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ABH Budget Priorities Fiscal Year 2018

Department of Mental Health (DMH)

- ABH strongly supports the active role the Baker Administration has taken in examining the root causes of the **Emergency Department Boarding Crisis**.
- The current DMH community system does not have an excess capacity to accommodate new placements for individuals to transition out of hospital levels of care. ABH is requesting **an additional \$10 million to fund new community placements for individuals moving into the community from DMH hospitals**.
- As the Commonwealth continues to move individuals from more restrictive, expensive levels of care to community placements, it is vital that resources exist to support successful programs that meet these client's needs.
- **ABH requests maintenance funding to preserve DMH programming for children and adolescents**, including funding to support the joint DMH/DCF Caring Together procurement, and the DMH Individual and Family Flexible Supports Program.
- ABH requests **an additional \$1 million in increased funding for the DHCD Rental Subsidies for DMH clients (7004-9033)** as this program is vital in supporting DMH clients' throughout the service continuum.

Bureau of Substance Abuse Services

- **ABH requests the legislature fund line item 4512-0200 at \$139,392,987.** This amount will annualize funding for all current services covered by this line-item and the Substance Abuse Services Fund (1595-4510) and includes an additional \$8.7 million to fund vital new services to address the ongoing opioid crisis.
 - **\$6.2 million is need to preserve and expand the successful Access to Recovery (MA-ATR) program.** MA-ATR is a federal grant that is slated to expire in September 2017. \$3.2 million would maintain this program in Springfield and Boston, where it currently operates, but an additional \$3 million would be able to expand the program given the tremendous outcomes seen to date in the current programs.
 - ABH is requesting an additional **\$1 million in funding for providers to maintain access to NARCAN at their programs.** BSAS licensed programs are required to have NARCAN available and the limited supply and funding make this very difficult for providers to maintain.
 - **\$1.5 million to support the opening of 3 additional recovery centers across the state.** Currently BSAS funds 10 centers that are principally based on volunteer work by peers who support one another and who are involved in a participatory process to help build community and help design, plan, facilitate and evaluate activities offered at the centers.
- An additional **\$8 million a year (\$10 million total)** is needed in line item 4512-0202 to expand pre-adjudication jail diversion programs for non-violent offenders. The model

costs approximately \$12,000 per individual per year, while incarcerating someone for a year at a program like the Massachusetts Alcohol and Substance Abuse Center (MASAC) costs the state \$67,850.

- **\$1.2 million in additional funding is needed to cover reimbursements to cities, towns and regional school districts to cover the cost of transportation** of pupils to these Recovery High Schools. Lack of transportation makes it difficult
- **We also request that you maintain existing funding for other BSAS-funded services (line items 4512-0201, 4512-0203 and 4512-0204).**

MassHealth

- **Fund MassHealth at a maintenance level to preserve all existing behavioral health services.**
- Over the years, the erosion of MassHealth behavioral health outpatient rates has forced providers to make the difficult decision to close clinics or reduce access. In October of 2015 alone, five community behavioral health outpatient clinics closed their doors leaving thousands of MassHealth clients to find new ways to access the services that they need. As EOHHS considers the FY 2017 budget, it must continue to address this critical issue. **We are, therefore, requesting further investment in MassHealth community based behavioral health outpatient 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 ensure successful ongoing implementation of 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.

Purchase of Service Reform (Chapter 257)

- Thank you to Governor Baker and Secretary Sudders for their leadership fully implementing Chapter 257. Timely compliance with the settlement is a top priority for ABH and we ask the legislation to fully fund all Chapter 257 established rates through the Chapter 257 rate reserve.