



**Office of
Mental Health**

Envisioning the Future

NYAPRS Executive Seminar

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Commissioner**

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Executive Budget Priorities



**Office of
Mental Health**

A Billion-Dollar increased investment in Mental Health!

A Comprehensive Continuum of Care for Youth and Adults:

- **PREVENTION**
- **EXPAND ACCESS FOR ALL**
- **INTENSIVE SERVICES FOR THOSE WITH CHALLENGING MENTAL HEALTH ISSUES**

Executive Budget: Prevention Services

Primary Prevention:

- Increase School-based clinics
 - ✓ Including increasing Medicaid rate & Insurance coverage and providing integrated services
- Expansion of Healthy Steps and Project Teach
- New Resources to expand Suicide Prevention programs for high-risk youth

Secondary Prevention

- Expansion of First Episode Psychosis Teams Statewide
- Expansion of Individual Placements and Supports (IPS) for employment

Executive Budget: Access to Care for Adults and Youth Community Services

- 12 New Comprehensive Psychiatric Emergency Programs (CPEPs)
- 42 New Assertive Community Treatment (ACT) teams
- 26 New Certified Community Behavioral Health Centers (CCBHC), tripling the capacity from 13 to 39
- Expansion of Article 31 Mental Health Clinics
- Expansion of Home-based Crisis Intervention for youth for additional 1500 families
- Expansion of Intensive and Sustained Engagement Team (INSET) program
- Farmnet – permanent funding for peer program
- Funding for Eating Disorders Centers of Excellence

Executive Budget: Highest Need Individuals

- Additional new 150 State inpatient beds and reopening 850 acute community beds offline during the pandemic
- New Inpatient and ER Discharge Protocols and Responsibilities
- Capital and Operational resources to develop 3,500 new Housing Units for adults and residential for youth:
 - 900 transitional step down; 500 Community Residence SRO's
 - 600 licensed apartment treatment; 1,500 supportive housing units
- 8 Additional Safe Options Supports (SOS) teams outside of NYC
- 50 new Critical Time Intervention (CTI) teams including Medicaid and commercial insurance coverage
- Expansion of High-Fidelity Wrap Around Services for children and families
- Increase Health Home Plus capacity for high need individuals

Integrated Care for Complex Needs

- CCBHCs - integrated care mental health, substance use, developmental disabilities and primary care
- Specialized services across clinics, intensive services, wrap around teams that serve individuals with dual diagnosis of substance use and/or developmental disability
- Integration across all crisis services
- Training and practice that ensures successful integration
- Peer Services integrated throughout

Ongoing Development of Crisis Services

- 988 Fully Funded
- Mobile Crisis Expansion
- Crisis Stabilization Centers
 - Intensive – 9 in development
 - Supportive – 10 in development
- Crisis Residences expansion
- Integrated services, with an emphasis on peer involvement

Forensic Initiatives

- Center for Diversion from Incarceration
- Mobile Access Program (MAP)
- Crisis Intervention Team training expansion
 - Sequential Intercept Mapping
- Housing with supports
- Specialized Forensic ACT and CTI teams
- Specialized Supportive Housing

Proposed Insurance and Parity Reforms

Require that both Medicaid and Commercial Payers:

- Pay increased reimbursement for school-based services
- Reimburse for crisis services, including mobile crisis and crisis residential services
- Required payment for wrap-around services following inpatient and/or ER discharge
- Address network adequacy for appointment availability and geographic access standards
- Require OMH approved utilization review standards



Workforce Development

- 2.5% COLA this year; 5.4% COLA last year
- Continuing 2-year \$104M investment in residential services
- Continuing Rate increases in ambulatory and inpatient services
- Expansion of OMH Mental Health Loan Repayment: 9 million for MD and PNPs and 5 million for social workers, psychologists, LMHCs, etc.
- Qualified Mental Health Associate (QMHA) Credential
- Expanding workforce training, especially in integrated care for substance use and developmental disabilities
- Development of a recruitment pipeline with SUNY and CUNY, including scholarships for underrepresented groups

Transforming NYS Mental Health System: Community Engagement



**Office of
Mental Health**

OMH Goals

Governor Kathy Hochul's State of the State Address and Executive Budget includes historic policies and resources to transform the State's Mental Health System.

We have identified specific goals:

1. Hear the voice of individuals and families, peers, providers, community organizations, individuals and families with lived experience and others who understand a community's needs and challenges;
2. Increase access to mental health services;
3. Address gaps in services and geographic barriers;
4. Identify health disparities and promote equity; and
5. Improve and integrate the mental health continuum of care for all New Yorkers.

OMH 2023 Community Engagement Sessions

- 890+ participants attended 4 virtual sessions in February & March 2023
- 752 participants attended 28 in-person sessions in March & April
- Participants are registering for the 7 in-person sessions remaining in April
- In-person sessions cover all parts of New York and offer both an evening session and morning session (*green = complete; pink = upcoming*)
 - North Country: Plattsburgh, Watertown
 - Central & Mohawk Valley: Utica, Gloversville, Syracuse
 - Western & Finger Lakes: Olean, Buffalo, Rochester
 - Southern Tier: Corning, Binghamton
 - Capital District & Mid-Hudson: Albany, Monticello, Valhalla (Westchester)
 - New York City: Manhattan, Brooklyn, Staten Island
 - Long Island: Melville (Nassau), Hauppauge (Suffolk)

Approach to Community Engagement Feedback Sessions

- Provide an **opening presentation** on the mental health investments and system reforms in the budget and planned in the coming years.
- **Breakout into groups** to gather feedback on how we can ensure health equity in both access and outcomes of new and existing public health services.
- **Identify creative ideas and examples from local communities** on how to best implement and target the proposed funding, so it reaches the New Yorkers who need it most.
- Gather information about what **success** will look like for each region and community in the State. Identify **challenges** to achieving results along with ideas for overcoming these challenges.

Breakout Groups

- After the opening presentation and Q&A, participants break out into groups for focused discussion.
- Group participants may consist of staff from provider agencies and hospitals, peers, people and families with lived experience, staff from community-based organizations, community members, community leadership.
- Participants are asked to focus their feedback on specific budget opportunities reviewed during the opening presentation and after the breakout groups, participants reconvene for a debrief from each facilitator and to review next steps.
- Notes from the breakout sessions are being analyzed into themes to be used in the implementation planning for these new initiatives. *Analysis of the virtual sessions is complete and analysis of in-person sessions is almost complete.*

Themes from Virtual Engagement Sessions

- **Ongoing Voice of stakeholders is critical**
- **Workforce:** Retention, Recruitment
- **Community:** Service Awareness, Social Determinants, Peer Services, 988, Prevention and Easy Access to Services
- **School-Aged Children:** Focus on youth and cross-agency collaboration, training, prevention, school based services
- **Intensive services:** Ensure individuals and families and youth who need intensive community or hospital services have easy access to comprehensive services in the community and in the hospital only when necessary.
- **Housing / Inpatient Feedback:** Needs & Requests, Environment, Access
- **Diversity and Integrated Services**
- **Peer Involvement** through out services
- **Insurance:** Coverage, Billing Challenges

Virtual Session Theme: Workforce

Retention

- Attendees shared that workforce salaries are not sufficient or competitive
- Compliance for documentation and caseloads impacts workforce
- Balance is needed amongst new and experienced staff across care teams
- Opportunity to look at roles of different clinicians to expand workforce

Recruitment

- Shortage of peer specialists; raise peer role and salary
- Attendees suggested beginning recruitment efforts as early as high school
- Consider expanding workforce with modifying requirements for individuals with credentials from other nations
- Need for providers who are equipped/trained to serve youth

Virtual Session Theme: Community

Service Awareness

- Common sentiment that community members are not aware of or do not understand the services available to them
- Information about services could be disseminated to communities through local and faith-based organizations
- Other providers, such as hospitals, are not always aware of services as well

Social Determinants of health

- Access to reliable transportation is a need emphasized regardless of geographic region
- Attendees recommended OMH establish partnerships with communities to foster “translators” both in language and experience; more is needed to help providers interact with families that have diverse backgrounds; social determinants need to be addressed for families and individuals

Integrated Care

- Across all agencies: mental health, physical health, substance use and developmental disabilities should be integrated and accessible

Virtual Session Theme: Community

Peer Services

- There is tremendous value to peer services and it is recommended they are included throughout the continuum of care
- Peer support advocates could be utilized in emergency programs, and all new services being started

988 Hotline

- Many attendees report favorable experiences with 988; some stated it provides a nurturing and caring conversation as well as crisis triage
- Some attendees asked for better clarification what 988 can and cannot do

Prevention and Access to Services

- Need for resiliency building and preventative services for children
- Follow-up appointments take weeks or months to schedule; access is critical

Virtual Session Theme: School-Aged Children

Cross-Agency Collaboration

- Attendees recommended cross-agency collaboration, such as between OMH and NYS Education Department or NYC Department of Education, to support children who are homeless, suffering trauma at home, or have parents that are justice involved;
- Emphasis on integrated care for mental and physical health, substance use and developmental disabilities

Training

- Youth Mental Health First Aid training could be beneficial for teachers
- Schools that offer youth and family advocates are tremendously successful

Prevention and Access to Services

- Expand children's mental health programs, especially for teenagers
- Insert community programs in schools and/or coordinate services between schools and mental health providers, and include schools in the high-fidelity wraparound process

Virtual Session Theme: Coordination

Readiness

- Opportunity for hospitals to partner with community peer programs to enhance social supports upon discharge
- Attendees emphasized concerns about youth aging out of the child system and ensuring coordinated services as they mature to adulthood

Social Determinants of Health

- Comprehensive services and access for individuals involved in criminal justice system

Insurance Coverage

- Providers face pressure from insurance companies (Medicaid, commercial) to limit care/ discharge too quickly from inpatient or outpatient services

Virtual Session Theme: Housing

Needs and Requests

- Need for safe and affordable housing across geographic regions
- Attendees report some housing providers are too selective with who they admit; high-risk individuals or those with high needs are often not accepted by housing programs; others struggle with the application process for housing
- Inability to staff supportive housing is a barrier to implementation
- Opportunity to better support housing needs of individuals with intellectual and developmental disabilities by coordinating between OMH and OPWDD
- As new housing units are being built, attendees requested that wraparound services be paired with the new housing
- There is a need for housing for special populations, such as for youth, elderly, and families and those with multiple diagnoses

Virtual Session Theme: Inpatient Experience

Environment

- There was a common sentiment from attendees that inpatient psychiatric environments should be more welcoming or “home-like”
- Attendees suggested always prioritizing the “least restrictive” environment where the individual can live and function safely

Access to Services

- There is a need to have enough open beds in hospitals to support the need of the community
- Attendees reported that individuals who are not able to access emergency care often become justice-involved
- There is an additional need for long-term stays, residential respite programs, and sub-acute residential facilities

Virtual Session Theme: Insurance

Coverage & Billing Challenges

- Attendees feel many programs are currently only available to Medicaid beneficiaries; this challenge often impacts young people and dependents more than adults; commercial payers should be engaged to ensure access
- Providers requested a Medicaid rate increase for outpatient services
- There are demonstrated barriers in schools related to funding, credentials, and licensure
- Attendees report that Family Peer Services do not fit well into a Medicaid billing model and this needs to be addressed

OMH Contact Information Shared with Participants

- Feedback on the mental health initiatives in the budget may also be submitted through our [online survey](#)
- Questions or comments can be directed to the OMH Office of Planning at Planning@omh.ny.gov
- Concerns or complaints about OMH licensed mental health services can be directed to OMH Customer Relations at 1-800-597-8481 or dqm@omh.ny.gov
- Dial 988 for support during mental health distress, including thoughts of suicide, substance use crisis, or emotional distress

