



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

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Testimony by Miriam Delphin-Rittmon, PhD, Commissioner
Department of Mental Health and Addiction Services
Before the Appropriations, Human Services and
Public Health Committees
August 31, 2016

SAPT Block Grant Hearing

Good morning Chairpersons, Senators Bye, Moore and Gerratana; Representatives Walker, Abercrombie and Ritter, and distinguished members of the Appropriations, Human Services, and Public Health Committees. I am Miriam Delphin-Rittmon, Commissioner of the Department of Mental Health and Addiction Services (DMHAS). I am here before you today to present the Department's federal fiscal year (FFY) 2017 Allocation Plan for the Substance Abuse Prevention and Treatment (SAPT) Block Grant.

The Allocation Plan before you assumes block grant funding, provided by the Substance Abuse and Mental Health Services Administration (SAMHSA), will remain level funded at \$18,212,225. The amount is subject to change when the final appropriation is authorized. As you review this plan, please keep in mind 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. The state funding component is not reflected in the plan before you today.

A state requirement of the SAPT Block Grant is to maintain expenditures at a level not less than the average level of such expenditures for the two year period proceeding the fiscal year of grant application. This requirement is referred to as "Maintenance of Effort (MOE)." Due to a legislative action which reallocated funding from DMHAS to the Department of Social Services (DSS) as part of the Affordable Care Act and Medicaid expansion, solely evaluating the DMHAS budget would not fully depict the state's commitment to funding substance abuse prevention and treatment. DMHAS continues to await a response from SAMHSA on its request for material compliance with this MOE requirement demonstrating that the reallocation of funds from DMHAS to DSS has not translated into reduced expenditures or services for persons with, or at risk for, substance use issues.

Block Grant activities include substance use prevention, education, and multiple treatment modalities. DMHAS allocated approximately 20% of our total Substance Abuse Block Grant for

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prevention activities, which is a requirement of our SAPT Block Grant. The department's recovery-oriented system of care is realized through use of evidence-based practices, modernized data management, and a comprehensive approach to treating the whole person.

DMHAS is closely focused on efforts related to addressing the opioid crisis. The SAPT Block Grant assists in these efforts by supporting residential detoxification; intensive, intermediate, and long-term residential care; outpatient treatment; and opioid replacement therapy. A variety of community support services that support opioid addiction recovery are also funded including case management, vocational rehabilitation, transportation, and outreach to specific populations in need of treatment.

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 meeting those needs. The plan serves to facilitate DMHAS' recovery-oriented system of care in which individuals, regardless of the complexity of issues they present, are provided the supports needed to improve their health and wellness, express their preferences regarding the care they receive, and realize their full potential.

DMHAS is aggressively moving forward to ensure that the resources available to address the service needs of our citizens are used wisely. This FFY 2017 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.