

**Testimony of the National Alliance on Mental Illness (NAMI) Connecticut
Before the Appropriations Committee
February 18, 2016**

**Department of Mental Health and Addiction Services (DMHAS) and
Department of Public Health budget cuts and changes
in Governor's proposed Midterm Budget Adjustments FY2017
H.B. No. 5044 AN ACT MAKING ADJUSTMENTS TO STATE EXPENDITURES FOR THE FISCAL
YEAR ENDING JUNE 30, 2017**

Good evening Senator Bye, Representative Walker and members of the Appropriations Committee. My name is Daniela Giordano and I am the Public Policy Director for the National Alliance on Mental Illness (NAMI) Connecticut. NAMI Connecticut is the state affiliate of NAMI, the nation's largest grassroots mental health organization dedicated to building better lives for all those affected by mental health conditions. NAMI Connecticut offers support groups, educational programs, and advocacy for quality of life for individuals and families in the community. I am here today on behalf of NAMI Connecticut to express deep concern about the proposed midterm budget adjustments for FY2017 as they relate to the Department of Mental Health and Addiction Services (DMHAS) and Department of Public Health (DPH).

We understand the fiscal crisis Connecticut finds itself in and that you will need to make hard decisions. At the same time, I want to share my deep concern and opposition to the large volume of proposed cuts on human and social services, especially as they seem to more heavily impact individuals who need mental health and substance services and supports. It needs to be stressed that **individuals' needs for community services, supports and housing do not go away when services go away**. On the contrary, within a (sometimes) rather short amount of time, essential service cuts often lead to the use of higher-end/higher-cost services like emergency rooms and hospitals, or lead to homelessness. These consequences then cost the state considerably more money across systems, on top of the immense human impact.

One of the overall issues that is important to understand about the Department of Mental Health and Addiction Services (DMHAS) budget is that at current funding levels there are often not enough services, and to cut funding even further would have a devastating impact both in human and fiscal terms by reducing access, increasing waiting times, delaying positive health and quality of life outcomes, and costing more in higher-end and crisis interventions. Previous cuts, as part of deficit mitigation deals, included crucial core services such as housing supports and services, young adult services, discharge and diversion services, home and community based services and employment opportunities. If these **previous cuts** are annualize and **newly proposed specific cuts**, in addition to the proposed requirement that agencies cut their overall budget by **5.75%**, are enacted, DMHAS would experience a total funding cut of close to \$72 million *just this year*. This represents a cut of **over 10% to the agency's funding**.

Newly proposed specific cuts negatively impact additional essential areas.

- **Mental Health and Substance Use Grants** are used to provide access to outpatient services for individuals in the community. Repeated cuts to these grants would reduce this access even more.
- **Community Care Teams** are collaborations between hospitals and community agencies to support individuals with high health needs (including with mental health and substance use needs) who have previously fallen through cracks of the systems and have been using high-cost services, including emergency rooms, to get care. Through Community Care Teams, individuals can get their needs met through individualized person-centered care, including wrap-around services and housing, and avoid costly emergency room visits. The proposed cuts means that access to this effective approach will be limited, and ultimately cost more state dollars in health care and other systems.
- **Regional Mental Health Boards (RMHBs) and Regional Action Councils (CACs)** are essentially being eliminated by proposing to consolidate them and cut most of their funding. These vital regional agencies operate with very lean budgets, cover the whole state and provide crucial accountability and productivity through oversight, coordination, evaluation of state services and prevention and training efforts. The RMHBs inform and influence best practice, policy and access to services, and do so in an essential and unique way by involving all stakeholder groups (such as people in recovery, family members, town residents and service providers), plus help leverage millions of dollars in federal funding .

In addition, Connecticut has been making significant progress towards our common goal of ending homelessness and thus shrinking the costs associated with homelessness. In order to maintain this positive momentum, we are asking for the support of the Administration and the Legislature for the investments in effective solutions, including \$1.125 million for DMHAS for supportive services for 150 new units of scattered site supportive housing and funding for rental subsidies through the Department of Housing **in order to reach the goal of ending chronic homelessness in the state**, as recommended by the statewide effort to end and prevent homelessness, the Reaching Home Campaign. Providing homes for people who have been homeless has saved the state and its municipalities millions of dollars by reducing the use of hospitals, nursing homes, prisons, and other temporary, costly responses.¹ Supportive Housing is a proven and cost-effective solution for individuals with mental health and substance use conditions to exit homelessness and move toward a better quality of life and greater community involvement.

¹ Arthur Andersen, Connecticut Supportive Housing Demonstration Program (University of Pennsylvania Health System, Department of Psychiatry, Center for Mental Health Policy and Services Research, 2002).

Mental health services are also provided through the Department of Public Health (DPH). Repeated cuts to **School Based Health Centers (SBHCs)** are of great concern. The vast majority of children and youth who receive mental health services, do so in the school setting. SBHCs provide quality mental (and other health) care and reduce the barriers experienced more often in traditional mental health settings. Examples of these barriers include a child's not being singled out as accessing mental health care but simply going for health care, difficulty accessing care, and long wait times for appointments. SBHCs also reach underserved groups of students, including Latino and African American youth and contribute to greater health equity. This easy and effective access to health care also contributes to academic achievement and increased graduation rates.

Last but certainly not least, the proposal to roll almost every budget line item of any state agency into **one big line item makes it impossible for the public and advocates to understand what is being proposed**. This creates uncertainty and confusion. Not knowing what exact services, supports and programs are proposed to be cut (or not), leaves us with little understanding of how to have meaningful input into decision making processes, including during public hearings on the budget.

We urge you to protect the health and wellbeing of our CT residents by supporting and not cutting funds for essential and core mental health services and supports! Connecticut has made some great strides in expanding the range of services, supports and treatments offered and provided to people with mental health conditions, especially in the public sector, resulting in less use of high-end, high-cost services and increased health and quality of life for CT residents. This proposed budget would do great damage to these efforts and to individuals who are our neighbors, friends, family members and colleagues.

Thank you for your time and attention. Please let me know if you have any questions.

Respectfully,

Daniela Giordano, MSW
Public Policy Director
NAMI Connecticut