

# FY 2024 BUDGET RECOMMENDATION BUDGET BRIEF

*Maura T. Healey, Governor | Kimberley Driscoll, Lt. Governor*

## **Behavioral Health**

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### **Introduction**

As is true across the United States, workforce challenges have exposed critical gaps in access to high quality behavioral health care services for Massachusetts residents. The H.1 proposal would further expand the ecosystem of outpatient services available across the Commonwealth, ensure access to crisis stabilization services in the community and in emergency departments, and strengthen the continuum of inpatient settings for those individuals that require them.

### **Promoting Access**

H.1 funds investments in the Commonwealth's behavioral health infrastructure that will ensure that anyone experiencing a behavioral health crisis will have access to the appropriate type and level of care for their needs. H.1 proposes funding:

- 24/7 Behavioral Health Help Line available to all residents of the Commonwealth, to provide live support, clinical assessment, and connection to the right mental health and addiction treatment
- Establishment of Community Behavioral Health Centers and expansion of urgent care for behavioral health as alternatives to the emergency department
- Permanent Medicaid rate increases for outpatient behavioral health clinic services
- Expansion of hospital emergency department diversion programs, including an intensive program for children and youth
- Expansion of Program Assertive Community Treatment (PACT) programs for adults, which brings clinicians into communities to help meet the needs of clients with mental health needs who live independently

### **Expanding Community Care**

#### *DMH Community Clinical Services*

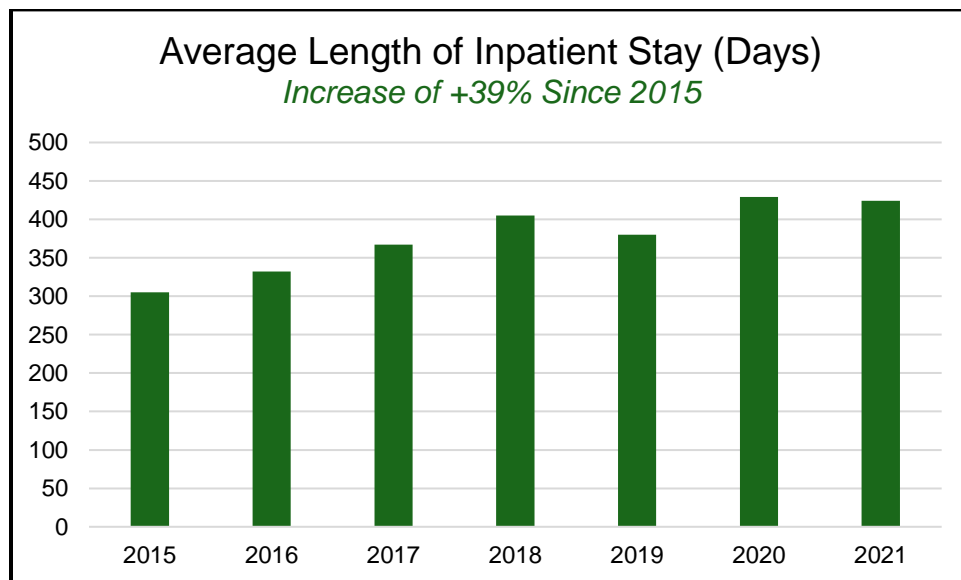
An essential component of alleviating capacity constraints and moving individuals to the correct type of care as quickly as possible is making available more community mental health services. DMH's group living environment is experiencing a 99% occupancy rate, creating a bottleneck for moving individuals from emergency departments, through inpatient facilities, to community living. H.1 proposes \$12.4 million to expand community placements by over 1,100, a 9% increase that will contribute to the large reduction of wait time for inpatient care.

*Preadmission Screening and Resident Review*

Individuals with serious mental illness are screened by DMH before admission to a nursing facility and after admission with the goal of avoiding admission where possible or discharging them to the community as soon as possible. To strengthen this preadmission screening and resident review program, H.1 proposes \$17 million to expand transition case management, develop a new medically enhanced intensive group living environment, and expand supervised residential settings. This will allow DMH to redirect individuals towards community living with the additional supports they will need to thrive.

**Building Inpatient Capacity**

Adults with serious mental illness who need inpatient care are directed from acute hospitals or by courts towards the Department of Mental Health (DMH), which currently has a capacity of 663 beds for its inpatient program. Because clinical complexity and acuity of the average individual in one of those beds has dramatically increased, their average length of stay has also increased by 124 days per person since 2016.



With more individuals every year being directed towards these beds, and the average length of stay dramatically increasing, there is not enough capacity at DMH to support the need.

FY24 H.1 proposes \$23 million in additional funding to increase DMH state-operated inpatient bed counts by 10%, which will produce enough capacity to alleviate some of the pressure on the inpatient system. This capacity increase will dramatically improve the lives of those individuals needing critical inpatient care and give DMH the resources it needs to continue to develop its supports in the years to come.

## **Additional Behavioral Health Supports**

### *Other DMH Supports*

To expand access to mental health services for children and youth in the Commonwealth, H.1 proposes \$8.3 million in additional funding for youth intensive residential treatment programs. This will allow DMH to evolve its staffing model to better address the changing complexity and severity of the clinical need for these patients. H.1 additionally proposes a \$4.5 million increase for the Program for Assertive Community Treatment for Youth (PACT-Y). PACT-Y provides comprehensive behavioral health services to individuals under 22 years of age with emotional disturbances who have not responded well to community-based services to ensure that all individuals have access to essential care.

FY24 H.1 also fully funds the 75 bed Men's Recovery from Addiction Program, as well as the 45 bed Women's Recovery from Addiction Program. These are inpatient programs that treat patients recovering from substance misuse or addiction, and often with additional compounding mental illness. The program is designed to holistically address patients and work to reintegrate them back into the community.

### *Social Services and Older Adult Supports*

This budget proposal includes an investment of \$500,000 to expand the mental health services the Department of Children and Families (DCF) will offer through its case review teams. As with all Human and Social Services agencies and providers, DCF has witnessed firsthand the increasing clinical intensity of mental health needs of its clients and families. These staff will use their mental health expertise to offer case consultation and support to DCF caseworkers for cases where mental health impacts the children and families in their cases.

H.1 also funds an investment in the Elder Mental Health Outreach Teams (EMHOTs), which are interdisciplinary teams based in community settings. EMHOTs help older adults gain skills to reduce the impact of stressors and help connect older adults to formal behavioral health services. Maintaining this investment will allow the EMHOT program to reach 40 previously unserved municipalities.

### *Education and Workforce*

As part of its commitment to mental health supports across state government, the administration's H.1 budget proposal also recommends a \$1.5 million expansion for mental health professional development for childcare providers and \$1 million to implement universal mental health screening at 30 schools. H.1 also funds student behavioral health grants at \$4.4 million for crisis services, therapy, assessment of learning disorders, responses to sexual assault, and other services.

Additionally, to provide behavioral and mental health supports in the workforce, H.1 proposes adding \$700,000 to expand services by the On-Site Academy, an organization that provides comprehensive mental health services to first responders.