



ASSOCIATION
FOR BEHAVIORAL
HEALTHCARE

ABH Preliminary Analysis of the Final House FY 2016 Budget

April 30, 2015

April 29, 2015

To: ABH Members
From: Vic DiGravio, President/CEO
Re: Preliminary Analysis of the Final House Fiscal Year 2016 Budget Recommendations

The Massachusetts House finished debate on their FY 2016 budget proposal yesterday afternoon. The \$38 billion annual budget proposal increases spending by 2.8% percent over last year. For the first time since 2007, the budget proposal does not draw from the state's rainy day fund.

The Final House FY '16 budget includes the following highlights. ABH will continue to keep you updated as we receive more clarity on the implications of the level of budget funding recommended.

Department of Mental Health (DMH)

- DMH is funded at \$743,495,489, slightly higher than the House Ways & Means Committee recommendation.
- This is a \$16.3 million increase over the Governor's Budget recommendations and \$28.7 million increase over projected FY15 spending.
- Annualizes the \$10 million in new money DMH received in FY15 to fund 100 new DMH community placements for individuals currently stuck in continuing care beds who are ready for discharge. It also includes an additional \$4 million for new community placements above those funded in FY15.
- The budget requires DMH to maintain the current level of inpatient beds for kids and adults.
- Restores the Governor's proposed reductions to the Individual & Family Flexible Supports (IFFS) program for 700 families.
- Accepts the Governor's proposal related to the transfer of State Operated Emergency Services programs (ESP) in the Southeast, but includes language mandating that there be no reduction in services relating to alignment of the ESP service delivery model across the state.

Bureau of Substance Abuse Services (BSAS)

- The final House budget funds the Bureau of Substance Abuse Services (BSAS) at \$111,362,721, a slight decrease versus projected FY15 spending, and a slight increase over the Governor's proposal. However, new earmarks have been added, so it is unclear whether other services are affected.
- The Final House budget retains funding for additional residential recovery beds and transitional support services beds, as well as a \$2.5 million for a vivitrol pilot at clinical support services programs.

MassHealth

- Appears to have no cuts to MassHealth behavioral health services or changes to MassHealth eligibility.



ASSOCIATION
FOR BEHAVIORAL
HEALTHCARE

ABH Preliminary Analysis of the Final House FY 2016 Budget

April 30, 2015

Additional Highlights

- Funds the Chapter 257 rate reserve at \$30 million.
- Creates a \$500,000 reserve to fund a “field triage” pilot in the Quincy area for individual with behavioral healthcare needs.

Next Steps:

The Senate Ways & Means Committee will file its budget in mid-May and will debate and amend its budget shortly afterwards. After each chamber has approved its version of the budget, the Senate President and House Speaker will make appointments to a conference committee to resolve differences between the House and Senate spending bills and produce a final legislative budget known as a conference committee report.

The conference committee report will be voted either up or down (no amendments are permitted) by each chamber, and if approved, sent to the Governor who will have ten days to review the budget and return his vetoes and recommendations for amendment.



ASSOCIATION
FOR BEHAVIORAL
HEALTHCARE

ABH Preliminary Analysis of the Final House FY 2016 Budget

April 30, 2015

Department of Mental Health (DMH)

Line item/program	FY'13 Post 9C	FY'14 GAA	FY'14 Spending	FY'15 GAA	FY'15 Post 9C	FY'16 Governor	FY'16 HWM	FY'16 Final House
5011-0100 Operations	\$27,035,141	\$27,275,844	\$27,275,845	\$28,098,283	\$28,048,283	\$28,720,221	\$28,720,222	\$28,720,222
5042-5000 Child/Adolescent Services	\$74,926,757	\$85,222,740	\$85,222,740	\$87,567,266	\$80,420,672	\$80,420,672	\$86,367,266	\$86,422,266
5046-0000 Adult Community Services	\$344,064,965	\$353,868,606	\$356,030,330	\$360,697,453	\$352,977,208	\$370,816,150	\$376,541,024	\$376,791,024
5046-0005 Comm Placements	N/A	N/A	N/A	\$10,000,000	\$10,000,000	Consolidated To 5046-0000	\$4,000,000	\$4,000,000
5046-2000 Homeless Initiative	\$20,134,424	\$20,134,424	\$20,134,424	\$20,134,629	\$20,134,629	\$22,134,979	\$22,134,979	\$22,134,979
5046-4000 CHOICE RR	\$125,000	\$125,000	\$125,000	\$125,000	\$125,000	\$125,000	\$125,000	\$125,000
5047-0001 Emergency/Acute Inpatient	\$34,742,257	\$35,526,443	\$35,526,443	\$36,416,490	\$31,402,706	\$24,258,428	\$24,258,428	\$24,258,428
5055-0000 Forensic services	\$8,321,818	\$8,497,163	\$8,497,163	\$8,978,876	\$8,878,876	\$9,183,473	\$9,076,604	\$9,076,604
5095-0015 State psych hosp	\$164,589,962*	\$173,116,512	\$175,616,512	\$183,883,536	\$182,773,537	\$191,466,966	\$191,466,966	\$191,466,966
5095-1016 Occupancy Fees	N/A	N/A	N/A	N/A	N/A	N/A	\$500,000	\$500,000
TOTAL	\$673,940,324	\$703,766,897	\$708,428,457	\$735,901,533	\$714,760,911	\$727,125,889	\$743,190,489	\$743,495,489



ASSOCIATION
FOR BEHAVIORAL
HEALTHCARE

ABH Preliminary Analysis of the Final House FY 2016 Budget

April 30, 2015

The Department of Mental Health is funded at \$743,495,489. This is a \$16.3 million increase over the Governor's Budget recommendations and \$28.7 million increase over projected FY15 spending.

5011-0100 Operations. The final House budget includes an increase of approximately \$671,000 over projected FY15 spending. This amount is equal to the Governor's recommendations, where DMH indicated it did not maintain FY15 staffing levels and will result in a reduction of 13 FTEs. It is unclear whether an Early Retirement Incentive Program changes this analysis.

5042-5000 Child/Adolescent Mental Health Services. This account includes an increase of approximately \$6 million over the Governor's recommendations and over FY15 spending. DMH had previously indicated the Governor's budget recommendations would not preserve existing services. The House Committee on Ways and Means says they have restored funding for 700 families for child and adolescent mental health services that were cut in the Governor's budget. The line item includes an earmark of \$3.12 million to fund the Massachusetts Child Psychiatry Access Project (MCPAP) and requires DMH to continue to assess commercial insurers if their members access MCPAP services based on DMH's regulations. The line item was slightly increased by amendment to reflect an earmark for a juvenile firesetter intervention and prevention program in Hampshire and Franklin Counties, the town of Athol and the city of Holyoke.

5046-0000 Adult Mental Health Community Services & 5046-0005 Community Placements. These two accounts are funded collectively at approximately \$9.9 million over the Governor's recommendations and \$17.8 million increase over projected FY15 spending. The Governor's budget had previously consolidated the new community placements line item (5046-0005) with the adult mental health community services line item (5046-0000).

5046-0000 requires DMH to fund jail diversion programs at the same level as the prior fiscal year in municipalities. 5046-005 requires \$4 million to be spent on expanding community-based placements for discharge ready individuals currently in the department's continuing care facilities. The House increased the line item to reflect two earmarks: one for "the International Institute of New England for culturally and linguistically appropriate mental health services for immigrants and refugees;" and another for the "Massachusetts School of Professional Psychology's Interface in Plymouth County."

5046-2000 Homelessness Services. This account includes an increase over projected FY15 spending, and mirrors the Governor's recommended funding levels.

5046-4000 CHOICE Program Retained Revenue. This line item is level-funded at \$125,000. This account allows DMH to retain up to \$125,000 of the revenue they collect from occupancy fees charged to participants in the CHOICE housing program. The fees must then be used for the routine maintenance and repair of CHOICE facilities.



ASSOCIATION
FOR BEHAVIORAL
HEALTHCARE

ABH Preliminary Analysis of the Final House FY 2016 Budget

April 30, 2015

5047-0001 Emergency Services/Acute Inpatient. This account is funded at \$24,258,428 a decrease of approximately \$7.1 million from projected FY15 spending, and equal to the Governor's Budget recommendations. EOHHS had previously indicated they will convert the remaining state operated Emergency Service Programs to provider-operated programs. The account includes language directing the Department to continue its ISA for the purchase of services under this account, and an amendment added language stating "that there shall not be a reduction in services in the Southeast area related to the alignment of state operated Emergency Services."

5055-0000 Forensic Services. This account, funded at \$9,076,604 includes an increase of approximately \$197,000 from FY15 projected spending, and is \$100,000 below the Governor's recommendations.

5095-0015 State Psychiatric Hospitals. This line item includes an increase of \$8.7 million over FY15 projected spending and is identical to the Governor's budget recommendation. EOHHS has indicated there will not be any reductions in DMH inpatient beds for kids or adults and that this appropriation funds current services. Language in the line item requires DMH to maintain no fewer inpatient beds in FY'16 than operated in FY'15, and that 45 beds remain at Taunton State Hospital.

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



ABH Preliminary Analysis of the Final House FY 2016 Budget

April 30, 2015

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

Line item/program	Final FY'13 – Post 9C	FY'14 GAA	FY'14 Spending	FY'15 GAA	FY'15 Post 9C	FY'16 Governor	FY'16 HWM	FY'16 Final House
4512-0200 BSAS Programming & Operations	\$77,029,178	\$83,958,094	\$83,958,094	\$91,317,333	\$92,221,778	\$90,424,903	\$97,075,501	\$98,570,501
4512-0201 Step-Down Services	\$4,800,000	\$4,800,000	\$4,800,000	\$4,800,000	\$4,800,000	\$4,800,000	\$8,387,220	\$8,387,220
4512-0202 Jail Diversion	\$2,000,000	\$2,000,000	\$2,000,000	\$2,000,000	\$2,000,000	\$2,000,000	\$2,000,000	\$2,000,000
4512-0203 Young Adult Treatment Program	\$1,500,000	\$1,500,000	\$1,500,000	\$1,500,000	\$1,500,000	\$1,500,000	\$1,500,000	\$1,500,000
4512-0204 Naloxone for First Responders	N/A	N/A	N/A	\$1,000,000	\$1,000,000	\$1,000,000	\$1,000,000	\$1,000,000
4512-0205 Sober Homes Accreditation	N/A	N/A	N/A	Earmarked In 4512-0200	N/A	N/A	Earmarked In 4512-0200	Earmarked In 4512-0200
4512-0210 New Addiction Treatment Programs	N/A	N/A	N/A	\$10,000,000	\$10,000,000	\$10,000,000	\$0	\$0
Substance Abuse Service Fund	\$6,750,000***	\$4,000,000***	\$4,000,000***					\$0
TOTAL	\$92,079,179	\$96,258,094	\$96,258,094	\$111,617,333	\$111,521,778	\$109,724,903	\$109,962,721	\$111,457,721

**Includes supplemental funding

***This is carryover trust fund money from the FY12 allocation of \$10m. Original estimates said \$6.75m of this funding of the funding would be used in FY13 for the Section 35 expansion programs, and \$3.25 of the funding will carry forward past the current July 1, 2013 expiration. BSAS has indicated the funding has been rolled into the operating account for FY15.



ASSOCIATION
FOR BEHAVIORAL
HEALTHCARE

ABH Preliminary Analysis of the Final House FY 2016 Budget

April 30, 2015

The final House budget funds the Bureau of Substance Abuse Services (BSAS) at \$111,457,321, a slight decrease versus projected FY15 spending, and a slight increase over the Governor's proposal. However, new earmarks have been added, so it is unclear whether other services are affected.

4512-0200 BSAS Programming and Operations. This account is funded at \$98.5 million for FY16, an increase of \$6.6 million over projected FY15 spending. The House does eliminate the line item 4512-0210 so ABH presumes this increase in funding will cover the new addiction treatment programs funded in last year's budget through that line item.

The final House budget requires BSAS to expend funding for an additional licensed residential recovery beds. The recommendation also requires BSAS to allocate \$250,000 for a pilot program for young adults to address addiction issues, \$500,000 for the sober home accreditation program, \$2.5 million for a vivitrol pilot described in outside section 70, \$250,000 for a public awareness campaign related to Narcan, and \$1.5 million to expand and support municipalities grant funds from the Massachusetts Opioid Abuse Prevention Collaborative program. It also requires BSAS to maintain existing programming, including its central intake program, the number and type of facilities that provide treatment, detoxification and clinical stabilization services beds in the public system and the addiction specialists currently placed in specific district courts.

The House amendment increased the line item by \$1.4 million. It also requires expenditure of \$300,000 on *integrated treatment and stabilization services for individuals and families with co-occurring substance abuse and mental health disorders*, and \$100,000 on 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, including the ten level III neonatal intensive care units.* In addition, numerous earmarks totaling \$1,095,000 were added to the line item.

1. Gavin Foundation - \$250,000
2. Berkshire County Youth Development Project for youth intervention services - \$100,000
3. Merrimack Valley Prevention and Substance Abuse Project for community outreach - \$25,000
4. Stoneham Substance Abuse Coalition Coordinator - \$50,000
5. "A community health center agency that has a 24/7 emergency department licensed as a satellite emergency facility under 105 CMR 130" for development and administration of a program to prevent and treat addiction to opioid and related substances - \$75,000
6. Eastern Massachusetts Goal Setting and Relapse Prevention program/Dedham District Court - \$95,000
7. New Beginnings program for youth at risk and in recovery - \$100,000
8. Grove Hall- Area Project RIGHT for substance abuse and trauma prevention - \$100,000
9. Self-Esteem Boston's direct services programs for women in the Boston region and provider training programs - \$150,000
10. Dimock Community Center counseling and treatment - \$150,000



ASSOCIATION
FOR BEHAVIORAL
HEALTHCARE

ABH Preliminary Analysis of the Final House FY 2016 Budget

April 30, 2015

The amendment also included language providing that *“programs in substantial regulatory and contractual compliance shall receive the same percentage level of funding in fiscal year 2016 as received in fiscal year 2015.”*

4512-0201 Step-Down Services. This account is funded at \$8,387,220, a \$4.3 million increase over the FY15 spending and the Governor’s recommendation. The language requires BSAS to increase the number of licensed transitional support services beds.

4512-0202 Pilot Jail Diversion Program. This account is level-funded at \$2 million. The account appropriates funding for pilot jail diversion programs primarily for nonviolent offenders with OxyContin or heroin addiction.

4512-0203 Family Intervention, Care Management, and Young Adult Treatment Pilot Program. This account is level-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 last year’s new line item which funds the purchase, administration and training of first-responders and bystander naloxone distribution programs.

4512-0210 New Addiction Treatment Services. This line item was eliminated in the HWM and final House budget recommendations. ABH presumes the funding for these programs is included in 4512-0200.



ABH Preliminary Analysis of the Final House FY 2016 Budget

April 30, 2015

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

Line item/program	Final FY'13 Post 9C	FY'14 GAA	FY'14 Spending	FY'15 GAA	FY'15 Post 9C	FY'16 Governor	FY'16 HWM	FY'16 Final House
4000-0300 EOHHS Admin.	\$87,244,888	\$91,785,813	\$92,085,813	\$91,557,569	\$88,223,229	\$90,898,463	\$91,640,452	\$92,065,452
4000-0328 State Plan Amend Plan	N/A	N/A	N/A	\$400,000	\$394,000	\$400,000	\$0	\$0
4000-0500 MCOs	\$4,257,117,147	\$4,500,411,804	\$4,456,036,464	\$4,792,819,941	\$5,162,825,921	\$5,931,539,597	\$5,931,539,597	\$5,931,539,597
4000-0700 Fee for Service Payments	\$1,819,111,138	\$2,196,315,039	\$2,160,941,377	\$2,381,458,986	\$2,558,152,397	\$2,489,792,092	\$2,491,392,092	\$2,498,792,092
4000-0870 Basic	\$172,080,738	\$180,437,109	\$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
4000-0940 ACA Expansion	-	\$448,000,379	\$470,668,500	\$1,702,696,743	\$1,569,631,096	\$1,712,110,508	\$1,712,110,508	\$1,712,110,508
4000-0950 CBHI	\$179,743,708	\$203,200,101	\$203,000,000	\$207,371,693	\$211,389,021	\$221,798,049	\$221,313,901	\$221,313,901
4000-1405 Essential	\$466,755,623	\$489,878,244		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



ASSOCIATION
FOR BEHAVIORAL
HEALTHCARE

ABH Preliminary Analysis of the Final House FY 2016 Budget

April 30, 2015

MassHealth Proposals

The final House budget recommends saving more than \$700 million in large part by pushing expenditures into the future. The MassHealth budget totals more than \$15.3 billion in funding, including \$209.5 million saved through an eligibility redetermination process and “cash management” solutions, which defer payments until fiscal 2017.

- It appears the House proposal does not change current MassHealth eligibility.
- The House included language requiring MassHealth to report on the feasibility of federal reimbursement for transitional support services no later than October 1, 2015.
- The House Ways & Means proposal projected approximately \$209.5 million in savings from the MassHealth redetermination process. An updated projection is not available at this time. MassHealth has begun this process in FY15.
- There are no proposed changes to the current ConnectorCare subsidized health insurance program.
- There were no proposed cuts to MassHealth behavioral health services. EOHHS previously indicated most provider rates have been held at FY15 levels with some limited exceptions. Our understanding at this time is that there are not proposed rates cuts for behavioral health services.
- Chiropractic services are included in the final House budget after the Governor recommended they be eliminated.
- The proposal authorizes review of the MassHealth dental benefit for adults.
- The final House budget provides for supplemental payments to acute care pediatric hospitals and pediatric specialty units for high-complexity pediatric patients.
- Reforms include allowing the bulk purchasing of critical medical equipment and the approval of shorter-term drug prescriptions to prevent waste and abuse.



ASSOCIATION
FOR BEHAVIORAL
HEALTHCARE

ABH Preliminary Analysis of the Final House FY 2016 Budget

April 30, 2015

Department of Children and Families (DCF)

Line item/program	Final FY'13 – Post 9C	FY'14 GAA	FY'14 Spending	FY'15 GAA	FY'15 Post 9C	FY'16 Governor	FY'16 HWM	FY'16 Final House
4800-0015 Operations	\$67,251,557*	\$68,828,898	\$71,196,589	\$74,871,347	\$76,244,337	\$80,703,822	\$80,703,821	\$80,703,821
4800-0025 Foster care review	\$2,943,098	\$2,995,812	\$2,995,812	\$3,028,757	\$3,125,044	\$3,247,347	\$3,226,629	\$3,226,629
4800-0030 Lead Agencies	\$6,000,000	\$6,000,000	\$6,000,000	\$6,000,000	\$6,000,000	\$6,000,000	\$0	\$0
4800-0036 Sexual abuse	\$697,508	\$698,740	\$698,740	\$698,740	\$698,740	\$698,740	\$698,740	\$698,740
4800-0038 Child & Families	\$248,083,481	\$249,311,051	\$251,236,051	\$261,553,353	\$270,288,680	\$277,494,460	\$277,494,460	\$277,894,460
4800-0040 Fam Supp Stab.	\$44,015,551	\$44,610,551	\$44,610,551	\$44,610,551	\$44,610,551	\$44,610,551	\$44,610,551	\$44,710,551
4800-0041 Group care	\$193,128,991	\$206,488,950	\$208,488,950	\$216,417,590	\$243,802,414	\$249,564,682	\$253,323,682	\$253,323,682
4800-0091 Social Worker	\$2,077,119	\$2,077,119	\$2,077,119	\$2,094,902	\$2,094,903	\$2,510,154	\$2,575,119	\$2,575,119
4800-0151 Overnight place	\$1,004,678	\$1,028,388	\$1,028,388	\$504,388	\$504,388	\$504,388	\$504,388	\$504,388
4800-0200 Family Resource Centers	\$0	\$0	\$0	\$5,227,963	\$5,228,000	\$7,393,000	\$7,398,054	\$7,398,054
4800-1100 Social worker for case mgmt.	\$165,718,468	\$171,921,284	\$173,051,284	\$185,551,997	\$192,916,020	\$201,819,297	\$201,511,365	\$201,819,297
TOTAL	\$730,920,451	\$753,960,793	\$761,383,484	\$800,559,588	\$845,513,441	\$874,546,441	\$872,046,809	\$872,854,741



ASSOCIATION
FOR BEHAVIORAL
HEALTHCARE

ABH Preliminary Analysis of the Final House FY 2016 Budget

April 30, 2015

4800-0015 Operations Account. This account is funded at \$80,703,821 which is an increase of approximately \$4.5 million over projected FY15 spending. The line item also allows the Commissioner of DCF to transfer funds between specific line items when necessary.

4800-0030 Service Coordination/Administration. This account, which funds “lead agencies”, was not included in the HWM or final House budgets.

4800-0038 Services for Children and Families. This account is funded at approximately \$277.9 million, identical to Governor Baker’s recommendation, which is an increase of approximately \$7.6 million over FY15 projected spending. Funding is for “guardianship, foster care, adoption, family preservation and kinship services.” The final House budget reflects an increase of \$400,000 over the Ways & Means proposal. The consolidated amendment added 9 programmatic earmarks, totaling \$575,000. It also includes language allowing for the expenditure of funds on programs that received funding in SFY’15, and adds a requirement that expenditures on children’s advocacy centers be no less than SFY’15 expenditures.

4800-0040 Family Support and Stabilization. This account, which funds “family prevention and unification services”, is funded at \$44,710,551. This slight increase over the House Ways & Means proposal reflects the addition of a \$100,000 earmark.

4800-0041 Group Care. The final House budget funds this account at \$253,323,682. This is an increase of approximately \$9.5 million over projected FY’15 spending and \$4 million above the Governor’s recommendation. The language in the account permits the use of funds “to provide intensive community-based services, including intensive in-home support and stabilization services, to children who would otherwise be placed in residential settings.”

4800-0151 Placement for Juvenile Offenders. This account was level-funded at \$504,388. This account funds “alternative overnight non-secure placements for status offenders and nonviolent delinquent youths to prevent the inappropriate use of juvenile cells in police stations for such offenders”.

4800-0200 Family Resource Centers. The final House budget retains the Governor’s recommended increase of approximately \$2.1 million to the Family Resource Center line item.

4800-1100 Social Worker Case Management. This account is funded at approximately \$201.8 million which is an increase of \$8.9 million over projected FY15 spending.



ABH Preliminary Analysis of the Final House FY 2016 Budget

April 30, 2015

Post-Natal Care for Substance-Exposed Infants

Line item/program	Final FY'13 – Post 9C	FY'14 GAA	FY'14 Spending	FY'15 GAA	FY'15 Post 9C	FY'16 Governor	FY'16 HWM	FY'16 Final House
Post-natal care for substance-exposed newborns (1599-1450)	--	--	--	--	--	--	--	\$600,000

1599-1450 Substance-Exposed Newborn Post-Natal Care. This Health Policy Commission-administered reserve would develop a pilot to “implement a fully integrated model of post-natal supports for families with substance exposed newborns, integrating obstetrics and gynecology, pediatrics, behavioral health, social work, early intervention, and social service providers to provide full family care” in up to three regional sites. Consultation with the Departments of Children & Families and Public Health would be required. Of the funds, \$100,000 would need to be expended to develop a technical assistance program to expand the ability of primary care providers, including those seeking to become patient-centered medical homes, to prescribe Narcan to prevent deaths by opioid overdose. Providers receiving assistance may receive a Narcan supply. The HPC would be required to report on the pilot within 12 months of completion.

Behavioral Health Triage Pilot - Quincy

Line item/program	Final FY'13 – Post 9C	FY'14 GAA	FY'14 Spending	FY'15 GAA	FY'15 Post 9C	FY'16 Governor	FY'16 HWM	FY'16 Final House
Behavioral Health Triage (1599-2004)	--	--	--	--	--	--	--	\$500,000

1599-2004 Behavioral Health Triage Pilot in Quincy. This Health Policy Commission-administered reserve would be used to develop and implement “a model of field triage of behavioral health patients under medical control by specially-trained emergency medical services providers, care for appropriate patients at home by such providers in coordination with behavioral health care providers, and transport of appropriate, non-medically complex patients to a behavioral health site of care for most effective treatment rather than to an acute hospital emergency department” The pilot would be required to consider evidence-based practices and must be targeted toward triaging clients in the Quincy area in reflection of the impact of the recent community hospital closure. The HPC would be required to report on the pilot within 12 months of completion.



ABH Preliminary Analysis of the Final House FY 2016 Budget

April 30, 2015

Chapter 257 Rate Reserve

Line item/program	Final FY'13 – Post 9C	FY'14 GAA	FY'14 Spending	FY'15 GAA	FY'15 Post 9C	FY'16 Governor	FY'16 HWM	FY'16 Final House
Chapter 257 Rate Reserve (1599-6903)	\$0	\$0	\$0	\$15,013,791	\$15,013,791	\$30,000,000	\$30,000,000	\$30,000,000

1599-6903 Chapter 247 Rate Reserve. This line item is for the fiscal year 2016 costs of Chapter 257 of the Acts of 2008 rate implementation, including, but not limited to, costs associated with any court order or settlement between providers of services and the commonwealth related to the rate implementation process

Human Services Salary Reserve

Line item/program	Final FY'13 – Post 9C	FY'14 GAA	FY'14 Spending	FY'15 GAA	FY'15 Post 9C	FY'16 Governor	FY'16 HWM	FY'16 Final House
Human Services Salary Reserve	\$20,000,000 (annualized)	\$11,500,000*	\$11,500,000	\$8,000,000	\$8,000,000	\$0	\$0	\$0

1599-6901 Human Services Salary Reserve. The final House budget does not fund the salary reserve.



ABH Preliminary Analysis of the Final House FY 2016 Budget

April 30, 2015

Other Line Items of Interest

Line item/program	Final FY'13 – Post 9C	FY'14 GAA	FY'14 Spending	FY'15 GAA	FY'15 Post 9C	FY'16 Governor	FY'16 HWM	FY'16 Final House
3000-6075 Early Childhood Mental Health	\$750,000	\$750,000	\$750,000	\$750,000	\$750,000	\$750,000	\$750,000	\$750,000
4512-0103 DPH HIV/AIDS Program	\$32,101,023	\$32,108,793	\$32,275,996	\$32,229,847	\$32,229,848	\$29,911,301	\$31,923,620	\$32,193,620
4512-0106 DPH HIV/AIDS Drug Assistance Program	\$7,500,000	\$7,500,000	\$7,500,000	\$7,500,000	\$7,500,000	\$7,500,000	\$7,500,000	\$7,500,000
4512-0225 DPH Compulsive Gamblers	\$1,270,000	\$1,500,000	\$1,500,000	\$1,500,000	\$1,500,000	\$1,500,000	\$1,500,000	\$1,500,000
4513-1026 DPH Statewide Suicide Prevention	\$3,839,455	\$3,863,305	\$3,863,305	\$4,000,000	\$3,855,239	\$3,953,741	\$4,000,000	\$4,350,000
7004-9033 DHCD Rental Subsidies for DMH	\$4,000,000	\$4,125,000	\$4,150,000	\$5,125,000	\$5,048,125	\$5,048,125	\$5,048,125	\$5,048,125
7010-0060 New grants for BH counselors in schools	N/A	N/A	N/A	\$5,000,000	\$0	\$0	\$0	\$0



ASSOCIATION
FOR BEHAVIORAL
HEALTHCARE

ABH Preliminary Analysis of the Final House FY 2016 Budget

April 30, 2015

Outside Sections

SECTION 7. Center for Health Information & Analysis. This section relocates the Center for Health information and Analysis (CHIA) to the Executive Office of Health and Human Services. It is currently an independent state agency.

SECTION 37. Board of Registration of Pharmacy and Narcan. This section requires the Board of Registration of Pharmacy to promulgate regulations relative to Narcan. Pharmacies in areas with high incidents of opiate overdoses shall be required to carry at all-time a supply of this medication.

SECTION 38A. Mobile Integrated Health Care. This outside section, added by amendment, would require DPH to shall establish a program of mobile integrated health care (MIH) within its bureau of health care safety and quality. The program would be subject to appropriation. “Mobile integrated health care” is defined as “a health care program that utilizes mobile resources to deliver care and services to patients in an out-of-hospital environment in coordination with health care facilities or other health care providers. Such medical care and services include, but are not limited to, community paramedic provider services, chronic disease management, behavioral health, preventative care, post-discharge follow-up visits, or transport or referral to facilities other than hospital emergency departments.” The program would have a wide range of duties including planning and regulating the unified MIH program, establishing minimum standards, including consideration of relevant national accreditation standards; developing a statewide MIH plan; and ensuring data collection by providers. Minimum standards would include pre- and post-hospital care coordination; addressing gaps in service delivery; provider partnerships; clinical standards adherence; MIH-trained paramedics and other providers; and “access to qualified medical control and medical direction.” Every MIS program would be required to have access to secure and effective medical communication subsystem linkage for on-line medical direction and ensure activation of the 911 system in the event that a patient of an MIH program experiences a medical emergency, as determined through medical direction, in the course of an MIH visit provided such activation is in the best interest of patient safety. There would a 17-member MIH advisory board. There is no designated behavioral health representation on the Board.

SECTION 40. Chapter 258 Technical Correction & Vivitrol at CSS level of care. This section amends the addiction treatment law that passed last year to remove prior authorization for substance abuse treatment for all MassHealth plans. The language mirrors language that had already been included for the GIC and commercial insurance.

The section also requires MassHealth and its contracted insurers, health plans, behavioral health management firms and third-party administrators to provide coverage for all medication assisted treatment and establish codes and rates for providers of licensed clinical stabilization services.

SECTION 52. Commonwealth Care Trust Fund Spending. This section codifies the ability of the Commonwealth Care Trust Fund to spend in anticipation of revenues.



ASSOCIATION
FOR BEHAVIORAL
HEALTHCARE

ABH Preliminary Analysis of the Final House FY 2016 Budget

April 30, 2015

SECTION 58. Inspector General's Health Care Audits. This section authorizes the Inspector General's Office to conduct audits of the Health Safety Net and the Medicaid program, at a cost of \$1 M for fiscal year 2016. As in past years, this cost will be borne by the Health Safety Net Trust Fund.

SECTION 66B. Distressed Hospital Trust Fund Transfers. This section would require the Health Policy Commission to transfer \$8.2 million from the Distressed Hospital Trust Fund to the Delivery System Transformation Initiatives Trust Fund for delivery system transformation initiative master plan and hospital-specific plans approved in the MassHealth section 1115 demonstration for state or federal fiscal year 2015.

Another transfer to \$17,153,885 to the Acute Care Hospital Fund would be required. Of those funds, \$6.1 million would be provided for supplemental payments to inpatient and outpatient behavioral and mental health services, prioritizing children and adolescent services, delivered by certain acute care hospitals.

SECTION 66D. Prospective Payment Pilot with Risk-Bearing Provider Organizations. This section would direct MassHealth to establish a prospective, global payment pilot program through contracted, risk-bearing provider organizations for the provision and coordination of health care services for attributed members by September 1, 2016. Risk-bearing provider organizations would be required to deliver coordinated care through its network of primary care providers. The language specified that "such providers shall have experience and demonstrated capabilities to provide behavioral health services including psychiatric and substance abuse beds." The risk-bearing provider organizations would be reimbursed on a prospective monthly basis, and must first be certified by the Division of Insurance under its authority.

SECTION 68A. DCF Social Worker Privacy. This section would change current procedure to limit the disclosure of DCF social worker home addresses and phone numbers in court proceedings.

SECTION 70. Vivitrol Pilot Program. This section creates a Vivitrol pilot program focused on individuals suffering from opiate or alcohol addiction. Pilot locations may prescribe and administer to a patient prior to discharge from a participating clinical stabilization services program and before transitioning to the community.

SECTION 73A. Naloxone Bulk Purchasing Study. This section would require DPH to study the feasibility of establishing a system for the bulk purchasing and distribution of naloxone to all cities and towns in the Commonwealth.

SECTION 73B. Institutional Pharmacy Discharge Pilot. This section would direct DPH to implement a two-year institutional pharmacy discharge medication pilot program for the purposes of ensuring patient medication adherence. The pilot would allow institutional pharmacies to be treated like retail pharmacies for the purposes of providing medication to a patient at the time of discharge; and allow hospitals and hospital pharmacists that hold a current license to practice pharmacy in the commonwealth to provide a 14-day supply of medication to a patient at the time of discharge and to perform medication review, reconciliation and counseling.



ASSOCIATION
FOR BEHAVIORAL
HEALTHCARE

ABH Preliminary Analysis of the Final House FY 2016 Budget

April 30, 2015

SECTION 73C. Abuse Deterrent Drugs. This section would amend Chapter 258 of the Acts of 2014 to deem any drug product approved by the US Food and Drug Administration for abuse-deterrent labeling as an interchangeable abuse deterrent drug product until the Massachusetts drug formulary commission issues its first draft of its formulary of abuse deterrent drugs.