



Testimony of

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At the Hearing on the  
Mayor's Fiscal 2009 Preliminary Budget

The Committee on Mental Health, Mental Retardation,  
Alcoholism, Drug Abuse and Disability Services

Hon. G. Oliver Koppell, Chair

The Committee on Finance

Hon. David Weprin, Chair

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## **INTRODUCTION**

Chairman Koppell, Chairman Weprin, distinguished members of the Committees, thank you for affording us the opportunity to testify before you today on the Mayor's Fiscal 2009 Preliminary Budget. My name is Phillip Saperia, and I am the Executive Director of the Coalition of Behavioral Health Agencies, the umbrella advocacy organization of New York's behavioral health community, representing over 100 non-profit community-based mental health and substance abuse agencies in every locality of New York City and surrounding areas. Our members comprise a broad cross section of service providers – all sizes from very small to very large; treatment and rehabilitation-oriented; outpatient and residential; focused on linguistically and culturally specific populations and on many special-needs – serving more than 350,000 individuals each day in the five boroughs of New York City and its environs.

## **RESTORATIONS**

Each year, the Council is put in the position of having to restore critical funding to a range of community-based behavioral health programs throughout the city. The budget process, which in most cases allocates a single year's worth of funding, necessitates the annual testimony of our membership before this committee. We look forward to the day when these vital mental hygiene programs are included in the Mayor's budget and are no longer left vulnerable to cuts each Spring.

Today you will hear from a number of our providers who will testify about why their programs deserve continued support from the Council. Each of these programs

delivers vital care to New Yorkers living with psychiatric and/or addictive disorders, as well as those with developmental disabilities. They deliver care in a variety of settings – transitional living communities, clubhouses, soup kitchens, clinical settings – to children, adolescents, adults and the aged from every ethnic background and in every neighborhood.

These providers, whose programs will close at the end of June unless the Council restores their funding, are the backbone of New York City’s community behavioral health sector. They offer critical services, treatment and housing to people in need throughout the five boroughs, and they do it expertly. They transform the lives of literally thousands of New Yorkers each year, and we as a city are better for their efforts. We ask you to continue your long-standing support for their work.

### **COALITION’S PROFESSIONAL LEARNING CENTER**

For the past ten years, the Council has allocated funding to the Coalition for our Professional Learning Center. This funding allows the Coalition to provide “hands-on” technical assistance and training to community mental health agencies on issues that have direct financial and regulatory consequences to them and, consequently, to the people they serve. This is the education and training that keeps agencies current and functioning as they continue to operate in new and ever-changing regulatory, funding and legal environments. We are grateful to the Council for this allocation, and for its yearly restoration of the Professional Learning Center’s funding to the budget each spring.

Over this past year, The Coalition offered training to providers on how to comply with a myriad of complex Medicaid rules in order to get reimbursed for the services they deliver. Approximately 70% of the children, teens and adults served by our member agencies are Medicaid eligible. Even the most capable agencies can lose 10% of Medicaid billings to miscoding or incomplete record keeping – others have rejection rates as high as 15%, resulting in lost dollars for program services. Agencies that rely on Medicaid reimbursement must be able to “audit proof” their work through proper record keeping and high quality billing systems. When done right, billing and documentation can stave off unnecessary losses, ensure a more reliable income stream, and rescue much needed dollars for the system – dollars that ultimately benefit behavioral health consumers.

Through our training series, agencies learned how to protect themselves and their clients in circumstances of potential conflict by complying with state and federal guidelines. The training also focused on documentation and coding. It reviewed a range of acceptable methods of medical record documentation, including guidelines, added state-specific requirements and what providers can do in circumstances where there is little guidance from either the state or federal government. We offered training on producing audit-proof case notes and records; how to bill for group treatment; how to comply with new Medicaid restrictions included in the Deficit Reduction Act; and how to determine medical necessity in the delivery of care to individuals with serious and persistent mental illnesses.

In the year ahead, The Coalition will provide training to agencies, most of whose staff is neither bi-lingual nor bi-cultural, which are seeking to deliver services that are responsive to the needs of New York's diverse racial and ethnic communities. The training will teach the current workforce how to examine how the cultures of racial and ethnic minorities influence aspects of mental illness. These include how patients communicate and manifest their symptoms, their coping styles, family and community supports, and styles or receptivity to seeking treatment. Panels of outside experts will present information on prevalence, cultural attitudes, and information on specific diagnostic categories, e.g. bi-polar disorder, schizophrenia, depression, and elderly mental health, as they relate to racial and ethnic minorities.

The Coalition will also plan to convene a group of stakeholders from the State and the City as well as from the private sector to discuss how best to address gaps in the systems of care for New Yorkers with psychiatric disabilities. The transfer from inpatient to outpatient care is not always a smooth one for consumers, and with each transition there arises the opportunity for a disruption in critically needed care, with sometimes tragic results. The Coalition's efforts will hopefully result in more enhanced care to individuals at risk of falling into acute psychiatric distress.

So that we may continue to help mental health and substance abuse providers provide effective and empowering care to New Yorkers in need, we are asking the Council to restore \$100,000 to the Coalition's Professional Learning Center. Over the years, the Council has recognized the value of the Coalition's Professional Learning

Center, and we are counting on your support once again in the upcoming budget negotiations.

### **COUNCIL INITIATIVES**

In the last three years, the Council has funded a number of initiatives designed to address shortcomings in the existing behavioral health system: the special needs of children under five who exhibit signs of mental illness, and the unique needs of older New Yorkers in need of psychiatric assistance. We ask the Council to restore these initiatives in Fiscal 2008.

Last year, the Council allocated just under \$2.7 million to fund a Geriatric Mental Health Services initiative to address the unique and growing needs of older New Yorkers who are in need of mental health care. Some of are individuals who develop symptoms such as depression or dementia as they age; others are New Yorkers living with psychiatric disabilities who simply grow older and need specialized services.

Fortunately, there are a number of providers in neighborhoods across the city with extensive experience in providing geriatric mental health care, and who are benefitting from the Council's initiative. They provide counseling to seniors and their families, including bereavement counseling; clinical and therapeutic visits by social workers, psychiatrists and nurse practitioners to homebound seniors living with mental illness; on-site clinic services co-located at senior centers; and outreach to the geriatric population to engage seniors in mental health treatment and services. By restoring this

initiative, we can be certain that the Council's intent for this initiative will continue to be realized. We ask this committee and the full Council for its support.

We also support the restoration of the City Council's Children Under Five Initiative to \$1.6 million for Fiscal 2009. This initiative has been of immeasurable help in providing critical and timely assistance to youngsters exhibiting behavioral and physical health problems such as depression, anxiety and aggressive behavior towards other children. To the extent that these and other symptoms can be addressed at an early age, we can help prevent the need for more costly treatment in later years. The Coalition joins our colleagues at Safe Space, University Settlement, the Jewish Board of Family and Children Services, and the Albert Einstein College of Medicine in strongly supporting the restoration of this initiative.

## **SUMMARY**

Chairman Koppell, Chairman Weprin, members of the Committees, we ask the Council to once again champion our compelling issues during the upcoming budget negotiations. On behalf of the over 115 agencies that we represent throughout New York City and its environs, the Coalition respectfully urges this Committee and this Council to:

- Restore all of the mental hygiene cuts to providers that were left unprotected by the Mayor's Fiscal 2008 Preliminary Budget;

- Restore the Coalition’s funding for our Professional Learning Center to (1) to enhance the cultural competency of our current workforce who offer care to a diverse population within our five boroughs, and (2) work with stakeholders in the public and private sector to bridge gaps in care for New Yorkers transitioning from inpatient to outpatient care.
- Restore \$2.7 million for the Geriatric Mental Health Services Initiative to allow providers to continue to offer services to aged New Yorkers throughout the city living with psychiatric disabilities.
- Restore \$1.6 million to the Children Under Five Initiative to allow providers to identify and address symptoms in youngsters before they worsen in later years.

Thank you for your time today, and we are available to answer any questions you may have.