



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

NED LAMONT  
GOVERNOR

MIRIAM E. DELPHIN-RITTMON, Ph.D.  
COMMISSIONER

**Testimony by Miriam Delphin-Rittmon**  
**Commissioner**  
**Department of Mental Health and Addiction Services**  
**Before the Public Health Committee**

Good Morning Senator Abram, Representative Steinberg and members of the Public Health Committee. I am Commissioner Miriam Delphin-Rittmon of the Department of Mental Health and Addiction Services (DMHAS). Thank you for the opportunity to provide testimony on **SB 1035 AN ACT AUTHORIZING DEEMED STATUS LICENSE RENEWALS FOR CERTAIN NONPROFIT COMMUNITY SERVICE PROVIDERS.**

This bill allows community residences providing services under DMHAS contract to forgo site visit evaluations if the community residence has obtained credentialing via a national credentialing organization or “deemed status.” The bill also removes licensing visits by the CT Department of Public Health (DPH) to organizations serving DMHAS clients if those organizations (e.g. outpatient clinics) have been credentialed by a national credentialing entity or “deemed.”

This bill replicates a similar 2017 bill that, in its original form, sought to limit state agency oversight for not for profit entities serving some of Connecticut’s most vulnerable population using state dollars. In 2017, in an effort to address the not for profit concerns regarding administrative burden, the bill was amended to create a workgroup charged with reducing burdensome and duplicative requirements. This workgroup led by the Office of Policy and Management (OPM) and with the participation of the Departments of Developmental Services, Children and Families, Mental Health and Addiction Services, Public Health, and Social Services; six nonprofit community providers and the Connecticut Community Nonprofit Alliance has worked closely through a committee and subcommittee structure over the past two years. This work yielded three legislative proposals in last year’s legislative session that reduced the number of unannounced licensing visits for DDS group homes, waived the \$50 initial and renewal licensing fee and the fee’s paperwork for providers, and in section 40 of the DPH bill, eliminated the notarization requirement for certain licensing forms. All of these legislative proposals were signed into law.

DMHAS continues to work with sister state agencies and not for profit partners to reduce administrative burden. To this end in early April 2019, DMHAS will be participating with some of organizations noted above in a Lean event to streamline required outcome data across residential programming.

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DMHAS, through work on the initiatives outlined in this testimony, is demonstrating a common goal in reducing the administrative burden of contracted providers. Since a variety of time intensive, collaborative and fruitful streamlining efforts are underway a “deemed status’ bill should not be viewed as necessary.

DMHAS believes that agencies that can afford national accreditation are enhanced by these credentialing efforts and that the people they serve benefit. DMHAS also believes that the state agencies, as both stewards of the state dollars and experts in state and federal regulations are best positioned to evaluate the services paid for by state dollars or serving the state’s most vulnerable citizens. DMHAS staff are well positioned to evaluate the services it contracts for and relies heavily on its sister state agency, DPH, to ensure licensing statute and regulations are followed. DMHAS and DPH have close collaborative relationships related to licensure that benefit the not for profit providers when corrective actions are necessary. National credentialing cannot replace the specialized local oversight that helps to guide the providers serving those with mental health or substance use needs.

Thank you again for the opportunity to testify on this bill. I am happy to answer any questions you may have.