



STATE OF CONNECTICUT
DEPARTMENT OF MENTAL HEALTH AND ADDICTION
SERVICES

DANNEL P. MALLOY
GOVERNOR

PATRICIA A. REHMER, MSN
COMMISSIONER

Testimony by Patricia Rehmer, MSN, Commissioner
Department of Mental Health & Addiction Services
Before the Appropriations, Human Services and
Public Health Committees
September 27, 2011

CMHS BLOCK GRANT HEARING

Good afternoon, Senator Harp, Senator Musto, Senator Gerratana, Representative Walker, Representative Tercyak, Representative Ritter and distinguished members of the Appropriations, Human Services and Public Health Committees. I am Pat Rehmer Commissioner of the Department of Mental Health and Addiction Services. I am here today to present the Allocation Plan for the Community Mental Health Services Block Grant for federal fiscal year (FFY) 2012.

The document before you describes the Block Grant contribution to the overall funding of mental health services for adults and children. The Allocation Plan contains proposed expenditures and services for FFY 2012. I would like to highlight the following items for the adults with psychiatric disabilities that are served by these dollars:

- A. **Emergency/Crisis Services** are available 24 hours a day, seven days a week.
- B. **Outpatient Clinical Services** are provided to improve or maintain the psychological or social functioning of adults with the most serious mental illnesses.
- C. **Residential Services** offer a variety of housing opportunities, including supported and supervised apartments.
- D. **Employment Opportunities** consist of specialized, work-related services and supports which enable persons with a psychiatric disability to participate in a competitive labor market.
- E. **Case Management Services** assist persons we serve by ensuring that they are actively linked to all the services they need in order to remain in the community. Enhanced emphasis is placed on addressing the homeless population through these services.
- F. **Social Rehabilitation Programs** assist with daily living skills, improving peoples' interpersonal skills, and maintaining their lives.

A total of 24 programs are currently offered through 17 agencies to adults who are indigent and challenged with chronic mental illness. These services are essential and need to be continued, as they support persons who have been discharged into the community and are consistent with our emphasis on recovery-oriented services, i.e., those that focus not only on managing one's illness, but also on improving quality of life and one's reintegration with his/her community.

Also, DMHAS continues to support project initiatives with FFY 2012 CMHS Block Grant funds including:

- (1) Programs within community-based, general hospitals which support the rights of persons who are mentally ill;
- (2) Parental support and parental rights for families of those with mental illness;
- (3) Residential and/or case management services; and
- (4) Enhanced consumer vocational/employment support services.

While this funding represents less than one percent of the total DMHAS budget, considerable attention was given to the Allocation Plan in order that it be supportive of the direction given to us by the Adult State Mental Health Planning Council and other advisory bodies.

The Allocation Plan before you assumes a federal Block Grant of \$4,127,256. Actual funding for FFY 2012 will not be known until Congress passes its budget. This figure assumes that the Block Grant will be funded at the same level as the FFY 2011 federal appropriation.

Of the estimated FFY 2012 CMHS Block Grant appropriation, \$2,889,079 is allocated to adult mental health services and thirty (30) percent or \$1,238,177 is allocated to the Department of Children and Families (DCF). DCF will address their portion of the Block Grant separately.

Thank you for the opportunity to testify before you today on the Community Mental Health Services' Block Grant. I would be happy to take any questions you may have at this time or I could do so following the Department of Children and Families' presentation, if that would be more convenient.





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A Healthcare Service Agency

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SAPT BLOCK GRANT HEARING

Good afternoon, Senator Harp, Senator Musto, Senator Gerratana, Representative Walker, Representative Tercyak, Representative Ritter, and distinguished members of the Appropriations, Human Services and Public Health Committees. I am Pat Rehmer Commissioner of the Department of Mental Health and Addiction Services. I am here before you today to present the department's federal fiscal year (FFY) 2012 Allocation Plan for the Substance Abuse Prevention and Treatment (SAPT) Block Grant.

The Allocation Plan before you assumes a federal Block Grant of \$16,919,808. Actual funding for FFY 2012 will not be known until Congress passes its budget. This figure assumes level funding, based upon the final FFY 2011 federal appropriation.

Please keep in mind, as you review this plan, that it represents only a portion of DMHAS' spending for substance abuse prevention and treatment services. Most of the programs which are funded with federal Block Grant dollars also receive state funding. There is no reduction in the overall funding of addiction services or of any particular service. Any reductions contained in the FFY 2012 SAPT Allocation Plan are only the result of changes in funding allocation between the SAPT block grant and state funds. The state funding component is not reflected in the plan before you today.

Block Grant-funded activities include services for the treatment of alcohol and other drug addiction (such as detoxification, residential and outpatient rehabilitation), as well as prevention and education services. A major department goal is the creation of a more recovery-oriented system of care. First and foremost, movement to a recovery-oriented model requires re-conceptualizing clinical and rehabilitative care within a collaborative model. As part of this system change, it is particularly crucial to promote opportunities in the areas of independent living, employment, socialization, and community integration. The emphasis of a recovery-oriented system of care is to provide the supports needed for individuals to participate fully in community life.

This Allocation Plan is based upon our knowledge of the needs of persons who access our services and the approaches that are most effective in resolving those needs. In so doing, the plan serves to facilitate broader access to services and an integrated system of services for prevention and treatment that is person-centered. This thinking is central to all of DMHAS' efforts and is consistent with its recovery-oriented focus. In support of its recovery initiative DMHAS is in the process of strengthening vocational supports and promoting peer-to-peer services to persons in recovery.

DMHAS is aggressively moving forward to ensure that the resources available to address the service needs of our citizens are used wisely. This FFY 2012 SAPT Block Grant Allocation Plan is an important component of reaching our goals.

Thank you for the opportunity to testify before you today on the Substance Abuse Prevention and Treatment Block Grant. I would be happy to take any questions you may have at this time.

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