

Testimony of Howard Drescher
Before the Appropriations Committee
February 21, 2020

Department of Mental Health and Addiction Services (DMHAS) budget

**H.B. No. 5005 AN ACT ADJUSTING THE STATE BUDGET FOR THE BIENNIUM
ENDING
JUNE 30, 2021**

Good evening Senators Osten, Representative Walker, and members of the Appropriations Committee. My name is Howard Drescher. My wife Carolyn and I live in Mansfield and are members of the National Alliance on Mental Illness (NAMI). NAMI is the nation's largest grassroots mental health organization dedicated to building better lives for all those affected by mental health conditions. NAMI Connecticut, and its local affiliates provide support groups, educational programs, and advocacy for individuals, families, and children impacted by mental health conditions. I have also begun serving on the state's Behavioral Health Partnership Oversight Council, a commission charged with helping to ensure quality and access to mental health services in the state.

We are parents of an adult woman who has lived with disabling mental illness since she was a teenager more than 30 years ago. Without the regular case management, counseling and psychiatric services our daughter receives from our grant-funded Local Mental Health Authority, she would be unable to live independently in the community with some degree of mental stability. And we can assure you, without going into personal details, that is no exaggeration.

We understand the state's continuing fiscal challenges and the difficult decisions facing legislators and appreciate that the Governor has flat-funded and not significantly cut the DMHAS budget. At the same time, certain state services and supports must be prioritized because of the increasing needs for services and the greater health care and human costs resulting from short-term funding cuts. We are asking you to consider increasing the funding for DMHAS behavioral health services, for related housing supports, and for services for high-need individuals in the DHMAS' budget. Specifically, we support the following items in the Governor's budget proposal:

- The additional \$280,880 for private nonprofit providers to reflect the impact of minimum wage increases on their costs.
- The Housing Supports/Services maintained at \$23 million for FY 21.

- The \$3 million dollars in new funding to fund community placements for individuals at Connecticut Valley Hospital who are ready for discharge.
- The Young Adults Services that are maintained at levels of the enacted budget, \$78 million in FY 21.
- The maintaining of the Managed Service System, (Federal) Grants for Substance Abuse Services, and (Federal) Grants for Mental Health Services line items.

At the same time, we are particularly concerned for the relatively small but highly dependent population with severe and persistent mental illnesses – people like our daughter.

In Northeast Connecticut where we live, the state's most rural section has the fewest resources, spread out over a wide geographical area of more than 800 square miles of open space and small towns. Important levels of care are either limited or missing altogether. Services to help people transition from in-patient to out-patient living are not available. This often leads to a poorer recovery and higher potential for costly re-hospitalization. Case management services are mainly limited to weekdays, with no availability during nights and weekends, times when they may be most needed and can help prevent an emergency department visit or even hospitalization at additional higher cost and disruption.

Looking back on the long history of mental illness treatment in our nation, the mass de-institutionalization of psychiatric patients from large public hospitals to community-based living was supposed to result in better lives for patients and lower costs for the public. For those of us who have lived with severe mental illness as family members and devoted advocates, the fight to fulfill the promise of community-based services has been long and frustrating.

We look forward to seeing Connecticut again become a state that sets an example to others in its support for people with mental illness. Strong community-based services, supplemented by essential resources for acute care, are the most humane and cost-effective means of addressing the issue. We are pleased that the current budget shows no cuts and offers some important increases. We hope this will become a trend for future budgets. Thank you for your attention.

Howard and Carolyn Drescher

Mansfield, CT