

Public Health Committee JOINT FAVORABLE REPORT

Bill No.: SB-919
AN ACT ESTABLISHING A TASK FORCE TO STUDY CHILDHOOD AND
Title: ADULT PSYCHOSIS.
Vote Date: 3/3/2023
Vote Action: Joint Favorable Substitute
PH Date: 2/1/2023
File No.:

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SPONSORS OF BILL:

The Public Health Committee

REASONS FOR BILL:

There has been a significant increase in emergency room visits by both children and adult patients with behavioral health diagnoses. This situation has become especially acute since the pandemic.

This bill establishes a 10-member task force to study childhood and adult psychosis. The task force is charged with the following:

- Examine the creation of clinics staffed by various mental health providers to provide evaluation, comprehensive care and symptom management for individuals experiencing early or first-episode psychosis.
- Create specialty teams to develop a statewide model for care coordination as recommended by the National Institute of Mental Health which shall include services for individuals experiencing psychosis.
- Finally, examine ways to strengthen existing clinical networks to achieve collaborative research and outcomes.

The task force must report to the Public Health Committee by January 1, 2024 and terminates on the date it submits the report.

RESPONSE FROM ADMINISTRATION/AGENCY:

None expressed.

NATURE AND SOURCES OF SUPPORT:

Howard Sovronsky, Chief Behavioral Health Officer, CT Children's Medical Center:

Dr. Sovronsky shared that a pediatric behavioral health crisis existed long before the pandemic and has continued to increase. Only 50% of those exhibiting symptoms of psychosis between the ages of 16 and 25 obtain any type of diagnosis, referral or treatment. This lack of intervention often leads to a lifetime of disability. With this bill we have a unique opportunity to examine and address the current system of care which demands change. Finding ways to make services available and accessible to adolescents at risk of developing more serious mental health condition is critical. Not only is this good practice, but smart economics as well.

Jennifer Zajac and Patricia Graham-Sullivan, Child and Adolescent Psychiatrists, Institute of Living/ Hartford Hospital:

Both are testifying as experts in early psychosis diagnosis, treatment and prevention. Early intervention is critical to reduce the chances of these adolescents developing even more serious conditions such as Schizophrenia Spectrum Disorder, also referred to as 'First Episode Psychosis'. Other than the Advanced Services for Adolescents with Psychosis (ASAP) program at the Institute and one at Yale New Haven Hospital's outpatient clinic, no other treatment is available specifically targeting psychosis in adolescents. When adolescents have finished the program offered by the doctors at the Institute and are ready for outpatient individual work, many therapists and providers feel unequipped to treat psychosis symptoms. Thus, losing what had been done up to this point. Access to care pathways, especially for adolescents with psychosis are currently not available. Both support this bill as a chance to address the challenges of the current system and encourage the Committee to consider including adolescent psychiatrists with extensive experience in working with this population to be part of the task force.

Vinod Srihari, Director, Program for Specialized Treatment Early in Psychosis; Yale University School of Medicine:

Dr. Srihari is in strong support of this legislation and believes it is time to combine the expertise of not only our academic programs, but the vast network of healthcare organizations and community stakeholders who are aware of longstanding problems with both access and the quality of care for individuals with psychosis. We need to address current gaps in treatment. Expansive international research supports early intervention which can treat individuals soon enough to prevent the onset of Schizophrenia spectrum disorder or 'First Episode Psychosis. He also has concerns regarding the lack of reimbursement for treatment and suggests including representatives from private and public payers be included on the task force.

Caroline Helsen, Master of Public Health student at Yale school of Public Health:

Ms. Helsen has an adult family member with serious mental illness of which psychosis is one of the prominent symptoms. She is in strong support of this bill. The reasons for the delay in the treatment of psychosis are complex and include lack of knowledge about the condition, stigma and financial barriers to seeking treatment. A task force to evaluate and address the

many challenges in the current system would help families. While the bill does mention family support, she suggests the inclusion of family members with lived experiences be appointed to the task force.

Susan Israel, M.D.

In her testimony, Dr. Israel shared her concerns with the current system of handling medical and behavioral health data. She hopes that the proposed expansion of behavioral health bills will include changes to the current system because HIPPA and Connecticut's health information exchange, Connie, lack true patient privacy. HIPPA does not provide privacy, but merely confidentiality at best. HIPPA also allows the release of medical data in fully or partially identified forms which unfortunately can be re-identified. Patients need to have control over who will have access to this personal information. Parents need to know who will see school/medical records and how they will be shared, stored and moved. Once something is typed into the electric record, many different entities have authorized access to it.

NATURE AND SOURCES OF OPPOSITION:

None expressed.

Reported by: Kathleen Panazza

Date: 3/14/2023