



**REMARKS OF PHILLIP A. SAPERIA  
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THE COALITION OF BEHAVIORAL HEALTH AGENCIES**

**PRELIMINARY BUDGET HEARING - MENTAL HEALTH, DEVELOPMENTAL  
DISABILITY, ALCOHOLISM, DRUG ABUSE AND DISABILITY SERVICES  
March 13, 2015**

Good Afternoon, Chairman Cohen and members of the NYC Council Committee on Mental Health, Developmental Disabilities, Alcoholism, Substance Abuse and Disability Services. I am Phillip A. Saperia, Chief Executive Officer of the The Coalition of Behavioral Health Agencies ("The Coalition"). I am joined by my colleagues, Patricia Gallo Goldstein, The Coalition's Chief Operating Officer and Jamin Sewell, our Counsel & Managing Director for Policy and Advocacy.

The Coalition is the umbrella advocacy organization of New York's behavioral health community, representing over 130 non-profit community-based behavioral health and substance abuse agencies that serve more than 350,000 clients/consumers throughout NYC and surrounding counties. Our member agencies are on the ground, front-line safety net providers. The vast majority of the individuals served are on Medicaid. We treat some of the most needy clients, including those with dual diagnoses of mental health and substance abuse problems. Our providers serve the homeless and the formerly incarcerated as well as victims of trauma and abuse. They serve people of all ages and every racial, cultural and ethnic background. The agencies we represent are in every Council District and neighborhood in the city.

On behalf of The Coalition of Behavioral Health Agencies, I thank you for the opportunity to submit testimony on the Mayor's Fiscal Year ("FY) 2016 Preliminary Budget proposal.

First of all, The Coalition is extremely pleased and proud that the Mental Health Services for Court-Involved Youth and Families Initiative, championed by Council Member Debbi Rose, was adopted by the Council in the current year's budget. We are also want to thank Chair Cohen for his success in expanding the Children Under 5 Mental Health Initiative by \$200,000.

Frequently, the Council provides funding to help fill gaps in the public behavioral health system. City Council funded initiatives are used to meet a wide range of mental health and substance use needs for New Yorkers who are currently underserved. However,

since FY '15, programs like the Children Under Five Mental Health Initiative, the Geriatric Mental Health Initiative, and Mental Health Contracts were baselined. Unfortunately, the Alcoholism/Substance Abuse Voluntary Sector program, which served hard to reach individuals throughout the City with chronic substance use issues, was entirely eliminated in FY '09.

### **Mental Health Contracts**

As I mentioned above, the Council Mental Health Contracts initiative was baselined by the Mayor for FY '15. A modest amount of funds from this initiative have been used by **The Coalition's Professional Learning Center** and the remaining dollars by 5 distinct provider agencies serving all five boroughs. It is through the City Council's support over the last 16 years that The Coalition is able to provide critical education, technical assistance and training—unique learning opportunities—for staff and leadership of publicly funded behavioral health agencies. These learning experiences are available to local providers in every New York City community on pivotal issues related to organizational development, best practices, system transformation and regulatory issues that financially impact nonprofit community-based programs. They are not offered by government agencies or other sources.

With the behavioral health system transitioning to managed and integrated care, community-based providers are relying more heavily on The Coalition for guidance and training. Through our Professional Learning Center, we empower the City's nonprofit providers to navigate and, hopefully, to survive an uncertain world filled with mandated reforms. We have assisted agencies to understand the role and impact of managed care in its various formations (the Fully Integrated Duals Advantage (FIDA) program, Health and Recovery Programs (HARPs), and Managed Long Term (MLT)) as well as the implementation of Health Home networks to coordinate health and behavioral health care to individuals with serious mental health, substance use and comorbid health issues. Health Homes, several organized and led by our community based providers, serve high need individuals who require complex care coordination to better access their care and integrate their services. As Medicaid transformations unfold, several other changes are occurring through mandated requirements under the Affordable Care Act and, to an even greater extent, State driven Medicaid redesign. This year alone, The Coalition will have conducted 100 workshops for more than 2,000 mental health and substance use clinicians, peer advocates, support staff and administrators in over 100 agencies on these crucial issues and more.

At first blush, the “baselining” of this and other Council initiatives might appear to be a positive development. Unfortunately, we have learned that the Department of Health and Mental Hygiene (“DOHMH” or the Department”) will be tendering these funds, in the case of The Coalition's grant, \$85,000, through an RFP process. We modestly believe that there is no other institution with the knowledge and experience to provide this technical assistance and guidance to community based behavioral health providers in New York City.

Mental Health Contracts not only funds The Coalition's Professional Learning Center, but also supports the functioning of a transitional shelter for homeless women with mental illness run by the Center for Urban and Community Services (CUCS). Through the Mental Health Contracts initiative, the City Council has made it possible for the Child Center of New York to provide mental health and substance use outreach to Asian immigrants who typically do not seek treatment due to the cultural stigma associated with receiving behavioral health services. Additionally, the City Council, through this initiative sustains a senior health and consultation center which offers affordable primary care and mental health services operated by Greenwich House. This helps seniors to cope with and adjust to the major life changes that come with aging.

If the Department maintains this course, we request that the City Council restore the entire amount of its original Mental Health initiative at \$390,000.

### **Children Under Five Mental Health Initiative**

Through the Children Under Five Mental Health Initiative, the City Council enables 8 diverse agencies in all 5 boroughs of New York City to serve a cohort of children who exhibit behavioral difficulties because they have experienced or been exposed to traumas like domestic violence and abuse. The City Council was the only entity that funded these programs. This initiative helps to fund clinicians who are proficient in the interventions that work well with young children who may not yet be able to verbalize their experiences. They utilize trauma informed interventions to deliver innovative evidence-based and cutting-edge treatment modalities, including art, dance and movement therapy. Providers offer relationship-based assessments, interventions, treatment, referrals, as well as workshops for parents and grandparents on caring for children with emotional difficulties. These programs also offer an array of linkages for children and their families to access pediatricians, preschool teachers and child welfare workers.

Because of help from the City Council, thousands of children between the ages of 0 and 5 have received services, potentially transforming the outcomes of their lives. The need for this initiative grows greater each year as more children are removed from nursery school and kindergarten classes due to behavioral problems. Identifying and evaluating children who may be exhibiting social and behavioral problems during the first few years of their life will prevent serious problems in adulthood. Left untreated, children's mental health issues will likely worsen and bring larger costs later on, both financially and in terms of life outcomes.

Again, like the Mental Health Contracts Initiative, the Children Under 5 Mental Health Initiative has been baselined at \$1.25 million. Because of the strong advocacy of Chair Cohen, the Council enhanced the funding in FY '15 by \$200,000. The Department agreed to continue funding the same agencies at the FY' 14 level only though this current year.

We learned earlier this year of the Department's intentions with regard to the Children Under 5 funds in a "Concept Paper" released in the early Fall of last year. The Coalition

expressed its concerns with the proposed direction of the Department's proposal in a letter dated, October 16, 2015. (Attached.) Our specific concerns with the Department's proposal are the following:

1. Reducing the number of agencies funded from 8 to 5 will limit the geographic scope and the ability to target communities with culturally competent services;
2. It will potentially limit the scope of services provided; and
3. It ignores one of the primary successes of the Children Under Five Initiative—the ability to demonstrate the effectiveness of trauma-informed care when working with young children.

If the Department does not build on and continue the 10 years of success associated with the Council's vision, we will call upon you to restore this initiative.

### **Geriatric Mental Health Initiative**

From FY' 06 through FY '14 the Council supported the Geriatric Mental Health Initiative. Originally funded at \$1.2 million, the initiative is currently funded at \$2 million and is allocated to 25 community-based agencies (in all five boroughs of New York City) to provide specialized services to seniors dealing with behavioral health issues. These programs are run in places where older adults receive other services, in settings where they feel more comfortable, such as senior centers, religious and social group settings, primary health healthcare provider locations or in their own homes for Seniors who are homebound. The range of services offered includes outreach, education, depression and substance use screening, assessment, individual and group counseling, referral to treatment, as well as support for family caregivers. Through this initiative, older adults receive help with depression, anxiety, isolation, bereavement and any other circumstance that can occur as one ages, often accompanied by loss of family and social networks.

The need for this initiative has increased substantially. Offsite visits to homebound elderly with mental illness are no longer covered by Medicaid. In addition, travel throughout the City can be burdensome or even impossible for many elderly adults. These special initiative dollars help to fill the gap and make mental health assistance possible for them. Each year, the population of older adults in New York City grows along with the number of older adults with symptoms of mental illness.

As with the other Council baselined mental health initiatives, the Department has indicated that it will release an RFP for these services. In its pre-RFP "Concept Paper", the Department is proposing to cut the number of agencies funded from 25 to 8, as well as reducing the scope of services provided. Of particular concern is the failure to mention home bound services which had a strong focus in the Council initiative. (See, the Coalition's response, attached.)

Again with ten productive and successful years of providing services, the Department should not alter the Council's intent and change the focus and providers of this initiative.

One would assume that the Administration baselined these initiatives because they approved of the models and the services that the agencies were provided. What is being proposed in the Department's concept papers is nearly a complete departure from what the Council intended. We call upon the Council for a restoration of all of these vital services.

### **Mental Health Services for Court-Involved Youth and Families Initiative**

The Coalition of Behavioral Health Agencies strongly supports the restoration of the Council Member Rose sponsored initiative of \$1 million which has expanded the capacity of community-based providers to meet the mental health needs of youth involved with the criminal justice and foster care systems and their families. The funding has been allocated to nine service providers--Astor Services for Children & Families, Catholic Charities Neighborhood Services, Center for Alternative Sentencing and Employment Services (CASES), The Children's Aid Society, The Fortune Society, Jewish Child Care Association of New York, Safe Horizon, SCO Family of Services, Staten Island Mental Health Society—and to The Coalition which has developed a training series tailored to the needs of behavioral providers who work with court-involved youth.

Although, the initiative is in its first year, it has already touched the lives of more than a hundred young people and their families. The Coalition will provide specific numbers of youth screened, assessed and treated, as we near the end of the fiscal year. We believe that if the initiative is restored, we will begin to see even more impact in the coming fiscal year and hope you will continue this valuable project.

### **Building Capacity of Community-Based Substance Abuse Treatment Agencies to Meet the Needs of Changing Addiction Trends**

As I mentioned earlier, the City Council has not had a funding initiative targeting substance abuse since FY '09 and all funding for substance abuse disorder was eliminated in FY'12.

The Coalition strongly supports Council Member Daniel Dromm's \$1.5 million budget initiative to expand the capacity of community-based providers to meet the needs arising from changing addiction trends.

According to the National Institute on Drug Abuse (NIDA), New York City continues to have a problem with drug abuse. The abuse of heroin and other prescription opiates has continued to grow, while cocaine and marijuana use have remained flat but at problematically high levels.<sup>1</sup>

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<sup>1</sup> (NIDA, Drug Abuse Patterns and Trends in New York City—Update: January 2014, <http://www.drugabuse.gov/about-nida/organization/workgroups-interest-groups-consortia/community-epidemiology-work-group-cewg/meeting-reports/highlights-summaries-january-2014/new>).

To address the profound social problem of substance use disorder, a funding initiative should be focused on the following areas:

1. Implementing effective evidence-based assessment and treatment tools;
2. Providing culturally-appropriate services to the areas of the City most in need; and
3. Ensuring that the needs of the community are being met by providing continuing education units to social workers, credentialed alcoholism and substance use providers (CASACs) and other professionals in the targeted areas hit the hardest by substance abuse, so that there are sufficient numbers of mental health and substance use professionals available.

By providing better access to effective culturally-appropriate, community-based substance abuse disorder services, New York City can save funds spent on incarceration and costly in-patient stays. Equally as important, it will lead to a better quality of life for those served as well as the communities in which they live.

This initiative would allow the Council to renew its support for these needed much-needed services.

## **CONCLUSION**

On behalf of the over 130 agencies that we represent throughout New York City and beyond, The Coalition respectfully urges the Council to help ensure that the safety net provided by the community-based behavioral health sector is not only maintained, but made stronger, and more effective. Because you represent the neighborhoods and communities of this City, you know best the needs of your constituents. Our community based providers are best situated to meet those needs, as reflected by your funding of those initiatives.

We think that the NYC Department of Health and Mental Hygiene should honor The City Council's intentions and fund these baselined initiatives in substance and process, as you have designed them and as they successfully have operated over the years. We hope you will remind the Department of your aims and hold them to the standards you have set.

Thank you again for the allowing me to testify before you today.