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## ABH Preliminary Analysis of the FY'17 Conference Committee Budget July 5, 2016

July 5, 2016

**To:** ABH Members  
**From:** Vic DiGravio, President/CEO  
Mandy Gilman, Senior Director of Public Policy & Research  
**Re:** **Analysis of the FY17 Conference Committee Budget**

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The Legislature voted last week to adopt the Fiscal Year 2017 budget recommendations of the six-member legislative conference committee that were released last Wednesday. Among the items included in the budget the Legislature sent to Governor Baker are:

**Substance Abuse Services Fund (Line Item 1595-4510):** The conference committee report contains \$1 million in funding for the fund. As you may recall, Governor Baker had requested \$5 million for this line item to maintain existing services funded through this item. The conference report does not include language that was included in the Senate budget to allow the Baker Administration to deficit spend in this item. The administration has indicated there is not enough funding currently appropriated in this line item to preserve existing services. ABH is in close contact with our allies in the administration and the Legislature in trying to address this situation.

**Bureau of Substance Abuse Services (BSAS) funding:** It appears that all of the BSAS line items are funded at levels that maintain existing services. This includes the main BSAS line item (4512-0200) despite a significant amount of programmatic earmarks (totaling approximately \$6 million) .

**Department of Mental Health (DMH) funding:** It appears that all of the DMH line items are funded at levels that maintain existing services.

**Chapter 257 Rate Reserve (Line Item 1599-6903):** This item is funded at \$36,245,575 which was the amount requested by Governor Baker and approved by both the House of Representatives and Senate.

**Next Steps:** ABH sent a letter to Governor Baker last Thursday urging him to veto the earmarks included in the BSAS line item and approve spending for MassHealth, DMH and Chapter 257.

Governor Baker has up to ten days to review the budget. The Governor does have line item veto authority so he can choose to approve parts of the budget while vetoing other parts.



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\*\*\* Note: Line item figures categorized as GAA come from the General Appropriations Act (GAA). The **GAA** is the annual budget act, effective each July 1st. Line items labeled **Spending** include any supplemental funding and trust fund transfers throughout the fiscal year.

### Department of Mental Health (DMH)

Line item/program	FY'14 Spending	FY'15 Spending	FY'16 GAA	FY'16 Spending	FY'17 Governor	FY'17 House Final	FY'17 Senate Final	FY'17 Conference Committee
<b>5011-0100</b> Operations	\$27,275,845	\$28,048,283	\$28,570,221	\$26,682,875	\$27,433,275	\$27,433,275	\$27,433,275	<b>\$27,408,942</b>
<b>5042-5000</b> Child/Adolescent Services	\$85,222,740	\$80,420,672	\$87,034,610	\$87,795,268	\$88,085,618	\$88,080,618	\$88,355,618	<b>\$88,650,618</b>
<b>5046-0000</b> Adult Community Services	\$356,030,330	\$352,977,208	\$375,349,785	\$376,404,699	\$382,654,252	\$383,104,252	\$379,354,252	<b>\$379,754,252</b>
<b>5046-0005</b> Comm Placements	N/A	\$10,000,000	\$4,000,000	\$4,000,000	Consolidated Into 5046-0000	Consolidated Into 5046-0000	\$4,000,000	<b>\$4,000,000</b>
<b>5046-2000</b> Homeless Initiative	\$20,134,424	\$20,134,629	\$21,134,979	\$21,538,690	\$22,942,401	\$21,538,690	\$22,942,400	<b>\$22,038,690</b>
<b>5047-0001</b> Emergency/Acute Inpatient	\$35,526,443	\$31,402,706	\$24,258,428	\$24,234,504	\$24,351,834	\$24,351,834	\$24,101,834	<b>\$24,101,834</b>
<b>5055-0000</b> Forensic services	\$8,497,163	\$8,878,876	\$9,183,472	\$9,042,404	\$9,147,473	\$9,147,474	\$9,147,474	<b>\$9,147,474</b>
<b>5095-0015</b> State psych hosp	\$175,616,512	\$182,773,537	\$190,325,165	\$193,027,776	\$205,798,658	\$205,798,658	\$205,398,658	<b>\$205,398,658</b>
<b>5095-1016</b> Occupancy Fees	N/A	N/A	\$500,000	\$500,000	\$500,000	\$500,000	\$500,000	<b>\$500,000</b>
<b>TOTAL</b>	<b>\$708,428,457</b>	<b>\$714,760,911</b>	<b>\$740,481,660</b>	<b>\$743,351,216</b>	<b>\$761,038,511</b>	<b>\$759,954,801</b>	<b>\$761,233,511</b>	<b>\$761,000,468</b>



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The Department of Mental Health is funded at approximately \$761 million. This is \$17.7 million increase over the final FY16 spending, and approximately \$87,000 above the Governor's recommendations. ABH believes it preserves existing services.

**5011-0100 Operations.** The conference committee funds the DMH operations line item at approximately \$25,000 below the level recommended by Governor Baker, an increase of approximately \$726,067 over final FY16 spending.

**5042-5000 Child/Adolescent Mental Health Services.** This account includes an increase of approximately \$855,000 over projected FY16 spending. There is language allowing DMH to "allocate funds from the amount appropriated to other departments within the executive office of health and human services" for funding services to discharge-ready children inappropriately remaining in acute settings due to lack of more appropriate placement.

The Senate included an earmark of \$3.6 million to fund the Massachusetts Child Psychiatry Access Project (MCPAP) and \$500,000 for the MCPAP for Mom's program, and included language allowing the commissioner of DMH to charge commercial insurers for their clients served by MCPAP.

The line item also included the following earmarks:

1. \$70,000 for the Northwestern Juvenile Fire Intervention Response Education and Safety Partnership Inc.;
2. \$50,000 for the Children's Room in Arlington;
3. \$50,000 for a partnership with the department of early education and care to improve childhood mental health;
4. \$150,000 for the Arlington Youth Counseling Center.

**5046-0000 Adult Mental Health Community Services.** This account is funded at approximately \$379.7 million. This is \$2.9 million below the Governor's recommendation but the conference committee also includes a separate line item (5046-0005) funded at \$4 million for expanded community placements. Line items 5046-0000 and 5046-0005 collectively include a \$3 million increase over final FY16 spending.

This line item also allows DMH to transfer up to \$5 million from the inpatient line item to support clients in the community who were formerly receiving care at DMH continuing care facilities (5095-0015). It includes language requiring DMH to maintain the community placements established in the FY15 and FY16 budgets, requires funding for jail diversion programs to remain the same as it was in FY16 and requires DMH spend at least as much money on clubhouses in FY17 as it did in FY16.

The line item also included the following earmarks:

1. Requires DMH to report to House and Senate Ways and Means on the distribution of funds per adult and child population and type of services received in each region no later than February 1, 2017;
2. \$1 million for new community services in the southeast region of the state;



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3. \$100,000 for William James College Inc.;
4. \$200,000 for DMH and the Executive Office of Elder Affairs interagency service agreement for adult home and community-based behavioral health services to adults over the age of 60;
5. \$250,000 shall be expended to the International Institute of New England, Inc. for culturally and linguistically appropriate mental health services for immigrants and refugees who have experienced torture and trauma;
6. \$250,000 to continue the assisted outpatient treatment pilot program at Eliot Community Human Services to treat residents who suffer from serious and persistent mental illness and experience repeated interaction with law enforcement or have a high rate of recurring hospitalization due to their mental illness and requires Eliot and DMH to produce an assisted outpatient treatment pilot analysis report which shall include baseline and current metrics related to clients.

**5046-0005 Community Placements.** This line item has \$4 million in funding. The funds are to be used to expand community-based placements for discharge ready individuals. The annualized cost of these placements in FY18 cannot exceed the amount in this line item.

**5046-2000 Homelessness Services.** This account is funded at \$22 million, slightly below the level recommended by Governor Baker.

**5047-0001 Emergency Services/Acute Inpatient.** This account is funded at \$24,101,834, a \$250,000 decrease from the Governor's recommendation.

**5055-0000 Forensic Services.** This account, funded at \$9,147,473, includes a slight increase over FY16 spending, and is the same as the Governor's recommendation.

**5095-0015 State Psychiatric Hospitals.** This line item includes an increase of \$12.3 million over projected FY16 spending, and is \$400,000 below the Governor's recommendation. This line item allows DMH to transfer up to \$5 million from this item to support clients in the community (5046-0000) who were formerly receiving care at DMH continuing care facilities. DMH must notify the house and senate committees on ways and means 30 days prior to any transfers. DMH must also ensure any clients transferred between inpatient facilities as a result of facility closures received a level of care that is equal to or greater than the care they were receiving at the closed facility.

The conference committee includes many directives regarding the number and location of inpatient beds:

1. DMH must maintain the same number of beds that were maintained in FY16;
2. Of these 671 beds, 45 must be on the campus of Taunton State Hospital;
3. DMH may operate more than 45 beds at Taunton within the existing appropriation;
4. DMH must operate at least 260 adult continuing care beds at the Worcester Recovery Center;



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5. DMH must not take action in FY17 to reduce other number of state operated continuing care inpatient beds or other state operated programs in Taunton or relocate administrative hospital services;
6. DMH must not enter into new vendor-operated lease agreements for expansion of existing vendor programs;
7. DMH must not enter into any interagency agreements or expansion of agreements until they develop a comprehensive long-term use master plan for the campus with community input.

**5095-1016 Occupancy Fees Retained Revenue.** This line item, added in FY16, allows DMH to retain \$500,000 in revenue collected from occupancy fees charged to the tenants of the state hospitals.



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### Department of Public Health/Bureau of Substance Abuse Services (BSAS)

Line item/program	FY'14 Spending	FY'15 Spending	FY'16 GAA	FY'16 Spending	FY'17 Governor	FY'17 House Final	FY'17 Senate Final	FY'17 Conference Committee
<b>4512-0200</b> BSAS Program & Operations	\$83,958,094	\$92,221,778	\$98,239,903	\$113,773,064	\$122,588,988	\$129,072,987	\$123,792,988	<b>\$125,692,987</b>
<b>4512-0201</b> Step-Down Services	\$4,800,000	\$4,800,000	\$4,800,000	\$4,854,090	\$4,908,108	\$4,908,180	\$4,908,180	<b>\$4,908,180</b>
<b>4512-0202</b> Jail Diversion	\$2,000,000	\$2,000,000	\$2,000,000	\$2,000,000	\$2,000,000	\$2,000,000	\$2,006,486	<b>\$2,000,000</b>
<b>4512-0203</b> Young Adult Treatment Program	\$1,500,000	\$1,500,000	\$1,500,000	\$1,500,000	1,500,000	\$1,500,000	\$1,500,345	<b>\$1,500,000</b>
<b>4512-0204</b> Naloxone for First Responders	N/A	\$1,000,000	\$1,000,000	\$1,000,000	\$1,000,000	\$1,000,000	\$1,000,000	<b>\$1,000,000</b>
<b>4512-0210</b> New Addiction Treatment Programs	N/A	\$10,000,000	\$0	\$0	\$0	\$0	\$0	<b>\$0</b>
<b>4512-0211</b> Recovery High	-	-	-	-	\$3,100,000	\$3,100,000	\$3,100,913	<b>\$3,100,000</b>
<b>SUBTOTAL</b>	<b>\$92,258,094</b>	<b>\$111,521,778</b>	<b>\$107,539,903</b>	<b>\$123,127,154</b>	<b>\$135,097,096</b>	<b>\$141,581,167</b>	<b>\$135,408,912</b>	<b>\$138,201,167</b>
<b>1595-4510</b> Substance Abuse Services Fund	\$4,000,000*	-	\$5,000,000**	\$5,000,000**	\$5,000,000**	\$1,000,000	\$2,000,000	<b>\$1,000,000</b>
<b>TOTAL</b>	<b>\$96,258,094</b>	<b>\$111,521,778</b>	<b>\$112,539,903</b>	<b>\$128,127,154</b>	<b>\$140,097,096</b>	<b>\$142,581,167</b>	<b>\$137,408,912</b>	<b>\$139,201,167</b>

\*This is carryover trust fund money from the FY12 allocation of \$10m.

\*\*This fund is housed within the Executive Office of Health and Human Services for expansion of BSAS-funded services.



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The conference committee funds the Bureau of Substance Abuse Services at \$138,201,167 and includes \$1 million for the Substance Abuse Services Fund, housed at EOHHS. Funding for BSAS (and the fund) is approximately \$11 million over projected FY16 spending but is \$900,000 below the Governor's recommendation. The main BSAS line item also includes approximately \$6 million in earmarks. The conference committee did not include the Senate outside section (SECTION 83) that allowed BSAS to deficit spend in the Substance Abuse Services Fund until supplemental funding is available. EOHHS had previously indicated that structure would be acceptable to preserve existing services.

**4512-0200 BSAS Programming and Operations.** This account is funded at \$125,692,987, roughly \$12 million above the FY16 spending and \$3 million above the Governor's recommendations.

The conference committee included the following directives:

1. DPH shall ensure that vendors providing methadone treatment shall seek third-party reimbursement for these services;
2. \$500,000 for a voluntary training and accreditation program for owners and operators of alcohol and drug free housing pursuant to section 18A of chapter 17 of the General Laws;
3. Programs in substantial regulatory and contractual compliance shall receive the same level of funding in fiscal year 2017 as received in fiscal year 2016;
4. \$250,000 for a public awareness campaign relative to Naloxone;
5. \$1,500,000 to expand and support municipalities utilizing grant funds from the Massachusetts Opioid Abuse Prevention Collaborative (MOAPC) grant program;
6. \$250,000 for a pilot program for young adults 17 to 25 years of age to address substance abuse issues for this age group;
7. \$1,180,000 for the vivitrol/CSS pilot program;
8. \$200,000 for the Berkshire County Youth Development Project for youth intervention services;
9. \$150,000 for Harbor Health Services for a grant program to prevent and treat addiction to opioid and related substances;
10. \$150,000 for the operation of the Behavioral Health and Outpatient Substance Abuse Services at the Dimock Community Center;
11. \$84,000 for the Milford Police Department and the Juvenile Advocacy Group to maintain a regional substance abuse outreach and intervention program;
12. \$250,000 for a federally qualified community health center with a 24/7 emergency department licensed as a satellite emergency facility with a written affiliation agreement with a mental and behavioral health provider to integrate primary care and mental/behavioral health services for the treatment and prevention of substance abuse, among other health conditions;
13. \$150,000 for Manet Community Health Center for a behavioral health pilot program in the towns of Quincy and Hull;
14. \$100,000 for the city of Melrose to fund a substance abuse coalition and hiring a coordinator;
15. \$75,000 for the George Crane Memorial Center in Pittsfield for peer support programming and operational costs;
16. \$200,000 for the purchase and renovation of an opiate recovery treatment facility of Into Action Recover, Inc;



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17. \$75,000 for substance abuse prevention in the city of Everett for the hiring of a school prevention specialist;
18. \$150,000 for the town of Braintree for Braintree's Community Partnership on Substance Abuse;
19. \$150,000 for Self-Esteem Boston's direct services programs for women in the Boston region and provider training programs;
20. \$10,000 for Haven of Hope for community outreach and services in Methuen and Lawrence;
21. \$20,000 for the Merrimack Valley Prevention and Substance Abuse Project;
22. \$100,000 for the New Beginnings program;
23. \$50,000 for the The Psychological Center in Lawrence;
24. \$95,000 for the Eastern Massachusetts Goal Setting and Relapse Prevention program;
25. \$100,000 for a statewide program to improve the care and training for newborns with neonatal abstinence syndrome at hospital-based facilities that care for mothers and newborns;
26. \$150,000 for Project RIGHT's substance abuse and trauma prevention initiative;
27. \$75,000 for the City of Leominster to develop a comprehensive, real time referral and information system to address mental health and support services;
28. \$175,000 for the continuation of a comprehensive substance abuse and narcotic use reduction program at a federally qualified community health center located in South Boston;
29. \$25,000 to fund the Charlestown Against Drugs program;
30. \$50,000 for the Serenity House residential program to expand substance treatment and case management services for pregnant and postpartum women;
31. \$25,000 for the department of youth and family services in the town of Hopkinton;
32. \$50,000 for the Decisions at Every Turn Coalition for substance abuse prevention;
33. \$120,000 for the to establish a 1-year recovery coach pilot program in hospital emergency departments in western Massachusetts;
34. \$75,000 for the Cambridge Health Alliance to increase access to office-based opioid treatment services in Everett;
35. \$75,000 for the operations of the Gloucester High Risk Task Force sponsored by the Healthy Gloucester Collaborative;
36. \$50,000 for the establishment of a substance abuse treatment clinic in the town of Shrewsbury for veterans which shall be operated by Veterans Inc.;
37. \$50,000 for the Drug Story Theater of the Sout120+h Shore's pilot program for substance abuse prevention and education;
38. \$50,000 for the development, implementation, monitoring and documentation of a pilot program in the town of Wilmington in which the municipal police department shall develop intervention methods with families who have members suffering from addiction in collaboration with an institution of higher learning;
39. \$25,000 to purchase Naloxone for the police and fire personnel in the Town of Wakefield;
40. Maintain funding for centralized intake capacity service, the number and type of facilities that provide treatment, the ATS and CSS beds in the public system and the placement of addiction specialists in selected courts.





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**4512-0201 Step-Down Services.** This account for step-down recovery services “and other critical recovery services with severely reduced capacity” is funded at approximately \$4.9 million.

**4512-0202 Pilot Jail Diversion Program.** This account is funded at approximately \$2 million. The account appropriates funding for jail diversion programs primarily for nonviolent offenders with OxyContin or heroin addiction. The line item retains language mandating that each program provide clinical assessment services to the courts, inpatient treatment for up to 90 days, and ongoing case management for up to one year. It has identical individual eligibility criteria as in the past, i.e., OxyContin, heroin or another substance use disorder and diversion is appropriate both in accordance with clinical and public safety criteria. Programs are to be in separate counties. \$500,000 is dedicated to “support the ongoing treatment needs of clients after 90 days for which there is no other payer.”

**4512-0203 Family Intervention, Care Management, and Young Adult Treatment Program.** This account is funded at \$1.5 million. The language states that this appropriation is “for family intervention and care management services programs, a young adult treatment program, and early intervention services for individuals who are dependent on or addicted to alcohol or controlled substances or both alcohol and controlled substances.”

**4512-0204 Naloxone Distribution Programs for First Responders.** The budget includes level funding for the line item which funds the purchase, administration and training of first-responders and bystander naloxone distribution programs. Funds shall be expended to maintain funding in communities with high incidence of overdoses. DPH is required to report to the Committees on Ways & Means on (i) the communities receiving grants; (ii) the number of participants for each community; and (iii) the amount of naloxone purchased and distributed, delineated by community by October 3, 2016. There is funds transfer authority between this account and the main BSAS line item, provided that DPH file an allocation plan with Legislature 30 days before any transfer.

**4512-0211 Recovery High Schools.** Like the Governor, the conference committee proposes a new line item, funded at approximately \$3.1 million, to fund Recovery High Schools in the Commonwealth. BSAS has traditionally funded the Recovery High Schools out of the main BSAS line item.



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### Executive Office of Health & Human Services (EOHHS)/Office of MassHealth

Line item/program	FY'14 Spending	FY'15 Spending	FY'16 GAA	FY'16 Spending	FY'17 Governor	FY'17 House Final	FY'17 Senate Final	FY'17 Conference Committee
<b>4000-0300</b> EOHHS Admin.	\$92,085,813	\$88,223,229	\$92,240,452	\$85,974,577	\$99,715,735	\$100,213,866	\$99,715,735	<b>\$100,501,097</b>
<b>4000-0328</b> State Plan Amend Plan	N/A	\$394,000	\$0	\$0	\$0	\$0	\$200,000	<b>\$50,000</b>
<b>4000-0500</b> MCOs	\$4,456,036,464	\$5,162,825,921	\$5,933,039,597	\$5,347,416,595	\$5,496,523,203	\$5,496,523,203	\$5,487,523,735	<b>\$5,418,523,203</b>
<b>4000-0700</b> Fee for Service Payments	\$2,160,941,377	\$2,558,152,397	\$2,478,152,092	\$2,539,586,015	\$2,425,838,433	\$2,434,238,433	\$2,427,438,433	<b>\$2,377,838,433</b>
<b>4000-0870</b> Basic	\$161,848,020	Program rolled Into 4000-0940	Program rolled into 4000-0940	Program rolled into 4000-0940	Program rolled into 4000-0940	Program rolled into 4000-0940	Program rolled into 4000-0940	<b>Program rolled into 4000-0940</b>
<b>4000-0940</b> ACA Expansion	\$470,668,500	\$1,569,631,096	\$1,712,110,508	\$1,957,441,133	\$2,155,410,368	\$2,155,410,368	\$2,155,410,368	<b>\$2,147,410,368</b>
<b>4000-0950</b> CBHI	\$203,000,000	\$211,389,021	\$221,298,049	\$221,682,738	\$240,077,183	\$240,077,183	\$240,077,183	<b>\$236,377,183</b>
<b>4000-1405</b> Essential		Program rolled Into 4000-0940	Program rolled into 4000-0940	Program rolled into 4000-0940	Program rolled into 4000-0940	Program rolled into 4000-0940	Program rolled into 4000-0940	<b>Program rolled into 4000-0940</b>



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### MassHealth Proposals

- The conference committee funded MassHealth at levels lower than recommended by Governor Baker's in January. ABH will continue to analyze the effect of the conference committee proposal on the MassHealth program.
- The conference committee budget appears to maintain benefits and eligibility for MassHealth members.
- The conferees did not include an outside section proposed by the Governor to allow EOHHS to restructure MassHealth benefits to the extent permitted by federal law. The Administration maintains the language is not necessary though to implement certain new policy initiatives. The Administration has indicated in the recent waiver request that EOHHS will implement a plan to eliminate certain optional benefits from the PCC plan. The administration has stated these changes, which will go into effect October 2017, do not require specific legislative authorization.
- The conference budget appears to be silent on the Baker Administration's plans to require MassHealth members to move to an annual open enrollment period beginning October 1, 2016. Members will no longer be able to switch plans daily or monthly based on their coverage type. The Mass Medicaid Policy Institute reports that EOHHS has stated that it does not need legislative authorization to move forward with this plan.
- MassHealth is working to institute new program integrity initiatives across the home health programs and has put a moratorium on new home health providers in the state.
- The conference committee proposes an approximately \$14 million increase in funding for CBHI services.
- The conference committee included a \$1 million earmark to increase rates in the PCC mental health and substance abuse plan.



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### Department of Children and Families (DCF)

Line item/program	FY'14 Spending	FY'15 Spending	FY'16 GAA	FY'16 Spending	FY'17 Governor	FY'17 House Final	FY'17 Senate Final	FY'17 Conference Committee
<b>4800-0015</b> Operations	\$71,196,589	\$76,244,337	\$81,023,822	\$80,863,547	\$95,214,734	\$95,214,734	\$95,614,734	<b>\$95,614,734</b>
<b>4800-0025</b> Foster care review	\$2,995,812	\$3,125,044	\$3,226,629	\$3,033,562	\$4,089,044	\$4,089,044	\$4,089,044	<b>\$4,089,044</b>
<b>4800-0030</b> Lead Agencies	\$6,000,000	\$6,000,000	\$6,000,000	\$6,000,000	\$6,000,000	\$0	\$6,000,000	<b>\$6,000,000</b>
<b>4800-0036</b> Sexual abuse	\$698,740	\$698,740	\$698,740	\$698,739	\$698,740	\$698,740	\$698,740	<b>\$698,739</b>
<b>4800-0038</b> Child & Families	\$251,236,051	\$270,288,680	\$278,394,460	\$283,620,923	\$282,777,853	\$283,662,853	\$283,147,851	<b>\$283,687,851</b>
<b>4800-0040</b> Fam Supp Stab.	\$44,610,551	\$44,610,551	\$45,460,551	\$46,276,753	\$46,992,955	\$46,892,955	\$47,092,955	<b>\$46,892,955</b>
<b>4800-0041</b> Group care	\$208,488,950	\$243,802,414	\$250,440,914	\$264,642,587	\$263,926,536	\$265,126,535	\$265,126,536	<b>\$265,126,535</b>
<b>4800-0091</b> Social Worker	\$2,077,119	\$2,094,903	\$2,510,154	\$2,364,604	\$2,466,084	\$2,466,084	\$2,466,084	<b>\$2,466,084</b>
<b>4800-0151</b> Overnight place	\$1,028,388	\$504,388	\$504,388	\$504,388	\$504,388	\$504,388	\$504,388	<b>\$504,388</b>
<b>4800-0200</b> Family Resource Centers	\$0	\$5,228,000	\$7,398,054	\$7,398,054	\$9,978,898	\$7,398,054	\$9,978,898	<b>\$9,978,898</b>
<b>4800-1100</b> Social worker case mgt.	\$173,051,284	\$192,916,020	\$203,819,297	\$203,047,077	\$223,462,675	\$223,462,675	\$223,462,675	<b>\$223,462,675</b>
<b>TOTAL</b>	<b>\$761,383,484</b>	<b>\$845,513,441</b>	<b>\$879,627,009</b>	<b>\$898,450,234</b>	<b>\$936,111,907</b>	<b>\$929,516,062</b>	<b>\$938,182,905</b>	<b>\$938,521,903</b>



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**4800-0015 Operations Account.** This account is funded at \$95,614,734 which is an increase of approximately \$14.7 million over the final FY16 spending. The line item also includes language:

- Prohibiting DCF from accepting a child referred from DMH care until DMH forwards its assessment and recommendation as to whether the child or adolescent may be appropriately placed in foster care or if the child is more appropriate for congregate care placement, and in general, requires DCF to prioritize family circle/kinship placements;
- Requiring DCF and DEEC to maintain a centralized list of the number of children eligible for supportive childcare services, the number of supportive slots filled and the number of supportive slots available;
- Requires DCF not have a waiting list for childcare services and all children who are eligible should receive these services;
- Requires DCF to maintain a timely, independent and fair administrative hearings system;
- Requires DCF to report to the House and the Senate Committees on Ways and Means on December 31, 2016 and March 31, 2017 on details of the fair hearing requests, matter of appeal, number of days between hearings and decisions etc.;
- Requires DCF to also report to the House and Senate Committees on Ways and Means on details by February 28, 2017 regarding the number of medical and psychiatric personal employed by or under contract with the apartment, and more staffing details;
- Requires DCF to report quarterly on their caseloads, including details on foster care placements, number of children hospitalized, number of children served by supervised visitors, and specific data broken down by area office;
- Requires DCF to report by November 1, 2016 to the Legislature on any changes to rules, regulations or guidelines established by DCF;
- Requires DCF to report to the caseload forecasting office with data on how many children are receiving services and how many children and families are being served by family resource centers by area;
- Requires DCF to maintain funding for the aging out population to the extent feasible within existing appropriations;
- Allows limited transferability between specific line items provided they not be made for administrative cost and notify the House and the Senate Committees on Ways and Means;
- \$250,000 for the runaway unit to help identify at-risk youth and provide preventative services and to implement a runaway recovery response policy;
- \$400,000 for the hiring of additional new trial attorneys to handle child welfare cases.

**4800-0030 Service Coordination/Administration.** The conference committee funds this line item at \$6 million.

**4800-0038 Services for Children and Families.** This account is funded at approximately \$283.6 million. Funding is for “permanency, stabilization, shelter, placement and congregate care.”



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The conference committee included the following earmarks:

1. \$400,000 for the Children's Advocacy Center of Bristol County;
2. \$100,000 for the Plymouth County Children's Advocacy Center;
3. \$140,000 for the Children's Cove Cape and Islands Child Advocacy Center;
4. \$150,000 for the Fragile Beginnings program;
5. \$100,000 for the Project Newborns Exposed to Substances;
6. \$250,000 for Wayside Youth and Family Support Network, Inc. TEMPO Program;
7. funding for the children's advocacy centers and services for child victims of sexual abuse and assault;
8. \$100,000 for the Children's Advocacy Center of Worcester County;
9. \$25,000 for Rick's Place, Inc. in the town of Wilbraham;
10. \$20,000 for On Common Ground, Inc.;
11. \$25,000 for South Boston En Acción, Inc.;
12. \$50,000 for the Massachusetts Citizens for Children;
13. \$25,000 for the Methuen Athletic Improvement Committee's Methuen Youth Center Committee;
14. \$75,000 for the Weymouth Teen Center;
15. \$140,000 for the Children's Advocacy Center of Suffolk County;
16. \$50,000 for the planned learning achievement for youth program in Amherst;
17. \$75,000 for the Catholic Charities Labouré Center and its Recovery Connections program;
18. \$100,000 for the Treehouse Foundation of Easthampton;
19. \$75,000 for Julie's Family Learning Program, Inc.

**4800-0040 Family Support and Stabilization.** This account, which funds "family prevention and unification services", is funded at \$46.9 million. This is an increase of approximately \$816,000 over FY16 spending. It includes an earmark of \$100,000 for Square One daycare in the city of Springfield.

**4800-0041 Group Care.** This account is funded at \$265 million. The language in the account permits the use of funds "to provide community-based services, including in-home support and stabilization services, to children who would otherwise be placed in congregate settings."

**4800-0151 Placement for Juvenile Offenders.** This account was level-funded. This account funds "alternative overnight non-secure placements for status offenders and nonviolent delinquent youths up to the age of 17 to prevent the inappropriate use of juvenile cells in police stations for such offenders." Programs are required to collaborate with the sheriffs' offices to refer the youth "to any programs within the sheriff's office designed to positively influence youths or reduce, if not altogether eliminate, juvenile crime."

**4800-0200 Family Resource Centers.** The conference committee funds this line item at \$9.9 million, identical to the Governor's recommendations.



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**4800-1100 Social Worker Case Management.** This account is funded at approximately \$223 million which is an increase of \$20 million over the final FY16 appropriation. The administration has indicated they will hire 230 new social workers and additional supervisors with the proposed funding.



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### Post-Natal Care for Substance-Exposed Infants

Line item/program	FY'14 Spending	FY'15 Spending	FY'16 GAA	FY'16 Spending	FY'17 Governor	FY'17 House Final	FY'17 Senate Final	FY'17 Conference Committee
Post-natal care for substance-exposed newborns (1599-1450)	--	--	\$600,000	\$600,000	\$0	\$0	\$0	\$0

**1599-1450 Substance-Exposed Newborn Post-Natal Care.** The conference committee did not fund this program.

### Behavioral Health Triage Pilot - Quincy

Line item/program	FY'14 Spending	FY'15 Spending	FY'16 GAA	FY'16 Spending	FY'17 Governor	FY'17 House Final	FY'17 Senate Final	FY'17 Conference Committee
Behavioral Health Triage (1599-2004)	--	--	\$500,000	\$500,000	\$0	\$0	\$0	\$0

**1599-2004 Behavioral Health Triage Pilot in Quincy.** The conference committee did not fund this pilot program.





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### Substance Abuse Services Fund Transfer

Line item/program	FY'14 Spending	FY'15 Spending	FY'16 GAA	FY'16 Spending	FY'17 Governor	FY'17 House Final	FY'17 Senate Final	FY'17 Conference Committee
Substance Abuse Services Fund (1595-4510)	-	-	\$5,000,000	\$5,000,000	\$5,000,000	\$1,000,000	\$2,000,000	<b>\$1,000,000</b>

**1595-4510 Substance Abuse Services Fund.** The conference committee proposes \$1 million for the Substance Abuse Services Fund to “increase the number of clients receiving substance abuse treatment” through BSAS. BSAS would be mandated to “utilize a range of treatment settings” including, but not limited to:

- detoxification services;
- clinical stabilization services;
- residential treatment services;
- outpatient treatment services;
- counseling;
- promoting primary care practitioner's access to available, trained and certified addiction specialists for consultation or referral; and
- educating primary care providers about addiction prevention and treatment and to encourage primary care providers to screen for signs of substance abuse.

In determining use of expansion funds, BSAS is directed to select settings that:

- prioritize treatment methods that are evidence-based and cost effective;
- ensure substance abuse treatment access to historically underserved populations; and
- ensure availability of a continuum of services and care for clients entering substance abuse treatment.

DPH is required to report quarterly to the Legislature on:

- the way funds were spent in the previous quarter, including an itemized accounting of the goods and services that were procured;
- an accounting of substance abuse services provided by the fund, broken down by month and type of service, since 2011 through the current quarter;
- the number of clients served, by month and type of service;
- the number of new and returning clients, by service;
- amounts expended by type of service for each month in the prior quarter; and
- procurement and service goals for the subsequent quarter.



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### Chapter 257 Rate Reserve

Line item/program	FY'14 Spending	FY'15 Spending	FY'16 GAA	FY'16 Spending	FY'17 Governor	FY'17 House Final	FY'17 Senate Final	FY'17 Conference Committee
Chapter 257 Rate Reserve (1599-6903)	-	\$15,013,791	\$30,000,000	\$21,058,061	\$36,245,575	\$36,245,574	\$36,245,575	\$36,245,575

**1599-6903 Chapter 257 Rate Reserve.** The line item funds the cost of implementation of Chapter 257 as well as the annualization of the human services salary reserve and is equal to the amount recommended by Governor Baker. The administration had previously indicated the rate reserve will fund the rates they anticipate to set in FY17. Funding for new rates set in FY16 was annualized in the programmatic line items.

The conference committee includes language requiring the Baker administration to report quarterly to the House and Senate Committees on Ways and Means transfers made from this line item. The Administration also must report on the implementation of chapter 257 rates by January 16, 2017. The report must include:

- Spending and revenue for rates not yet promulgated as of July 1, 2016 by item, revenue source, service class and start date of implementation;
- Spending and revenue for rates promulgated no later than June 30, 2015 that have received a biennial rate review by item, revenue source, service class and start date of implementation;
- Spending and revenue for rates due to be reviewed on July 1, 2016 by item, revenue source, service class and start date of implementation;
- Estimated spending and revenue for rates to be reviewed between July 1, 2016 and June 30, 2017, by item, revenue source, service class and projected start date of implementation;
- Payroll spending in fiscal year 2010 and fiscal year 2016 aggregated by vendor and by service class.

The line item also requires that the contracts between providers and the administration require providers to report on the impact of the rate implementation on employee salaries, employee-related costs and operations.

### Human Services Salary Reserve

Line item/program	FY'14 Spending	FY'15 Spending	FY'16 GAA	FY'16 Spending	FY'17 Governor	FY'17 House Final	FY'17 Senate Final	FY'17 Conference Committee
Salary Reserve (1599-6901)	\$11,500,000	\$8,000,000	\$0	\$5,287,476	Consolidated with 1599-6903	\$0	\$0	\$0

**1599-6901 Human Services Salary Reserve.** The FY16 salary reserve spending was for the annualized cost of the FY'15 salary reserve. The conference committee did not fund this line item.



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### Other Line Items of Interest

Line item/program	FY'14 Spending	FY'15 Spending	FY'16 GAA	FY'16 Spending	FY'17 Governor	FY'17 House Final	FY'17 Senate Final	FY'17 Conference Committee
<b>0330-0601</b> Specialty Courts	-	\$1,713,000	\$3,229,651	\$3,229,651	\$3,261,948	\$6,028,004	\$3,229,651	<b>\$3,229,651</b>
<b>0810-1205</b> AG Opioid Addiction	-	-	-	-	\$1,000,000	\$1,000,000	\$1,000,000	<b>\$1,000,000</b>
<b>3000-6075</b> Early Childhood Mental Health	\$750,000	\$750,000	\$750,000	\$750,000	Consolidated Into 3000-1020	Consolidated Into 3000-1020	Consolidated Into 3000-1020	Consolidated Into 3000-1020
<b>4512-0103</b> HIV/AIDS Program	\$32,275,996	\$32,229,848	\$33,120,000	\$33,120,000	\$32,934,597	\$32,934,598	\$33,370,000	<b>\$33,134,598</b>
<b>4512-0106</b> HIV/AIDS Drug Assist Prgm	\$7,500,000	\$7,500,000	\$7,500,000	\$7,500,000	\$7,500,000	\$7,500,000	\$7,500,000	<b>\$7,500,000</b>
<b>4512-0225</b> Compulsive Gamblers	\$1,500,000	\$1,500,000	\$1,500,000	\$1,500,000	\$1,500,000	\$1,500,000	\$1,500,000	<b>\$1,500,000</b>
<b>4513-1026</b> Suicide Prevention	\$3,863,305	\$3,855,239	\$4,350,000	\$4,350,000	\$4,130,748	\$4,180,748	\$4,180,748	<b>\$4,180,748</b>
<b>7004-9033</b> DHCD Rental Subsidies for DMH	\$4,150,000	\$5,048,125	\$5,548,125	\$5,548,125	\$5,548,125	\$5,548,125	\$5,548,125	<b>\$5,548,125</b>
<b>7010-0060</b> New grants for BH couns in schools	N/A	\$0	\$500,000	\$4,300,000	\$0	\$0	\$0	<b>\$0</b>



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### Outside Sections

**SECTIONS 13-35. Office of the Child Advocate.** These sections overhaul details about the structure of the Office of the Child Advocate.

**SECTION 36. MCPAP.** This section codifies the MCPAP and MCPAP for Moms programs and allows DMH to bill commercial insurers whose members use this service.

**SECTION 63. Pharmacist Administered Prescriptions.** Authorizes pharmacists to administer prescriptions for mental health and substance abuse at the direction of a practitioner.

**SECTION 66-73. Incapacitated Persons.** These sections modify definitions of incapacitated persons to include individuals incapacitated by other substances as well as alcohol. It also adds provisions to what happens when a person is incapacitated for a reason other than being drunk. In this case, a police officer may still take a person into protective custody, but the determination of incapacity does not involve the administration of a breathalyzer.

**SECTION 74. Mobile Integrated Health.** Directs DPH to provide for mobile integrated health programs that are also the primary ambulance service for a jurisdiction to avert calls for EMS from emergency departments when care is more appropriate in a non-emergency department setting.

**SECTIONS 117-118. DMH Guardian's Power to Sell Real Estate.** Rescinds the requirement that a license to sell real estate may not be granted to the guardian of a person incapacitated by mental illness without 7 days' notice to DMH.

**SECTIONS 136-137. Non-Fatal Opioid Overdose Reports.** Amends the 2015 opiate addiction prevention legislation to include reports on non-fatal opiate overdoses. Expands a 2016 opiate reporting act to expand the number of parties that receive reports of opiate overdoses, and authorizes EOHHS to publish supplemental reports on the trends identified through its examination.

**SECTION 138. Substance Abuse Evaluations.** This section requires DPH to collect annually the frequency and location of substance abuse evaluations that are mandated under the recent opioid law.

**SECTION 148. Trust Fund Transfers.** This section requires the Comptroller to transfer funding to the General Fund on or before June 30, 2017: \$4 million from the Mental Health Information System Trust Fund; \$2 million from the Soloman Mental Health Center Trust Fund; \$658,436 from the Cape Cod and Islands Mental Health and Retardation Center Trust Fund and \$1 million from the Quincy Mental Health Center Trust fund.



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**SECTION 171. Task Force on Newborns with Neonatal Abstinence Syndrome.** Establishes an Interagency Task Force on Newborns with Neonatal Abstinence Syndrome and Substance Exposed Newborns to develop a unified statewide plan to collect data, develop outcome goals and ensure quality service, and requires a report back by March 1, 2017.

**SECTION 175. Health Advice Phone Line Study.** Requires the Secretary of EOHHS to conduct a study of the feasibility of implementing a 24-hour health advice phone line within DPH through a public-private partnership, staffed by registered nurses and other health care providers to advise callers on health matters, including behavioral health. They should study providing access, advising callers and collaborating with the BSAS helpline and submit a detailed cost estimate to the house and senate committees on ways and means.

**SECTION 178. HPC Pilot Program.** Requires the HPC in consultation with DPH to implement a 2-year pilot program to further test a model of emergency department initiated medication-assisted treatment. The pilot shall take place at up to 3 sites and be funded with \$3 million from the Distressed Hospital Trust Fund.

**SECTION 183. Policy on Medication Assisted Treatment and Psychotropic Medications for Candidates of Specialty Courts.** This section requires the Trial Court to develop a statewide policy regarding the use of medication assisted therapies or psychotropic medications by candidates for specialty court programs. The policy should include that candidates cannot be disqualified for participating in specialty courts because they have been prescribed these medications and shall prohibit judges from requiring abstinence from MAT or psychotropic medications to participate.

**SECTION 182. UMASS Study of Marijuana Use.** Directs EOHHS and EOAF to enter into an agreement with UMass to conduct a comprehensive baseline study of marijuana use in the Commonwealth and submit a report to the Legislature by April 1, 2017.

**SECTION 193. Special Commission on Behavioral Health Promotion.** Establishes a special commission on behavioral health promotion and upstream prevention to investigate evidence-based practices, programs and systems to prevent behavioral health disorders and promote behavioral health across the Commonwealth. ABH is a named member of this committee.