missed doses, discontinuation or changes in the specific medications. Discontinuation of vital medications also results in emergency room use, homelessness, incarceration or even suicide. Pharmacy savings in prescription medications only shifts costs to higher more expensive modalities of care often resulting in personal harm.

Another point of grave concern to persons with serious mental illness is housing and homeless support services. The Governor has targeted the Housing and Homeless line item of DSS budget with a 5% rescission. With the high cost of housing in Connecticut, high foreclosure rates and increasingly high rental rates, people living on the margins of our society are more at risk than ever of being literally left out in the cold. Average middleclass families are concerned about the high costs of housing. People with severe and persistent mental illness have even more difficulty negotiating Connecticut's tight housing market that has an extremely low vacancy rate. In addition, the stresses of little or no available affordable housing result in more anxiety and psychological turmoil undermining any progress that medication may have made. Rental Assistance Program (RAP) vouchers supply the support that people need to obtain housing and have the security of a safe place to sleep at night. RAP certificates also provide targeted assistance through the Money Follows the Person program to rebalance the federal Medicaid dollars to more cost effective community services. Without the additional RAP certificates, people attempting to get out of expensive institutional situations through the Money Follows the Person program will have little hope to succeed. These programs serve the poorest and most vulnerable citizens. Further reductions in the RAP vouchers will drastically reduce the ability to create new supportive housing situations for persons who would otherwise be institutionalized in nursing home facilities. We ask that you increase the number of RAP certificates and make new Section 8 vouchers available because currently there are almost as many persons on the waiting list for DSS vouchers as are currently funded by them. People transferring to the community under Money Follows the Person will create additional need for the vouchers which currently have a wait list up to 3 years long. Increasing the number of RAP certificates will break the logjam of persons who have lost their housing due to institutional care and rebalance state Medicaid dollars to cost effective community services.

Thank you. If you have any questions, please contact me at pwyzik@mhact.org or call (860) 529-1970 extension 17.