

ASSOCIATION FOR BEHAVIORAL HEALTHCARE

June 6, 2017

Representative Brian Dempsey, Chair House Committee on Ways and Means State House, Room 243 Boston, MA 02133

Representative Stephen Kulik, Vice Chair House Committee on Ways and Means State House, Room 238 Boston, MA 02133

Representative Todd Smola, Ranking Member House Committee on Ways and Means State House, Room 124 Boston, MA 02133

Re: FY 2018 Budget

Dear Chairman Dempsey, Vice Chair Kulik & Representative Smola:

ABH is a statewide association representing over 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 and over three-quarters of a million residents annually while employing 37,500 people.

Thank you for your strong commitment to both mental health and addiction treatment funding in the final version of the House Budget. Members of the Association for Behavioral Healthcare know from experience it is vital for the Commonwealth to commit additional funding to expanding access to behavioral health services.

Investing in the community system is essential if Massachusetts is able to achieve its goals of better quality care at lower costs. Towards that end, ABH and our members request your support of the following during FY 2018 conference committee deliberations:

EARMARKS

ABH and our member organizations strongly urge the House to remove all earmarks that were included for individual organizations in the FY2018 budget. Individual, organizational earmarking is an unfair process that singles out providers to receive state funding without requiring them to participate in the fair and open bidding process that state agencies oversee.

The proliferation of earmarks takes critical public mental health and addiction treatment funding away from the strategic, measured investments state agencies plan to make in new and existing services and can prevent agencies from maintaining programs that have been developed through the public bidding process.

BUREAU OF SUBSTANCE ABUSE SERVICES (BSAS):

Please support the <u>House</u> appropriation of \$133,750,888 for the **BSAS program and operations line item 4512-0200** and eliminate the organizational earmarks included in this line item.

The House included new funding of \$1 million for the Massachusetts Access to Recovery (MA-ATR) program, \$1 million for two new recovery centers, \$1 million to increase the number of addiction treatment beds and \$500,000 to distribute Narcan to addiction treatment providers.

As you know, the opioid epidemic continues to ravage our state and these additional resources are vital in the fight against the epidemic.

Please support the <u>Senate</u> appropriation of \$3.6 million for Recovery High Schools (4512-0211). This will fund the creation of a new Recovery High School in an area of the state where there is currently unmet need for such a program.

Please support the <u>House Outside Sections</u> that change the official name of the Bureau of Substance Abuse Services to the Bureau of Substance <u>Addiction</u> Services. We commend the House for recognizing that addiction is a disease and that the language society uses to describe those facing addiction matters. Stigma exists because substance use disorders are largely misunderstood.

DEPARTMENT OF MENTAL HEALTH (DMH):

Please support the **Senate** appropriation for the following DMH line items:

5042-5000: Child & Adolescent Community Services. The Senate funded this line item at \$91,381,786. We request that the Conference Committee support the Senate appropriation and eliminate the organizational earmarks included in this line item.

5046-0000: Adult Community Services. The Senate funded this line item at \$388,130,580. We request the Conference Committee support the Senate appropriation and eliminate the organizational earmarks included in this line item, which includes \$1 million to create new community placements for individuals stuck in DMH hospitals. These community placements will help alleviate the crisis of individuals boarding in Emergency Departments (EDs) by allowing more patient flow through the health care system.

CHAPTER 257 RATE RESERVE

Please support the <u>House</u> language and funding of line item 1599-6901, the Chapter 257 Rate Reserve.

Thank you.

Sincerely,

Vicker V. DiGravio III President/CEO