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*System Reform &
Redesign
Public Policy Alert*

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MEMBERS' UPDATE, 4/3/19: THE NYS BUDGET

Good Morning,

As was anticipated, the State budget was passed in fits and starts over the course of this past Sunday, into Monday morning. How did BHC fare? It's all in the eye of the beholder...the bottom of the glass may be seen as full. The top half, on the other hand, is empty. This morning we'll review some of the salient issues and outcomes, with further and more in-depth analysis to come. In fact, be sure to join us on the Full Membership Meeting on April 23rd when we will have our fellow advocates and experts on the MH and SUD sides providing their insight into the budget, and our next steps for continued public policy advocacy.

Okay, let's start right out with two big issues that went different ways: 1) Despite concerted and consistent advocacy efforts from a broad range of stakeholders, the 2.9% human services COLA was not included in the budget. It did contain much more modest increases for some direct care staff, but our takeaway should be that Albany does not comprehend the current state of the BHC workforce, nor do our Chief Executive and Legislators seem to be placing a priority on supporting BHC services at a time of a crisis drug epidemic, alarming suicide rates, and the onset of an effort to re-establish nicotine addiction in our kids and develop a whole new generation of smokers/vapers. There obviously remains much work to do. Glenn Liebman, Executive Director of MHANYS, was a leader in the advocacy efforts for the COLA, and has issued a post-budget statement that these efforts will continue, and present an even stronger case for the COLA in the next budget. Of note, we are hoping to have Glen join us on our 4/23 call. We will have ASAP Public Policy Director Kyle Plaske on the call, and will hope to confirm Glen's participation shortly.

2) The legalization of marijuana for recreational use by adults is not included in this budget. Of note, there was a very vocal lobbying effort by proponents leading up to the budget agreement but, in the end, they were disappointed. There are several elements that went into the omission of legalization, and the Legislature will almost certainly consider it down the road. But the differences between how the Governor and how the Legislature wanted to implement legalization played a large part in it not being included in the 2019-2020 budget. Additionally, what was seen as a potential cash cow through taxes and fees did not pan out that way in the short-term analysis, and recall that this has been a real belt-tightening year in the development of the budget. While expenses, such as for the establishment of a marijuana agency, would have accrued this year, revenues were not projected to begin to accrue for two years. Perhaps too, the process is a more complex one than the Governor might have envisioned or hoped for. Oh, and just maybe, in this case, the voices of opponents in the BHC community were heard.

On a 'very close to home' issue, Senator Betty Little has provided a \$100K membership item annually for the past nine years for suicide prevention and anti-bullying efforts in the North Country. NCBHN has been the administrator of that grant, and we are endeavoring to discern if that is included in this year's budget. Senator Little is, of course, in the minority for the first time this year, and we have had discussions with Billy Jones' office to secure the Assemblyman's support.

Moving on, there were several positive inclusions in the budget such as:

- Population Health Improvement program (PHIP) funding was fully restored to the budget after the Governor removed it from the executive budget;
- \$500K for Mental Health in Schools;
- \$10M additional funding for mental health housing;
- Approximately \$4M for veterans' peer-to-peer program;
- \$412K for crisis intervention team (CIT) funding;
- \$100K is again included for MHANYS mental health first aid training;
- An additional \$11M CBO reinvestment from closed psychiatric beds;
- Restoration of 'prescriber prevails' language;
- Extension of OASAS APG rates through March 31st, 2023. We are exploring whether the requirement to review those rates, as proposed by the Governor, is included. This is essential, since the APG rates have been stagnant since inception.

Please recognize that these are only some highlights, and do not represent an exhaustive list of elements pertinent to BHC providers.

Finally, it is significant that the budget builders further strengthened BHC parity in the budget. **Of Note: 'Medical necessity' can no longer be used by insurance companies as a rationale to deny coverage.** Our own efforts can be traced back a full decade, when we had the opportunity to meet with the State Senate Finance Committee staff during budget negotiations to explain that medical necessity for BHC is and always has been a case of fitting a round peg into a square hole. OMH and OASAS now have the opportunity to set a single standard for BHC coverage. The parity language also includes:

- 28 days of SUD services and 14 days of psychiatric services for youth without preauthorization barriers;
- Access to prescribed medications for SUD treatment without preauthorization;
- Additional funding for DOH and Department of Financial Services to enforce parity requirements;
- Continued funding for the Ombudsman Program.

Best,
~ Bud