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May 6, 2022

The Honorable Karen E. Spilka, President
Massachusetts Senate
State House, Room 332
Boston, MA 02133

The Honorable Michael Rodrigues, Chair
Senate Committee on Ways and Means
State House, Room 212
Boston, MA 02133

The Honorable Cindy Friedman, Vice Chair
Senate Committee on Ways and Means
State House, Room 208
Boston, MA 02133

Dear President Spilka, Chair Rodrigues, Vice Chair Friedman, and Honorable Members of the Senate Committee on Ways and Means:

Re: Behavioral Health Priorities in the FY23 State Budget

On behalf of the Massachusetts Association for Mental Health (MAMH), thank you for your continued commitment to the health and well-being of people with behavioral health conditions and their families. As you well know, we are experiencing a behavioral health pandemic in the wake of the COVID-19 viral pandemic. The impetus to invest in promotion and prevention initiatives, access to evidence-based treatment, and recovery supports is greater than ever. I write to provide our FY23 budget priorities, and their intersection with the Governor's H2 Budget and the House Budget, H.4701. I also write to indicate support for certain outside sections of the H2 budget.

EXECUTIVE SUMMARY

MAMH requests new or increased funding with respect to the following line items:

- DMH 5046-2000 Statewide Homelessness Support Services – MAMH requests a \$2.5M increase over H2 and H.4701 for the Safe Haven program, for a total of \$27.116M for this line item in FY23.
- DMH 5042-5000 Child and Adolescent Mental Health Services – MAMH requests \$450K to create the Massachusetts Child Psychiatry Access Project (MCPAP) for consultation on behavioral health and developmental needs of children and families in Foster Care. Funding for MCPAP for Foster Care was not in H2 or H.4701.
- EOHHS 4000-0300 EOHHS and MassHealth Operations – MAMH requests level-funding of the FY22 GAA of \$550K to manage Network of Care Massachusetts. H.4701 includes this funding.

- EOHHS 1599-6903 Chapter 257 and Human Service Reserve – MAMH requests a \$351.6M increase over H2 and H.4701 to ensure behavioral health workforce compensation is competitive now and sustainable in the long-term, for a total of \$581.6M for this line item in FY23.
- EOHHS 4000-0052 Inpatient Behavioral Health Beds – MAMH requests \$10M over H2 and H.7401 for this line item to support intensive community-based services to address the Emergency Department (ED) boarding crisis. The line item was created in the FY21 GAA with \$10M and now needs additional funding.
- DPH 4512-0200 Bureau of Substance Abuse Services – MAMH requests \$211.659M for this line item for FY23 to support a range of substance use treatment, housing, and workforce development services.
- DCF 4800-0200 DCF Family Resource Centers – MAMH requests a \$0.4M increase over the FY22 GAA for the Mental Health Advocacy Program for Kids (MHAP for Kids), bringing the total funding for MHAP for Kids to \$1.9M for FY23. H2 and H.4701 do not include this funding.
- Trial Court 0339-1011 Community-based Re-entry Programs – MAMH requests a \$1.61M increase over H2 for community-based residential reentry programs, for a total of \$11.25M for this line item in FY23. H.4701 includes this funding.
- EOEA 9110-1604 Supportive Senior Housing Program – MAMH requests a \$1.55M increase over H2 for Elder Supportive Housing Programs, for a total of \$7.936M for this line item in FY23. H.4701 includes this funding.
- EOEA 9110-1640 Geriatric Mental Health Services Programs – MAMH requests a \$1.3M increase over H2 for Elder Mental Health Outreach Teams (EMHOTs), for a total of \$2.5M for this line item in FY23. H.4701 includes this funding.
- DHCD 7004-0102 Homeless Individual Shelter – MAMH requests a \$16.745M increase over H2 for this line item. H.4701 includes this funding. MAMH supports the H2 language which states that funds in this line item may be used for housing first and rapid rehousing models, transitional housing, and diversion away from shelters.
- DHCD 7004-0104 Home and Healthy for Good – MAMH requests a \$2.5M increase over H2 for the Home and Healthy for Good permanent supportive housing program, for a total of \$6.38M for this line item for FY23. H.4701 includes this funding.
- DHCD 7004-0105 Sponsor-based Permanent Supportive Housing – MAMH requests a \$2.1M increase over H2 for housing units for individuals experiencing homelessness, which will mitigate overcrowding in shelters and, most importantly, house people in safe supported settings. H.4701 includes this funding.
- OCA 0930-0100 Office of the Child Advocate – MAMH requests a \$2.5M increase over the FY22 GAA for the operation of a state center on child wellness and trauma, bringing the total funding for the state center on child wellness and trauma to \$3.5M for FY23. H2 does not include funding for this center; H.4701 includes this funding in a new line item, OCA 0930-0101.

MAMH supports the funding in the Governor’s FY23 H2 Budget for these projects and requests specific language be added to clarify that these dollars be expended for these purposes:

- DMH 5046-0000 Adult Mental Health and Support Services – MAMH requests line item language that reads “... provided further, that not less than \$9,000,000 shall be expended on the jail diversion program.”
- DMH 5046-2000 Statewide Homelessness Support Services – MAMH requests line item language that reads “... provided further, that not less than \$425,000 shall be expended for program staffing support in the city of Boston for existing safe haven housing for women who are homeless and have mental health conditions.”

MAMH supports the Governor’s FY23 H2 Budget with respect to these line items:

- EOHHS 4000-0300 EOHHS and MassHealth Operations – MAMH supports the \$1M in H2 for the Middlesex County Restoration Center to divert adults with behavioral health conditions from arrest/jail or ED Boarding. Note that the Restoration Center procurement is now underway through EOHHS and Commonwealth Medicine. H.4701 does not include this funding.
- DMH 5042-5000 Child and Adolescent Mental Health Services – MAMH supports the \$6M in H2 for an Emergency Department (ED) Diversion Program serving youth.
- DMH 5046-0000 Adult Mental Health and Support Services – MAMH supports the \$4M in H2 for an adult Emergency Department Diversion Program.
- DPH 4513-2020 Behavioral Health Outreach, Access and Support Trust Fund – MAMH supports the \$12.534M in H2 and H.4701 for loan forgiveness and other special behavioral health initiatives.
- DHCD 7004-0202 Homeless Individuals Rapid Rehousing – MAMH supports the \$5M in H2 and H.4701 for the rapid transition of homeless individuals into sustainable permanent housing.
- DHCD 7004-9033 Department of Mental Health Rental Subsidy Program – MAMH supports the \$12.548M in H2 and H. 4701 for the Department of Mental Health program that provides rental assistance.
- Outside Sections – MAMH supports Section 18 Substance Use Disorder Federal Reinvestment Trust Fund; Section 21 Behavioral Health Access and Crisis Intervention Trust Fund and Population Health Investment Trust Fund; and Section 59 Behavioral Health Payor Surcharge.

MAMH does not support funding in these line items:

- Secretary of Administration and Finance 1599-1214 – MAMH opposes the inclusion in H2 of \$14M in this line item for the expansion and enhancements to new and existing Section 35 programs in Department of Correction (DOC) or county carceral facilities. NOTE: MAMH supports expansion of Section 35 programs only in clinical, and not carceral, settings.
- Hampden Sheriff’s Office 8910-0104 – MAMH opposes the inclusion in H2 and H.4701 of \$2.536M for the operations of a regional Section 35 program in western Massachusetts. NOTE: MAMH supports expansion of Section 35 programs only in clinical, and not carceral, settings.

MAMH BUDGET PRIORITIES

Department of Mental Health (DMH)

DMH 5042-5000 Child and Adolescent Mental Health Services

Youth Emergency Department Diversion Program

MAMH supports the \$6M in H2 for a youth Emergency Department (ED) Diversion Program. designed to mitigate ED boarding and to stabilize patients in crisis. (EOHHS transfers these funds to DMH.)

- Through its ED Diversion Program, DMH, in conjunction with hospital and community providers, moves individuals experiencing behavioral health crises out of EDs and offers them alternative treatment in their own homes, regardless of health insurance coverage. As of late December 2021, ED diversion programs had provided services to over 130 youth and 270 adults. In addition to DMH funding, in February 2022, MassHealth will expand the intensive crisis intervention services and in-home therapy services. These programs will relieve longstanding challenges with ED boarding that have been exacerbated by the pandemic, while expediting behavioral health treatment for youth and support for their family.

Massachusetts Child Psychiatry Access Project (MCPAP)

As an Executive Member of the Children’s Mental Health Campaign, MAMH requests \$450K to create the Massachusetts Child Psychiatry Access Project (MCPAP) for consultation on behavioral health and developmental needs of children and families in Foster Care. Funding for MCPAP for Foster Care was not in H2 or H.4701. MCPAP was funded at \$3.875M in the FY22 GAA. A \$450K would create a MCPAP for Foster Care to provide enhanced care for Department of Children and Families (DCF) involved youth.

- MCPAP for Foster Care is a trauma-informed behavioral health consultation service for Department of Children and Families (DCF) involved youth. A trained psychiatrist would provide consultation to a child’s pediatrician, including support with diagnosis and assessment. MCPAP for Foster Care would also provide bridging services, such as medication management and trauma stabilization therapy (up to six sessions). Finally, the model includes linkages to community-based services such as trauma coaching for foster parents, community psychiatry services, and trauma-informed therapy.

DMH 5046-0000 Adult Mental Health and Support Services

Adult Emergency Department Diversion Program

MAMH supports the \$4M in H2 for an adult Emergency Department Diversion Program, described above. (EOHHS transfers these funds to DMH.)

Massachusetts Jail/Arrest Diversion Initiative

MAMH understands that there is \$9M included in H2 in line item 5046-0000 for the Massachusetts Jail/Arrest Diversion Initiative, a grant program operated by DMH. To clarify that these dollars be spent on this program, MAMH requests that language be added to this line item that reads, “... **provided further, that not less than \$9,000,000 shall be expended on the jail diversion program.**” This would not increase the dollar amount of this line item; rather, it would specify the dollar amount to be spent on jail diversion.

- Through the Massachusetts Jail/Arrest Diversion Initiative, DMH has been providing grants to local communities and behavioral health providers since 2007 to improve outcomes for individuals when they encounter police and other first responders during a behavioral health crisis. According to an April 2021 DMH report, in FY20 DMH expended \$3,915,661 on 61 grants ranging from \$7,500 to \$298,000.

DMH 5046-2000 Statewide Homelessness Support Services

Safe Haven Program Expansion

MAMH requests a \$2.5M increase over H2 and H.4701 for the Safe Haven program, for a total of \$27.116M for this line item in FY23. The Governor’s H2 amount of \$24.616M represents a \$453,000 increase over the FY22 GAA. This increase represents the annualization for three new Safe Haven programs which were created in FY22 in three DMH areas: one is in the Northeast (Haverhill), one in the Southeast (Hyannis) and one in western Massachusetts (Greenfield). These three Safe Haven programs represent an effort to improve geographic equity of this important resource.

To continue to address need, \$2.5M of additional funding is required over H2. Many areas of the state continue to

have a dire need for housing for people with behavioral health issues. A 7-person Safe Haven program costs about \$500,000 to operate per year. With the requested additional funding, DMH could open five new Safe Haven programs, one in each of its geographic areas. DMH Area Offices and local providers have already indicated the capacity and willingness to develop these new programs.

- Safe Haven programs are supervised and supportive housing for hard-to-reach, hard-to-engage individuals who are chronically unhoused with severe and often co-occurring mental health and substance use conditions. These individuals are among the highest users of EDs, hospital beds, and emergency medical services, and have high rates of trauma and criminal justice involvement. The program provides individuals with transitional housing, connects them to behavioral health and medical services, and ultimately serves as a bridge to permanent housing. It is a proven model that saves and transforms lives and reduces health care and other public health costs.

Pine Street Inn's New Chardon Street

MAMH understands that the Governor's H2 budget proposal also includes \$425K in DMH 5046-2000 for program staffing supports at Pine Street Inn's New Chardon Street location. These funds would be used to care for women who are chronically unhoused and have severe and disabling behavioral health conditions. MAMH urges that this funding for Pine Street New Chardon be explicitly named in the narrative for this account to clarify that these dollars be spent on this program. To that end, we strongly support the addition of the following language: ***"... provided further, that not less than \$425,000 shall be expended for program staffing support in the city of Boston for existing safe haven housing for women who are homeless and have mental health conditions."***

DMH 5095-0015 Inpatient Facilities and Community-Based Mental Health

Section 35 Unit at Taunton Hospital

MAMH also supports, as contained in this line item, the full-year cost of the new 75-bed Men's Recovery from Addictions Program (MRAP) for individuals civilly committed pursuant to G.L. c. 123, § 35 at Taunton Hospital, adding to the 45-bed women's program (WRAP) at Taunton Hospital, which opened in 2016.

Community-based Support for Section 35 rather than Funding Treatment in Carceral Settings

MAMH **does not support** the funding in these line items:

- Secretary of Administration and Finance 1599-1214 – MAMH opposes the inclusion in H2 of \$14M in this line item for the expansion and enhancements to new and existing section 35 programs in Department of Correction (DOC) or county carceral facilities. NOTE: MAMH supports expansion of Section 35 programs only in clinical, and not carceral, settings.
- Hampden Sheriff's Office 8910-0104 – MAMH opposes the inclusion in H2 and H.4701 of \$2.536M for the operations of a regional section 35 program in western Massachusetts. NOTE: MAMH supports expansion of Section 35 programs only in clinical, and not carceral, settings.

Similarly, MAMH **does not support** the Division of Capital Asset Management and Maintenance plan to spend \$36M for upgrades to the MASAC and Hampden County facilities that serve individuals confined pursuant to section 35.

Instead, MAMH urges that the funding intended to be spent for section 35 programs located in carceral settings be invested in community-based treatment services for people with serious substance use disorders. As the Section 35 Commission recommended, “The Commonwealth should expand development of low-threshold, treatment on demand models, including harm reduction interventions in community-based settings, immediate access to medication-assisted treatment (MAT) and expansion of bridge clinics, addiction consult services, outreach and engagement programs, post-overdose intervention programs, syringe services programs, and family intervention programs.”¹

Executive Office of Health and Human Services (EOHHS)

EOHHS 4000-0300 EOHHS and MassHealth Operations

Middlesex County Restoration Center

MAMH supports the \$1M in H2 for the Middlesex County Restoration Center to divert adults with behavioral health conditions from arrest/jail or ED Boarding. Note that the Restoration Center procurement is now underway through EOHHS and Commonwealth Medicine. H.4701 does not include this funding.

- The Center would help support ongoing law enforcement diversionary efforts across New England’s most populous county while also expanding the community capacity for behavioral health (mental health and substance use) treatment. The Center would serve as a model for future centers across the state. Restoration Centers also would expand the Commonwealth’s urgent care capacity for people with behavioral health conditions, which is the goal of EOHHS’s Roadmap for Behavioral Health Reform. The Roadmap establishes a front door through which individuals and families can access the range of comprehensive behavioral health services offered in the Commonwealth for community-based assessment and treatment.

Network of Care Massachusetts

MAMH requests level-funding of the FY22 GAA of \$550K to manage Network of Care Massachusetts. This amount is included in H.4701.

- Network of Care Massachusetts is a critical public service for the people of the Commonwealth as it is the singular place where all mental health, substance use, and related social services programs and organizations are curated into a state-wide online, user-friendly, searchable tool. It supports people in taking their first steps in accessing behavioral health care by helping them find reliable information on behavioral health resources and supports in their communities. The searchable directory is complemented by an extensive library of health information, including over 30,000 high-quality articles, fact sheets, and interactive tools written by leading experts and organizations in their fields. Network of Care Massachusetts provides a crucial service for the people of the Commonwealth and supports the “Front Door” or “Behavioral Health Help Line” concept presented in EOHHS’ Roadmap for Behavioral Health Reform.

¹ Recommendation 1 of the Section 35 Commission (July 1, 2019) (18 in favor, 0 opposed, 4 abstained, 7 absent), https://d279m997dpfwgl.cloudfront.net/wp/2019/07/0703_section-35-commission-report.pdf at 6.

EOHHS 1599-6903 Chapter 257 and Human Service Reserve

MAMH requests a \$351.6M increase over H2 and H.4701 to ensure that behavioral health workforce compensation is competitive now and sustainable in the long-term, for a total of \$581.6M for this line item in FY23.

- Historically low rates of pay and the difficulty of filling jobs serving complex populations has resulted in high behavioral health staff vacancy rates, frequent turnover, reduced service capacity, long waitlists, and the permanent closure of certain programs, all exacerbated by COVID-19. H2 funding is only sufficient to raise salaries for human service workers to the Massachusetts Bureau of Labor Statistics (MA BLS) 2020 median salaries, putting such rates in effect until July 1, 2024. Given workforce shortage issues, we should fund salaries at the 75th percentile to be competitive and adequately consider inflation costs. To benchmark salaries to the 75th percentile, the Chapter 257 rate reserve line item should be funded at \$581.6M.

EOHHS 4000-0052 Inpatient Behavioral Health Beds

As an Executive Member of the Children’s Mental Health Campaign, MAMH requests \$10M over H2 and H.7401 for this line item to support intensive community-based services to address the Emergency Department (ED) boarding crisis. The line item was created in the FY21 GAA with \$10M and now needs additional funding.

- ED boarding was already at crisis levels before the COVID-19 pandemic. The pandemic has compounded the crisis at a time when behavioral health needs are skyrocketing. These funds would support behavioral health delivery services, the behavioral health workforce, and enable access to the right care, at the right time, in the right setting. MAMH encourages the expansion of intensive community-based treatment alternatives in order to enable individuals to be diverted from hospitals or those boarding in hospitals to be discharged, as well as funds for workforce recruitment and training.

Department of Public Health (DPH)

DPH 4512-0200 Bureau of Substance Abuse Services

MAMH requests \$211.659M for this line item for FY23 to support a range of substance use treatment, housing, and workforce development services. This funding is needed to address the climbing number of opioid-related deaths in the Commonwealth and, particularly, the disproportionate effect that this crisis is having on communities of color. In 2020, over 2100 individuals died of opioid-related overdoses, reversing declines since a peak in 2016, with rates of death of Black men increasing 69% over 2019.

To address this behavioral health emergency, MAMH seeks increased funding in this line item as follows:

- **\$3M for Bureau of Substance Addiction Services (BSAS) to develop and provide technical assistance to providers serving communities of color**, including requirements for becoming a licensed BSAS provider.
- **\$3M to expand multi-disciplinary, team-based substance use treatment care**. These teams would provide treatment, rehabilitation, and supportive services to adults with a severe and persistent mental illness or substance use disorder, including those experiencing homelessness and/or those who may not meet criteria for other programs.

- **\$10M for Family Supportive Housing Programs.** This housing model addresses the complex issues involved in family substance use treatment and recovery. It offers a holistic approach to recovery that addresses the inter-relationships between a families’ physical and psychological health as well as parenting responsibilities and other supportive services.
- **\$10M for low threshold housing for homeless individuals with substance use and co-occurring disorders at risk of HIV (housing first model).** This funding would give BSAS the capacity to procure congregate care or individual housing units through licensed addiction treatment providers. It is a “housing first” model that does not require sobriety for placement and provides supervised case management services. The procurement could be targeted to communities with high rates of homelessness, opioid overdose/deaths and HIV infection.
- **\$7M for a BSAS workforce development assistance program.** This funding supports staff who work in BSAS-licensed programs including by providing financial support to complete trainings and continuing education curriculum. The program should prioritize the recruitment and retention of a culturally, ethnically, and linguistically diverse workforce.
- **\$1M for the Massachusetts Rehabilitation Commission for people in recovery.** Through an Interagency Service Agreement with MRC, BSAS identifies educational pathways with local community colleges and universities and train individuals with lived experience to work in the addiction treatment field.
- **\$3M for the Massachusetts Access to Recovery (MA-ATR) program.** MA-ATR offers comprehensive care coordination, job readiness, skills training, and access to services for individuals who are re-entering the community post-incarceration, pregnant women, and veterans. The program has served over 26,000 individuals throughout the state. MA-ATR continues to be funded at \$7M by SAMHSA through the Federal State Opioid Response (SOR) grant, and \$3M by the state. While federal funding has been renewed, the \$3M in state funding must continue as well.

DPH 4513-2020 Behavioral Health Outreach, Access and Support Trust Fund

MAMH supports the \$12.534M in H2 and H.4701 for the Behavioral Health Outreach, Access and Support Trust Fund. In the FY22 GAA, these dollars are designated for important purposes including tele-behavioral health in schools; a mental health workforce pipeline to encourage a culturally, ethnically, and linguistically diverse behavioral health workforce; a public awareness campaign to promote the use of behavioral health services; a loan forgiveness program for mental health professionals; and staffing investments and rate incentives to address ED boarding.

Department of Children and Families (DCF)

DCF 4800-0200 DCF Family Resource Centers

As a member of the Executive Committee of the Children’s Mental Health Campaign, MAMH requests a \$0.4M increase over the FY22 GAA for the Mental Health Advocacy Program for Kids (MHAP for Kids), bringing the total funding for MHAP for Kids to \$1.9M for FY23. H2 and H.4701 contained no funding for this program.

- Many children in, or at risk of entering, our juvenile justice system end up there because of unmet mental health needs. Health Law Advocates’ MHAP for Kids has a proven track record of significantly improving the lives of these children and their families while reducing unnecessary costs for the state.

Trial Court

Trial Court 0339-1011 Community-based Re-entry Programs

MAMH requests a \$1.61M increase over H2 for community-based residential reentry programs, for a total of \$11.25M for this line item in FY23. H.4701 includes this funding.

- Added to the state budget in 2018, this line item funds programs that reduce recidivism by helping men and women transitioning from incarceration back into Massachusetts neighborhoods find employment, housing, substance use and mental health counselling, and other services. This funding currently supports 154 reentry beds and wrap-around services across Massachusetts. In FY22, funding from this account will result in 50 new beds and services in Worcester, the Merrimack Valley, and Holyoke. However, the need for re-entry services remains unmet and has only increased during the COVID-19 pandemic, which has increased barriers for individuals returning to their families and communities.

Executive Office of Elder Affairs (EOEA)

EOEA 9110-1604 Supportive Senior Housing Program

MAMH requests a \$1.55M increase over H2 for Elder Supportive Housing Programs, for a total of \$7.936M for this line item in FY23. H.4701 includes this funding.

In the FY21 budget, the Legislature provided the Executive Office of Elder Affairs (EOEA) with new funding to expand Elder Supportive Housing sites across the Commonwealth. With these new dollars, EOEA partnered with the Aging Services Access Points (ASAP) network to launch new Elder Supportive Housing programs in many communities; these new programs served 1480 resident units. EOEA needs the requested increase to fund these expansion sites.

- The Elder Supportive Housing Program employs a Supportive Housing Coordinator who provides tenancy preservation support and manages on-site 24/7 emergency coverage. Supportive Housing Coordinators also direct programs open to all housing site residents including congregate meals, on and off-site social activities, workshops, health clinics, and educational programs. This program allows elders to remain in their communities.

EOEA 9110-1640 Geriatric Mental Health Services Programs

MAMH requests a \$1.3M increase over H2 for Elder Mental Health Outreach Teams (EMHOTS), for a total of \$2.5M for this line item in FY23. This line item was level funded in the Governor's budget, matching the FY22 GAA, but there is great need for additional services. H.4701 includes this funding.

- EMHOTS bring vital community based behavioral health supports to older adults and reduce reliance on emergency rooms and expensive congregate care settings such as nursing homes. EMHOTS work with older adults in their own homes to address the broad range of needs associated with behavioral health issues, such as chronic diseases, social isolation, housing insecurity, and financial challenges. Demand exceeds supply, but providers are available to provide additional services if funding becomes available. Last year, 12 agencies submitted proposals to create new, or expand existing, EMHOT services.

Department of Housing and Community Development (DHCD)

DHCD 7004-9033 Department of Mental Health Rental Subsidy Program

MAMH supports the \$12.548M in H2 and H. 4701 for the Department of Mental Health program that provides rental assistance.

- The Department of Mental Health Rental Subsidy Program (DMH RSP) was established to provide rental assistance to units occupied by low-income persons who receive supportive residential services through DMH. The program is collaboration between DHCD's Bureau of State Rental Assistance, which is responsible for regulatory and administrative oversight of the program, and DMH, which is responsible for selecting Service Provider Agencies and allocating rental assistance subsidy funds. Eligible participants must be determined in need of supportive residential services by DMH, and a closed referral process is used. Through this process, DMH refers eligible clients to service providers across the state.

DHCD 7004-0102 Homeless Individual Shelter

MAMH requests a \$16.745M increase over H2 for this line item. H.4701 includes this funding. MAMH supports the H2 language which states that funds in this line item may be used for housing first and rapid rehousing models, transitional housing, and diversion away from shelters.

DHCD 7004-0104 Home and Healthy for Good

MAMH requests a \$2.5M increase over H2 for the Home and Healthy for Good permanent supportive housing program, for a total of \$6.38M for this line item for FY23. Of the additional funding, \$500K would be used to provide a 10% funding increase to existing programs and \$2M would be used to create new programs. H.4701 includes this funding.

- The Home and Healthy for Good program is operated by Massachusetts Housing and Shelter Alliance, Inc. It is designed to reduce the incidence of chronic homelessness. The H2 budget requires that not less than \$250,000 shall be expended to continue a supportive housing initiative for unaccompanied homeless young adults who identify as lesbian, gay, bisexual, transgender, queer, or questioning.

DHCD 7004-0105 Sponsor-based Permanent Supportive Housing

MAMH requests a \$2.1M increase over H2 for housing units for individuals experiencing homelessness, which will mitigate overcrowding in shelters and, most importantly, house people in safe supported settings. H.4701 includes this funding. H.4701 further provides that not less than \$2.1M be administered by the Massachusetts Housing and Shelter Alliance to sustain low-threshold sponsor-based leasing that had been previously linked to the pay-for-success projects funded through the Social Innovation Financing Trust.

DHCD 7004-0202 Homeless Individuals Rapid Rehousing

MAMH supports the \$5M in H2 and H.4701 for the rapid transition of homeless individuals into sustainable permanent housing.

Office of the Child Advocate (OCA)

0930-0100 Office of the Child Advocate

MAMH requests a \$2.5M increase over the FY22 GAA for the operation of a state center on child wellness and trauma, bringing the total funding for the state center for child wellness and trauma to \$3.5M for FY23. H2 includes no funding for this center; H.4701 includes this funding in a new line item, OCA 0930-0101.

In 2020, the Childhood Trauma Task Force recommended the creation of such a center, supported with state funding, which would ensure all child-serving systems in Massachusetts are trauma-informed and responsive by providing training, technical assistance, coordination, and practice advancement support. The OCA launched the Center on Child Wellbeing and Trauma (CCWT) in partnership with the UMass Chan Medical School in October 2021.

- This investment will significantly increase the number of organizations and range of sectors that can be supported with the training and coaching offered by the CCWT. Just months in, it is abundantly clear that the Center is filling a gap and providing a service that child-serving state agencies and organizations want, need, and value. After two-plus years of the pandemic, we are seeing high levels of trauma impacting children, families, and providers, creating an even greater level of urgency for this work.

OUTSIDE SECTIONS OF H2 BUDGET SUPPORTED BY MAMH

Section 18 Substance Use Disorder Federal Reinvestment Trust Fund

Section 18 amends the language of G.L. c. 29, § 2YYYY, which outlines the activities of this fund. Funds were previously allocated to EOHHS account 4000-1316, but this account does not appear in the FY23 budget. H.4701 did not include this outside section.

- This fund was created to implement MassHealth's substance use disorder section 1115 waiver demonstration project and to enhance and expand substance use disorder services. Funds may be used for residential recovery services, transitional support services, family recovery services, recovery support navigator services, recovery coach services, and other new or expanded substance use disorder treatment services. EOHHS manages the fund and may expend amounts for specific purposes, as set out in statute.
- Outside section 18 designates maximum amounts of funding that EOHHS may expend from the fund: to expand and support the residential treatment system to treat individuals with a substance use disorder or co-occurring mental health and substance use disorder and to expand and increase access to the 24-hour diversionary system; to reduce stigma, expand access, support implementation, and increase competencies for medications for substance use disorder; to support access to evidence-based recovery services through peer and paraprofessional services; to ensure appropriate assessment for levels of care utilizing American Society of Addiction Medicine or other evidence-based modalities; and to support integration of physical health, mental health, and substance use disorder care across all provider settings.

Section 21 Behavioral Health Access and Crisis Intervention Trust Fund and Population Health Investment Trust Fund

Section 21 establishes a Behavioral Health Access and Crisis Intervention Trust Fund, a Hospital Investment and Performance Trust Fund, and a Population Health Investment Trust Fund. H.4701 did not include this outside section.

- These funds' activities are codified in G.L. c. 29, §§ 2RRRRR, 2SSSSS, and 2TTTTT respectively. The Behavioral Health Access and Crisis Intervention Trust Fund may receive and expend certain revenue from behavioral health surcharge payments. Funds may be used to support a statewide, payor-agnostic community behavioral health crisis system, including, but not limited to, a Behavioral Health Access Line to connect individuals to behavioral health services, including clinical assessment and triage and a statewide system to deliver behavioral health crisis intervention services 24/7 in mobile and community-based settings, available to all residents without regard to insurance. The Population Health Investment Trust Fund may receive and expend certain revenue from the restructured hospital assessment. The Population Health Investment Trust Fund may make payments to promote the continued implementation of certain federally approved delivery system reform activities, including to support primary care and complex care management, and to address health-related social needs.

Section 59 Behavioral Health Payor Surcharge

Section 59 adds a §69A to G.L. c. 118E, establishing a behavioral health payor surcharge to be assessed by EOHHS and deposited into the Behavioral Health Access and Crisis Intervention Trust Fund. H.4701 did not include this outside section.

We appreciate the opportunity to provide you with our budget priorities. If we can provide any additional information or serve as a resource to your work, please do not hesitate to contact me; Jennifer Honig, Co-Director for Public Policy and Government Relations, at jenniferhonig@mamh.org; or Jessica Larochelle, Co-Director for Public Policy and Government Relations, at jessicalarochelle@mamh.org. Thank you for your consideration.

Sincerely,



Danna Mauch, Ph.D.
President and CEO

c: The Honorable Julian Cyr, Chair, Joint Committee on Mental Health, Substance Use and Recovery