



**TESTIMONY OF
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ST. VINCENT'S MEDICAL CENTER
SUBMITTED TO THE
APPROPRIATIONS COMMITTEE
Friday, March 6, 2015**

**HB 6824, An Act Concerning The State Budget For The Biennium Ending
June Thirtieth 2017, And Making Appropriations Therefor And Other
Provisions Related To Revenue**

Good Afternoon. My name is Margaret Hardy and I am privileged to serve as the Vice President for Behavioral Health Services at St. Vincent's Medical Center in Bridgeport. I appreciate the opportunity to submit testimony concerning **HB 6824, An Act Concerning The State Budget For The Biennium Ending June Thirtieth 2017, And Making Appropriations Therefor And Other Provisions Related To Revenue**. St. Vincent's Medical Center opposes the proposed reduction in Medicaid coverage for some adults and the \$25 million in grant funding cuts for mental health treatment. These reductions will severely tax the state's mental health system and significantly burden hospital Emergency Departments and outpatient behavioral health clinics as key providers of the mental health safety net services. What we need is a strong policy and a modest investment in a plan to provide care to these patients in need, which will have a dramatic impact on the quality of our mental health system and save millions of dollars in unnecessary Emergency Department visits and inpatient hospitalizations.

Bridgeport is Connecticut's largest city with significant disparity in socio-economic status and is home to some of Connecticut's poorest and most vulnerable citizens. It is estimated that almost 20% of individuals and families and 37% of children in Bridgeport live below the poverty level. St. Vincent's Medical Center plays a critical role in providing all types of medical services to Bridgeport residents as well as individuals throughout the County, including mental health services. St. Vincent's is one of the largest providers of mental health services across the entire continuum of care for children, adolescents and adults. We provide inpatient care across two

campuses in Fairfield County, with 92 inpatient beds that function at near capacity on any given day. We are the only provider of inpatient mental health care for children in Fairfield County. We also operate two outpatient behavioral health clinics which in 2014 had over 23,000 visits.

Consider for a moment that you are a parent of an adolescent child who has been referred to the Emergency Department by a crisis counselor at his or her school. Imagine now that you are sitting in an overcrowded, noisy, chaotic Emergency Department waiting for several hours for an evaluation and, perhaps more terrifying in your mind, the possibility of a behavioral health diagnosis. This is certainly not where you expected you would be with your child. This is not an uncommon experience in our mental health care system today. A patient experiencing a mental health crisis could spend hours, or even days, in our ED waiting for a bed, or waiting to be transitioned to the appropriate outpatient setting, simply because there are not enough resources available to meet the constant need. Extended stays in the ED often exacerbate a patient's condition rather than improve it. This problem is particularly acute for children and adolescents, for whom the need for services greatly outstrips the number of available beds and trained specialists. There are long waits, and financial and resource limitations to accessing appropriate clinical treatment services. It can take months to schedule an outpatient visit with an adolescent mental health specialist. The same is true for adults with serious mental illnesses. Current reimbursement rates do not cover the cost of care, leaving many providers, especially outpatient providers to decide whether they can continue to provide the needed services. This is simply not acceptable.

These are some of the very real and negative results of ever-diminishing funding for vital behavioral health services, and the problem will grow if the Governor's proposed budget is enacted. The Governor's proposed budget would reduce Medicaid coverage for 34,000 adults and cut close to \$25 million in grants to fund mental health treatment. The combined effect of these cuts in programs as well as inadequate Medicaid rates will result in increased costs to the health care delivery system through the use of the most expensive level of care, emergency departments as well as the potential for increased and unnecessary hospitalizations

In 2014, more than 25% of residents sought care in our Emergency Departments throughout the state, and 38% of these residents were Medicaid beneficiaries. At St. Vincent's 85% of patients admitted through our Emergency Department are Medicaid recipients. Nationally it is estimated that more than 6.4 million visits to emergency departments are for patients with primary behavioral health diagnosis, and the CMS estimates that in 2014 acute care hospitals spent in excess of \$40 million dollars to care for these patients.

In 2014, the Connecticut Hospital Association convened a Subcommittee on Mental Health, comprising hospital behavioral health directors, emergency medicine physicians, chief executives, chief financial officers, and government affairs experts. I am a member of that committee and we were charged with developing recommendations to improve health outcomes, relieve the burden on EDs, and improve the adequacy of funding for key mental health safety net services.

The Connecticut Hospital Association has determined that an appropriation of \$3 million to the Department of Mental Health and Addiction Services will be sufficient to support grants to hospitals across the state for Care Coordination Teams and related care coordination services, including navigators/intensive case managers to coordinate the mental health and social service needs of each patient. This is a best practice that works. Individuals with serious mental illnesses that are linked with community-based care coordination continue to get the care and services they need in the community, have significant decreases in the use of emergency departments and inpatient hospitalizations, decreased costs and Medicaid reimbursement for expensive emergency and inpatient care. Most importantly they have an improved quality of life!

We are asking you to oppose cuts to the mental health system and, instead, invest in turning this innovative, community-based solution into a statewide best practice that will benefit patients, relieve pressure on providers, and achieve savings for the state. We are asking that you protect vital mental health services for the citizens of Connecticut, in particular the children and young adults, who need early intervention and care.

Thank you for your consideration of our position.