



## Mental Health Association in New York State, Inc.

Glenn Liebman, MA  
CEO

Ellen Pendegar, MS, RN  
Board Chair

Mental Health Association in New York State, Inc.

Testimony to Joint Legislative Public Hearing on  
2020-2021 Executive Budget Proposal, Topic: Mental Hygiene

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Glenn Liebman, CEO

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### **HEALTHY MINDS FOR A HEALTHY NEW YORK**

194 Washington Avenue, Suite 415 • Albany, New York 12210-2314  
Phone: 518-434-0439 • Fax: 518-427-8676 • MHANYS.org



Thank you for this opportunity to speak before the joint committees. We are very appreciative of the work of the Legislature and the strong support of our Mental Hygiene Chairs and other legislators in advocating for community mental health services.

My name is Glenn Liebman and I am the CEO of the Mental Health Association in New York State, Inc. (MHANYS). Our organization is comprised of 26 affiliates in 52 counties throughout New York State. Many of our members provide community based mental health services but all of our affiliates provide advocacy, education and support in their communities.

We have two different perspectives on this year's proposed Executive Budget as related to mental health.

The first one is positive. We thank Governor Cuomo and Commissioner Sullivan for crafting a mental health budget that, in this environment, does not cut any vital services and in fact enhances integral programs like housing while keeping commitments to direct care staff.

The second one is more global in nature and is as much a national issue as it is a State issue. The sad reality is that we are in a mental health crisis of enormous proportion. Individuals and their families are facing a myriad of behavioral health challenges and are suffering. The need for additional remedies and approaches is desperately needed.

Currently there are six month waits to get mental health services; two year housing wait lists; compromised services because of overworked and underpaid staffs; disincentives in place for individuals on Medicaid to go back to work; exploding rates of anxiety, depression and suicide attempts among young people; shortages of mental health professionals; insurance coverage for mental health services denied because of medical necessity definitional issues; prison and jail populations with mental health issues suffering in Solitary Confinement and then when released from prisons have discharge plans that does not even include Medicaid for months; veteran and at risk population suicide completions at record levels; lifesaving medications not on formularies; and so much more.

How do we overcome all these issues? There are no simple answers and frankly New York does better than virtually any other State in regard to many of these issue areas but we have to do so much more for our loved ones.

We are not here to blame or point fingers—we are here for fixes and yes, these fixes cost money and yes, we are in a budget of fiscal constraint, but the reality for us in mental health is that it does not matter if it is a good budget or a bad budget, we always only get a small slice of the pie.

The reality is that we are not a small slice of the pie—we actually comprise almost the entire pie. One in five people in the United States have a serious mental health issue. Almost half of all Americans will have a diagnosed mental health issue in their lifetime. I doubt there is anyone in this room or anywhere in this country that has not been either directly impacted by a mental health issue or has a family member or close friend that have not been impacted.

In the context of our following recommendations, we urge you to keep in mind the importance of what we are advocating for and the significance of financial support for our stated goals.

### **Community Funding For All Not for Profits: #3for5 Campaign**

MHANYS is part of the Statewide #3for5 campaign that is calling for a three percent increase in funding for not for profits in the human services sector every year for the next five years.

This campaign is unprecedented in its scope through the inclusion of every major Statewide not for profit agency in the mental health, addiction disorder, developmental disabilities, child welfare, care management, and aging community.

Existing law provides for an annual increase for these not for profits. Unfortunately, for the last decade, the funding increases for these agencies has not been included in the New York State Budget. This has resulted in a loss of over \$1 billion in promised financial support.

The result is that the quality of services are declining, many agencies have had to institute waiting list for care, facilities are deteriorating and agencies are unable to offer competitive living wages to attract and retain the skilled staff necessary to deliver quality care and support.

Our agencies are the safety net for New Yorkers in greatest need. While our agency's mission prevents us from turning away people in need, many of our members are now fiscally unstable and in danger of closing due to inadequate funding.

The importance of our member agencies cannot be overstated. At MHANYS, these are boots on the ground agencies dealing everyday with people with mental health related issues by providing housing, care management, individualized treatment, clinic services, jail and prison diversion, employment and education programs, peer support and so much more. Individuals rely on us to fulfill their dreams of independence and families rely on us to provide their loved ones with the quality care they need to keep them safe and thriving.

Communities rely on us as economic engines and employers, and taxpayers rely on us to support New Yorkers in their home communities, off the streets, and out of expensive institutional settings and emergency rooms. This investment is a cost effective win for all New Yorkers.

We urge the members of Senate Finance Committee and Assembly Ways and Means Committee to continue your leadership in the not for profit sector through your support of #3for5.

#### *Recommendation(s)*

1. We are very appreciative that the Governor and the Legislature have continued their commitment in this year's proposed budget to fund direct care staffs in mental health, developmental disabilities and addiction services, but more needs to be done.

We urge the Legislature to work with the Governor in supporting \$170 million in funding for this year that will fully invest a three percent increase for Year 1 of the Five Year Commitment to help provide funding for the entire Human Services Not For Profit Community.

### **Mental Health Education in Schools and Needed Resources**

#### MHANYS School Mental Health Resource and Training Center

We are very proud that New York is the first State in the nation to mandate the teaching of mental health instruction in schools. Since implementation of the law, over eighteen months ago, many strides have been made. Of greatest importance and to the credit of schools, there is a much greater emphasis on changing school climate to be more accepting of mental health and wellness.

Given the importance of this legislation, we were very appreciative of the Assembly and especially Assemblymember Gunther in helping to fund MHANYS School Mental Health Resource and Training Center. This funding has been utilized to hire staff to educate schools about mental health and to work with teachers, students, administrators, clinicians and families to create mentally healthy school environments.

We also thank the Governor for his commitment as well by helping to fund the Resource Center in last year's budget and his proposal to include in this year's budget as well. Given time constraints, I will not detail the impressive day to day work of the Center but we have enclosed a document at the end of the testimony that details the Center's work and what it means in regard to improving mental health education in schools.

The New York State Office of Mental Health has been strong partners as has the State Education Department in insuring that information about mental health is shared with schools across the State. We also support OMH's initiative to provide School Based Mental Health Services to over 800 schools across New York State.

While New York is on the cutting edge, the sad reality is that across the country, we are witnessing a mental health crisis for young people. The increase in depression, anxiety and suicide attempts have grown dramatically. There are certain factors involved in this epidemic including social media and the tethering of young people to smart phones and other electronic devices.

We need to continue the great work that New York has done in fighting for greater mental health in schools recognizing that we are the leaders in the nationwide precipice of change.

#### Teacher Training

One area of greatest need that we have found in the Resource Center's work is the interest that teachers have in finding out more about mental health. While they are incredibly busy and have little interest in playing the role of clinicians, they are also the front line of often recognizing a

mental health need with a student. One initiative that has begun in New York through proposed legislation is creation of a program to provide teacher education about mental health.

*Recommendation(s)*

1. MHANYS thanks Senator Carlucci and Assemblymember Fernandez for introducing legislation that will provide three hours of training on a yearly basis to all teachers and other personnel across New York State. This training bill is highlighted by an on line training component that school personnel can take advantage of at any time.
2. While there has already been strong support for the bill, an appropriate concern is that schools or teachers would have to pay out of pocket for this training. To alleviate those concerns, MHANYS has put together a \$250,000 funding proposal for MHANYS School Resource and Training Center that would provide the content for teacher mental health instruction consistent with the work the Center is doing with schools and then create an online portal dedicated to providing content to the over one million proposed users across New York State.

We look forward to working with both houses around this specific recommendation.

Funding for a Masters Teacher Program and Inclusion of Trauma-Informed Practices in Education

We strongly support the funding in the proposed Executive Budget related to a Masters Teacher Program. There is \$1.5 million proposed to be added in the budget to create a corps of outstanding teachers and counselors in public schools to establish mental health professional learning communities throughout New York. This also provides a great opportunity to work with stakeholders to embed Trauma-Informed Care into school settings.

*Recommendation(s)*

- 1) Work with the Executive and the Legislature to help provide trauma informed practices through the School Mental Health Training and Resource Center.
- 2) Work with the Legislature and Executive to support additional funding for the Masters Teacher Programs and any initiative that will inform schools about mental health and best practices.

**Housing Increases in this Year's Proposed Budget**

We are very supportive of the Governor's proposed twenty million dollar increase in funding for housing rates in this year's budget as well as the additional sixty million dollars in capital funding. We are proud to be members of the Bring It Home Campaign led by our colleagues at ACL. Many of our members provide quality community based housing and this stipend increase along with the direct care funding increase will help support keeping individuals in need in the least restrictive setting.

We certainly know that this is a solid investment and that New York does more mental health housing than any other State in the country, but even more needs to be done to insure that providers are able to continue supporting individuals in their recovery.

Housing funded through OMH helps keep individuals out of hospitals, homeless shelters, jails and prisons. It is a savings for taxpayer and more importantly a much better outcome for individuals with mental health related issues who more than anything want their own independence. Housing is the best mechanism to achieve that end.

#### *Recommendation(s)*

- 1) We urge the legislature to continue this investment by helping to provide additional funding to existing housing programs to support individuals with mental health related issues.

#### **Adult Home Residents**

Since the settlement agreement, close to one thousand New Yorkers have transitioned from adult homes into community housing. The concerns voiced by many in the adult home industry was once people were living independently in the community, they would desperately try to get back to living in the adult homes. Based on the numbers from the State, the complete opposite is true and most people are very pleased to be living in more independent settings.

We understand that there is complexity between the mix of health homes, adult home staff, housing providers, peer staff and most importantly the needs of the individuals. The complexity should not in any way stop an individual from transitioning out of the adult home.

#### *Recommendation(s)*

- 1) We support the State's commitment to the continuation of the discharge process for individual leaving adult homes. That said, for many people it has been a lifetime of hope followed by despair. We need to truncate the process and more rapidly insure that people get more independent housing through choice and peer support.
- 2) For those continuing to live in adult homes, support an SSI increase for those individuals as well as an additional clothing allowances. We also continue to support funding for our colleagues at CIAD who are the boots on the ground advocate for residents.

#### **Behavioral Health Parity**

We commend Governor Cuomo and the Legislature for the continued support of behavioral health parity. Despite having one of the strongest laws in the nation through Timothy's Law implemented over a decade ago, individuals have still been denied needed and appropriate benefits.

One of the major reasons why individuals had their benefits denied had largely to do with medical necessity definitions. Some insurance plans used medical necessity criteria as a means to not provide behavioral health benefits to individuals.

Last year the NYS Office of Mental Health (OMH) changed the process for doing this through creation of best practice clinical guidelines around medical necessity. Clinical staff at OMH will provide peer reviewed and best practice data that will create a 'blueprint' for what insurance plans will need for medical necessity moving forward. Ultimately what this will mean is that plans will have less ability to reject an individuals based on medical necessity.

This year's proposed budget also includes additional funding for the New York State Ombuds Program through a dedicated fund through the Behavioral Parity Compliance Fund for collection of penalties imposed on insurance carriers who violate New York's Behavioral Parity Law.

We also support the continued funding of \$1.5 million for the Substance Use Disorder and Mental Health Ombuds program. This is a key resource in ensuring that families and their loved ones have someone to reach out to if they are denied benefits. As someone who has worked closely with the Ombuds program, I can say unabashedly that they are doing great work in the community.

#### *Recommendation(s)*

- 1) Continue to support the Governor's initiatives around behavioral health parity including the inclusion this year of a proposed Behavioral Health Compliance Fund as well as continued support of the Ombuds program.

#### **Medicaid Cuts**

This remains a major looming issue as we continue to advocate that the mental health system not be impacted by any proposed Medicaid cuts. The first round of cuts from the last quarter of this fiscal year walled off mental health of which we strongly supported. We remain concerned about future cuts in regard to possible upcoming Medicaid redesign.

While we are very supportive that there were no major mental health cuts through Medicaid, we remain concerned about any cuts as we know there are many individuals on Medicaid who are impacted either directly or indirectly by mental health.

#### *Recommendation(s)*

- 1) Leverage some of the unspent Medicaid Managed Care dollars to help reduce the Medicaid deficit.



## **Criminal Justice Reforms**

### Crisis Intervention Teams

Crisis Intervention Teams (CIT) are a best practice model that serves as a training for police and other law enforcement officials on how to deal with an individual with a mental health crisis in the community. The model has been incredibly successful across the country in deescalating crisis situations involving law enforcement and individuals with mental health related concerns.

We are appreciative of the Senate's continued strong support for CIT and the number of counties including New York City that are now part of the growing expanse of counties participating in CIT across New York State. We are also appreciative of the Legislature and the New York State Office of Mental Health for including Mental Health First Aid as part of the ancillary trainings for counties that provide CIT training.

### *Recommendation(s)*

- 1) We continue to urge bipartisan legislative support for Crisis Intervention Teams in counties across New York while also continuing the commitment to Mental Health First Aid in the counties in which CIT is provided.

### HALT

MHANYS is very support of the HALT legislation. This legislation would ban solitary confinement for many vulnerable populations including individuals with mental health related issues. For people with existing mental health related issues such as trauma and depression, having to be placed in solitary confinement is incredibly punitive and only serves to make outcomes much worse for individuals and can have longterm psychological impact well after release.

### *Recommendation(s)*

- 1) We strongly urge the Legislature to fully support the HALT legislation.

### Medication Assistance Treatment in Jails and Prisons

The Governor and the Office of Addiction Services and Supports (OASAS) deserve a great deal of credit for the work being done to provide support and engagement for people suffering during the opioid crisis. Unfortunately, I have both professional and personal experience through the struggles of a loved one. One of the things that changed the course of my loved one's life was the ability to have access to medication assistance treatment.

The bottom line is MAT saves lives. As we know, our jails and prisons are populated by people with serious addiction and mental health issues. Access to appropriate medication including suboxone and other medications should be part of a prison treatment regime. Why would we wait till someone is released from prison before providing them with the appropriate medication? Access to life saving medication should be available in a corrections setting before release.

*Recommendation(s)*

- 1) Support the existing proposed legislation from Assemblymember Rosenthal and Senator Bailey as well as provide funding for continued access to MAT in any correctional setting.

**Support for Veterans Mental Health**

Since the inception of the Joseph Dwyer Peer to Peer Project, we have been appreciative of a model that recognizes that the best way to reach a veteran in need is through another veteran. This peer model has been a large success in the years since early implementation. We are also very appreciative that several of the Dwyer Projects are run through our MHA affiliate members across the State. It is an extreme honor that our members take very seriously.

We want to personally thank Senators Carlucci and Brooks for their leadership in this area.

This year's proposed budget also contains a million dollars for a public awareness campaign geared to veterans and first responders in regard to mental health services. We strongly support any efforts in New York to raise the visibility and issues in regard to the true heroes in society.

*Recommendation(s)*

- 1) Support the continuation of funding to the successful Dwyer Project and include some of the ground breaking work that MHANYS is doing through our innovative Care Path Project in engaging families as an essential part of the recovery path for returning veterans.
- 2) Support the State's Public Awareness Campaign dedicated to raising the visibility around mental health for veterans, law enforcement and first responders.

**Mental Health First Aid**

While there has been a shift in regard to information and knowledge about mental health, we still have a long way to go as witnessed by violent incidents that immediately scapegoat people with mental illness as perpetrators.

One of the fundamental components of public awareness is Mental Health First Aid. This training has been provided to over two and a half million people across the United States. Much like regular first aid, mental health first aid helps to respond to individuals in a crisis situation as well as enhancing education about mental health.

People from every walk of life have taken trainings with MHANYS and our statewide affiliate network. Many of the MHAs in our affiliate network employ trainers who can provide this eight hour program to individuals in their communities that has resulted in thousands of individuals participating in the training who are now better equipped to assist someone with a mental health

related issue. Outside of Thrive in New York City, MHANYS is the largest statewide agency dedicated to training Mental Health First Aid.

*Recommendation(s)*

- 1) The Senate has been strong supporters of Mental Health First Aid through the leadership of Senator Carlucci. We urge the continuation of \$100,000 in the budget to support MHFA through our members and in turn entire communities throughout New York.

**Suicide Prevention**

Through Governor Cuomo, the New York State Office of Mental Health and the Legislature, New York has increasingly become a national leader in reducing suicide completions. As we know even one suicide completion is one too many. To that end, we are strongly supportive of additional funding to utilize best practices in suicide prevention and additional outreach to communities across New York State to help reduce suicide. Many of our members are leaders in the community in regard to suicide prevention.

We also are acutely aware of the impact to young people of suicide attempts and completions. Our School Mental Health Resource and Training Center works very closely with the Suicide Prevention Center of New York State in insuring that schools have access to the most relevant information around suicide prevention.

*Recommendation(s)*

- 1) Continue the groundbreaking work that has been developed in New York in regard to working with high risk populations including the LGBTQ community, Latina adolescents, black youth and rural populations. This work should include additional outreach and suicide prevention trainings through ASIST and SafeTalk.
- 2) Provide continued support for the work of the Suicide Prevention Center in New York for their recently developed resource around Suicide Prevention Guidance Document for New York Schools.
- 3) Support the Trevor Project in advocating for legislation to insure that each school district across New York State has model policies in place to insure support for best practice suicide prevention policies and resources to schools.

**Prescriber Prevails**

As advocates for people with mental health related issues; there are few things more frustrating than having to fight a proposed cut to prescriber prevails for mental health and other medications on an annual basis.

This was a hard fought consumer victory led every year by the Legislature to insure that individuals on Medicaid have the ability to work with their prescriber to provide access to the most appropriate medication whether or not it is in a plan's formulary.

Why would we not want the expertise of a prescriber to help navigate the best course of action for an individual? This makes no sense from either a clinical, individual, or commonsense perspective.

*Recommendation(s)*

- 1) We strongly support the leadership of the Legislature in adding back the protection of prescriber prevails to mental health and other medications for individuals on Medicaid.

**Geriatric Mental Health**

We are very proud that the Geriatric Mental Health movement started from our Mental Health Association in New York City (now Vibrant Emotional Health) and has since become statewide in its impact in recognizing the needs of the aging population and their mental health concerns.

The Governor has demonstrated a strong commitment to supporting aging New Yorkers. However, we strongly believe that there should be an increased commitment to the mental health of all New Yorkers; successful aging is predicated on good mental health.

When the Geriatric Mental Health legislation was signed into law fourteen years ago, it set up demonstration projects across New York State. The projects continue to exist and are providing the seed work for the expansion of geriatric mental health services. The reality is that it is impossible to expand the scope without new funding. There has been no new funding increase since the demonstration projects were created fourteen years ago.

*Recommendation(s)*

- 1) We urge a million dollar increase for the demonstration projects for geriatric mental health.

**Children's Mental Health Services**

The sad reality is that the current behavioral health system for children is underdeveloped and unable to respond to the mental health crisis facing young people. Families are finding it very difficult to get access for their loved one's mental health and/or substance use issues.

As a result, children end up on long waitlists, emergency rooms or in the juvenile justice system at great cost to themselves and their loved ones.

As we referenced earlier, we are continuing to see rising rates of mental health issues including suicide completions among young people. In addition, we face serious shortages for hiring mental

health professionals. In this environment, we strongly recommend the State end all cuts to children's behavioral health care.

*Recommendation(s)*

- 1) Place a moratorium on any cuts to children's behavioral health services.
- 2) Establishing mechanisms to identify, analyze and address systemic barriers that prevent children and families from accessing timely and appropriate services including funding rates, caseload standards, travel, etc.

We thank you for your time and consideration.