



STATE OF CONNECTICUT
DEPARTMENT OF MENTAL HEALTH AND ADDICTION SERVICES
A Healthcare Service Agency

Commissioner

Testimony of Patricia A. Rehmer, MSN, Commissioner
Department of Mental Health and Addiction Services
Before the Executive and Legislative Nominations Committee

Good afternoon Chairpersons Duff and Janowski, Ranking Members Kane and Buck-Taylor and the other distinguished members of the Executive and Legislative Nominations Committee. I am Patricia Rehmer, Commissioner of the Department of Mental Health and Addiction Services. It is an honor to have been re-nominated by Governor Malloy to serve as Commissioner of the Department of Mental Health and Addiction Services, a health care agency that provides services throughout Connecticut to over 110 thousand individuals with psychiatric and substance use disabilities on an annual basis. I appreciate the opportunity to appear before your committee today.

I would like to begin my remarks by thanking Governor Malloy for re-nominating me for this position and then share a bit of background information with you about myself.

I began my career in Behavioral Health Care at the Institute of Living (IOL), where over a period of 17 years I held a variety of positions, including head nurse, Program Director for Partial Hospital, Director of Adult Programs, and Clinical Director of Operations. My clinical responsibilities included inpatient, outpatient, partial and residential services for Children/Adolescents, Adults, and Geriatric patients.

In 1999, I was asked by Commissioner Dr. Albert Solnit to join DMHAS as the Chief Executive Officer of Capitol Region Mental Health Center, where I had responsibility for overseeing a staff of 250 individuals delivering services to 1,200 clients, as well as providing leadership to 17 affiliate agencies to ensure that access and appropriate behavioral health services were available in the greater Hartford region.

In 2003, Commissioner Thomas Kirk asked me to join his executive group as Director of Behavioral Health Care Operations. I applied my experience with general hospitals, private sector and state facilities to assess the use of all DMHAS-operated hospital beds, resulting in recommendations for more clinically appropriate and fiscally responsible utilization of state beds.

In 2004, Commissioner Kirk appointed me as Deputy Commissioner to continue to work closely with him in restructuring the agency's service system to ensure that services were delivered in a recovery-oriented manner. Since November 2009, I have served as DMHAS Commissioner.

During my tenure as Commissioner and Deputy Commissioner, I have worked in partnership with individuals in recovery, families, advocacy groups, and service providers to ensure that individuals have a meaningful life in the community. I continue to be an advocate for behavioral health care parity, working with others to ensure behavioral health care receives the same treatment from insurance companies that physical health does. I have accelerated the redesign of Connecticut's mental health system into a recovery-oriented format. There have been many benefits from this including strengthened involvement with the recovery community and closer relationships with our state agency partners for mutual benefit, as well as achievements in the areas of workforce development, technology improvement, expanded roles for consumer, family, and youth in policy development and quality improvement, public awareness campaigns to reduce stigma and discrimination, health and wellness initiatives, and many other initiatives that address the behavioral health needs of Connecticut's citizens across their lifespan.

Connecticut's citizens have faced significant challenges that have impacted behavioral health over the past few years. DMHAS has been able to stretch our resources to serve the state's residents as they confronted loss from epic storms and unspeakable tragedy. I am honored to have been able to lead our disaster response during those difficult times and am proud of their continuing commitment to respond at the drop of a hat, to our state's residents in times of crisis.

Our partnerships with other state agencies and our private not-for-profit providers are of paramount importance. The department has a strong history of working well with our sister state agencies — including the Departments of Correction, Children and Families, Developmental Disabilities and others, as well as the Judicial Branch. Our collaborations on prison and jail overcrowding initiatives, serving Young Adults and meeting the mental health and substance use and housing needs of Connecticut's veterans are models that place Connecticut on the "cutting edge" nationally. We are justifiably proud of our accomplishments to date.

The private not-for-profit agencies with which we contract for services are integral partners in our treatment system. They have worked side by side with us in realigning service delivery to ensure that we can provide services that are both evidence-based and cost-effective. They should be commended for their provision of quality behavioral health services in challenging fiscal times.

Under my administration, much emphasis has been placed on maximizing federal resources, including leading conversion of the State Administered General Assistance Behavioral Health Program, in partnership with the Department of Social Services, to the Medicaid Low Income Adult expansion. We continue to work closely with our private not-for-profit agencies to help them manage the challenging transition and maintain service levels as the Affordable Care Act increased Medicaid eligibility and private insurance coverage resulting in adjusted funding streams.

Over the years, DMHAS has excelled at supplementing state resources and services through successful competition for federal grants. Since my appointment as Commissioner, DMHAS has been awarded over \$160 million dollars in competitive Federal grants. These grants have allowed the Department to focus on preventing underage drinking, increase the availability of community based services for individuals with substance use disorders, impact mental health service delivery in schools and employ brief screening and treatment techniques. Federal funds offer DMHAS the opportunity to dramatically move our system and services toward a value-driven, culturally responsive, and recovery-oriented system of care. Under my administration, I pledge

to continue our strong emphasis on pursuing available federal resources to the fullest extent possible.

I am grateful to have spearheaded new initiatives that impact the lives of Connecticut residents. It is a privilege to be able to work on new opioid overdose prevention with the state police to ensure all troopers on the road have access to Narcan and are trained to use it. This has resulted in state troopers using the lifesaving medication that have saved ten lives to date. I believe DMHAS' work educating the public about stigma and discrimination through the adoption of new programs such as Mental Health First Aid is changing attitudes, prompting greater information for those seeking treatment. I have been able to develop an number of different services whose goal it is to reach individuals with mental illness that are difficult to engage in our traditional treatment framework. These services include increased numbers of Assertive Community Treatment teams, Peer Bridgers working with clients frequently appearing in probate court and Guardian Ad Litem services for those that are conserved.

The DMHAS system is responsible for all levels of care provided throughout Connecticut to our target population — including, but not limited to: inpatient beds, partial hospital programs, outpatient services, recovery services, housing, transportation, and community support programs. The list is extensive. As Commissioner, it is my responsibility to ensure that when an individual needs any level of care, we can make it available. Critical to the success of having care available when it is needed is ensuring that individuals are able to move to less restrictive care settings as they are well enough to do so. The task is really one of ensuring that people have access to the right level of care, at the right time, in the right amount. This demands a system that is flexible, can wrap supports around individuals in the community, and can increase or decrease those supports as needed. DMHAS is meeting this demand, as evidenced by hospital discharges rates that have increased by over 500% under my tenure.

Over the past several years I have begun to be able realize my hope of embedding more individuals in recovery as peers to assist us with this work. People who have lived experiences can often provide valuable insight in assisting service providers and those in need of care on their journey toward recovery. One example of this is implementation of the Peer Bridger program. This program has been developed to work with individuals with behavioral health disorders that cycle frequently through the probate court. It provides opportunities for people with lived experience to mentoring peers, guiding them through system complexities that can exist on the path to recovery.

My work at DMHAS is enhanced by my ability to have a voice at the national level having served as the Vice President and now as the President of the National Association of State Mental Health Program Directors. My participation in national conversations and policy setting provides Connecticut with opportunities to continue as a national leader in behavioral health care.

In closing, I would be remiss if I did not mention that DMHAS's successes have been due to the talented and dedicated staff that I have the pleasure of working with. I would also add that my entire professional career has consisted of positions of increasingly greater responsibility in the health care industry — and, in particular, in the provision of psychiatric and substance use disorder services — the last 15 years of which have been with DMHAS. I pledge in continuing to help those whom we serve to achieve their highest potential in terms of recovery. I respectfully ask for your confirmation of my appointment so that I can continue that work. Thank you and I'd be happy to answer any questions you have.