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ASSOCIATION  
FOR BEHAVIORAL  
HEALTHCARE

December 18, 2018

The Honorable Charles Baker  
Governor of Massachusetts  
State House, Room 280  
Boston, MA 02133

***Re: EOHHS FY 2020 Budget***

Dear Governor Baker:

On behalf of the membership of the Association for Behavioral Healthcare (ABH), thank you for the opportunity to comment on the Fiscal Year 2020 budget recommendations currently under development by the Executive Office of Health and Human Services (EOHHS) and its departments.

We recognize and are appreciative of your administration's profound commitment to serving those who struggle with behavioral health needs. Your leadership has been instrumental as the Commonwealth seeks to ensure that individuals with mental health and substance use disorders have access to comprehensive and quality treatment and care.

As you know, the Association for Behavioral Healthcare (ABH) is a statewide association representing more than eighty community-based mental health and addiction treatment provider organizations. Our members are the primary providers of publicly-funded behavioral healthcare services in the Commonwealth, serving approximately 81,000 Massachusetts residents daily, 1.5 million residents annually, and employing over 46,500 people.

ABH is proud to share in your vision where individuals and families are empowered to improve their health, safety, and well-being through access to community-based mental health and addiction services that are person-centered, evidence-based, clinically appropriate and cost effective.

**Continued Support for Community-Based Services**

To recognize this vision, ABH believes it is imperative to adhere to the philosophy that those in need of behavioral health care should have access to treatment and supportive services in the communities in which they live and work, only utilizing higher levels of care when absolutely necessary. While hospital levels of care are important components of a comprehensive system of care, the overwhelming majority of individuals in need of services are able to have their needs met by community-based providers.

We are grateful for your strong commitment to community-based mental health and substance use disorder services, and respectfully request that the Commonwealth continue to commit the financial resources necessary to ensure that individuals living with behavioral health disorders are able to maintain successful and productive lives in their communities.

While the community behavioral healthcare system has seen substantial investment in recent years, there remains a persistent, unmet need as demand exceeds the system's current capacity. Funding for services must be increased to ensure that individuals are able to access needed care and to provide stability for the community behavioral health system to the greatest extent possible.

### **Medication Assisted Treatment in Corrections**

ABH thanks you for your steadfast leadership in the fight against the opioid epidemic. Building upon the STEP Act, the passage of the CARE Act was another significant step in ensuring that the Commonwealth continues to make strides to better serve those with substance use disorders. We appreciate your administration's recognition of the importance of Medication Assisted Treatment (MAT) and commend your efforts to expand access to this life-saving treatment, especially to those in correctional settings.

Recognizing the significance of this commitment, **we request that the administration include a MAT in Corrections Reserve** to provide funding for this important program. This reserve should be used to provide funding for the Department of Corrections (DOC) and Houses of Corrections (HOCs) who are participating in the pilot program created by the CARE Act. ABH and our members are committed to seeking new funding for DOC and participating sheriffs for this purpose. We request that your budget recommendation include estimated funding in this reserve to fund these programs in FY20.

ABH is also requesting **\$10 million to support BSAS as they provide training and technical assistance to DOC and the HOCs** around implementation of MATs in these settings. Making the expertise at EOHHS and BSAS available to the DOC and HOCs is essential to successful implementation of these new models of care.

### **Department of Mental Health**

As you know, adequate funding for DMH is essential to providing fundamental community supports for individuals across the Commonwealth in need of mental health services. These critical funds decrease the need for inpatient hospitalization or other types of 24-hour levels of care, and instead enable adults and children with mental illness to live independently or remain with their families in the community.

ABH applauds your leadership in FY19 for making historic investments in adult community services at the Department of Mental Health (5046-0000), including \$62.3 million for the new Adult Community Clinical Services (ACCS) program. **We are requesting that this funding remain a priority in the FY 2020 budget.** These investments are essential to ensuring the long-term viability and strength of the community system that serves the most vulnerable individuals in Massachusetts living with a mental illness.

**ABH also requests that your budget recommendation fund all other DMH line items (5011-**

0100, 5042-5000, 5046-2000, 5046-0001, 5047-0001, 5055-0000, 5095-0015) **at maintenance levels.** These funding levels will ensure that individuals currently receiving services will continue to receive services in FY20.

ABH also requests that you fund the DHCD Rental Subsidies for DHM clients' line item **(7004-9033) at a maintenance level.** Access to stable housing is an essential component of recovery and individuals in DMH community placements need these subsidies to live successfully in the community.

### **Bureau of Substance Addiction Services**

ABH is grateful for your administration's strong stance in addressing the opioid crisis from a public health perspective through which solutions are centered on prevention, education, and treatment. Your leadership has been invaluable in combatting this epidemic and its associated stigma, and we are thankful for your commitment to expanding funding for treatment and prevention services.

ABH, in partnership with the Massachusetts Coalition for Addiction Services (MCAS), urges you to increase funding at the Department of Public Health, Bureau of Substance Addiction Services by \$45.5 million **in FY 2020.**

Access to stable housing is an essential component of recovery from substance use. ABH requests that you include an additional **\$20 million to expand the Family Sober Living Programs** available across the state. These programs are designed to address the complex issues involved in family substance use treatment and recovery, to support active housing and employment searches, and to assist families with children in meeting their personal goals and objectives. Family Sober Living Programs stabilize families by providing a safe haven; a holistic approach to recovery that will address the inter-relationships between their physical, psychological health as well as parenting responsibilities; and other supportive services designed to further develop skill levels appropriate for independent living.

**ABH requests an additional \$7 Million to preserve and expand access to the Massachusetts Access to Recovery (MA-ATR) program.** This funding would be used to reduce waitlist times, and conduct post-ATR services research to identify long-term recovery outcomes. MA-ATR was funded by a SAMHSA grant to address the opioid epidemic but funding is slated to end by March 2020 unless Congress appropriates another year of funding.

MA-ATR only costs about \$231.00 per individual per month. It saves the state money in healthcare, incarceration and social costs by empowering individuals to progress in their recovery, obtain employment, reduce criminal recidivism and find renewed hope and meaning in their lives.

**ABH is requesting an additional \$3.5 million to procure five new Recovery Centers in cities/towns across the state.** Peer-led, peer-driven services and activities are at the core of these centers - allowing participants to learn new skills, mentor others, and value their lived-experience. Recovery Centers provide individuals, their family members and loved ones a safe, clean and sober place to connect with their peers to conduct job searches, hang-out, and obtain support for sustained recovery.

## **MassHealth Behavioral Health**

MassHealth behavioral health services are a vital system of care for adults, children and families across the Commonwealth. It is essential to preserve the existing array of services available as part of the MassHealth benefit.

ABH is grateful for the Baker Administration's financial investment in the outpatient system through rate increases over the past several fiscal years and we hope the administration will continue to address this critical issue. We are, therefore, **requesting further investment in MassHealth community based behavioral health outpatient services.**

As you know, historically low MassHealth behavioral health outpatient rates have forced many providers to make the difficult decision to close clinic sites or reduce access for clients. Consequently, individuals with severe and persistent mental illness do not have sufficient access to vital, cost-effective, and medically necessary services.

As the state continues to work to further develop and refine the Children's Behavioral Health Initiative (CBHI) system, adequate funding is necessary to maintain originally implemented services through the *Rosie D.* court order. These services are absolutely essential to strengthening our community-based mental health system to better serve children living with Severe Emotional Disturbance (SED) in Massachusetts.

## **Addressing Behavioral Health Workforce Shortage**

Providing the critical care that is needed to support individuals and families with behavioral health needs would be impossible were it not for a dedicated and highly skilled workforce. Each day, behavioral health care staff are charged with serving the Commonwealth's most vulnerable citizens, oftentimes in high pressure and challenging situations.

To this end, the demanding nature of this work requires that the workforce be highly educated and well-trained. Community-based providers employ staff who typically hold at least one post-secondary degree, and as a result, carry a tremendous student loan burden. It is for this reason that **ABH requests additional funding to extend and expand loan repayment program created as part of the Statewide Investments Program established under the 1115 waiver.**

**ABH also requests \$5 million for BSAS to address SUD workforce development.** In addition to SUD providers struggling to compete for staff in the current healthcare marketplace, many additional demands are placed on staff for which training is needed, such as education on how to serve people with co-occurring disorders, the provision of medication assisted treatment, and patient medication management. In addition, programs at the Massachusetts Rehabilitation Commission traditionally offered a pathway for people in recovery to become addiction treatment professionals, but have lost federal funding. Funding to serve this population of people in recovery through the MRC could be transferred through an interagency service agreement with BSAS.

## **Implementation of Chapter 257**

ABH thanks you for your leadership and efforts towards fully implementing Chapter 257. Compliance with the statutory mandates of Chapter 257 remains one of our top priorities. We

request that your FY 2020 budget maintain full funding of all Chapter 257 established rates through the Chapter 257 Rate Reserve.

Thank you very much for your attention to these requests. As always, please contact me if you or your staff have any further questions regarding our requests.

Sincerely,

A handwritten signature in black ink that reads "Vicker V. DiGravio III". The signature is written in a cursive, slightly stylized font.

Vicker V. DiGravio III  
President/CEO

cc: Secretary Marylou Sudders, Executive Office of Health and Human Services  
Assistant Secretary Daniel Tsai, MassHealth  
Commissioner Joan Mikula, Department of Mental Health  
Commissioner Monica Bharel, Department of Public Health  
Acting Director Jim Cremer, Bureau of Substance Addiction Services