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## **NHPR REPORT ON MENTAL HEALTH BUDGET CUTS**

NH Public Radio's Elaine Grant has been following the mental health services budget cuts and how they will impact consumers, families, providers and communities. The latest public forum on this issue was yesterday's Joint Legislative Committee on Administrative Rules (JLCAR) hearing on the State's proposed caps on functional support services (FSS), which will limit the care that community mental health centers can provide. Although all the testimony presented both at a September hearing at the Bureau of Behavioral Health and yesterday before JLCAR, was in opposition, the Committee approved the caps, which took effect immediately. Elaine Grant's report follows:

As Caseloads Grow, Funding for Mental Health Care is Shrinking

<http://www.nhpr.org/node/27412>

By Elaine Grant on Thursday, October 15, 2009.

As the recession has deepened, more and more people have needed help dealing with mental health crises. But as caseloads grow, resources are shrinking. Thursday, the Department of Health and Human Services reduced Medicaid payments to mental health providers.

And as NHPR's health reporter Elaine Grant reports, that's creating some brutal choices.

It's a war of words between the state's mental health providers and the Department of Health and Human Services, which pays their bills.

HHS Commissioner Nick Toumpas and Jay Couture, executive director of Seacoast Mental Health Center and president of the New Hampshire Community Behavioral Health Association appeared recently on NHPR's The Exchange.

Toumpas: "We are not cutting the budget."

Couture: "It actually is a cut in the rates that we're paid for service."

Toumpas: "We are just looking at ways in which to manage the rate of growth because frankly, what we are dealing with here in the mental health area is across the board in all areas... we're looking at caseloads much greater than we had projected."

Couture: "And when you cut the rate with notification thirty days out, it provides a lot of challenges to scramble and see what can you do, how do you ration care?"

Mental health caseloads jumped a surprising 13 percent in the first quarter alone.

But when the state legislature allocated funds for mental health, members assumed only a one percent increase in caseloads.

And that meager allocation has put HHS in a position no one is happy about.

They're looking at a \$9 million shortfall for mental health services by the end of the year.

Riera: "If we don't take any measures to contain costs this year, sometime in May, I run out of money."

That's Eric Riera of the Bureau of Behavioral Health.

Riera: "And I can no longer pay our providers. And most of them are not in a position that they can last four, five, six weeks without any payments from the state. And that's the reality that we're facing."

So HHS has decided on a variety of controversial cost-saving measures.

In a tension-filled hearing, a legislative rules committee approved an HHS request to cap so-called functional support services for adults at no more than 2 and a half hours a day.

Those are programs that help people go grocery shopping, visit doctors, and in general, live independently.

And the department is cutting Medicaid reimbursements for managing cases.

Eric Riera expects these measures to save about \$4.5 million dollars.

Providers say they need that money to treat their existing patients.

Relative to the \$11 billion state budget, a few million dollars doesn't seem like much.

But providers say it's hard on them.

By law, they must provide care to everyone who walks in their doors, regardless of ability to pay.

Several of the centers laid off staff this week.

And they say it's tough on patients, many of whom need daily case management, therapy and medication.

Seacoast Mental Health's Jay Couture fears that for some patients, budget cuts may mean the difference between life and death.

Couture: "One of my fears that there'll be some sort of front page incident and I hope it doesn't take that before people realize that we have cut funding for mental health services too much. E: You're talking about suicide, homicide? J: It could be either. Some of the clients we serve are people who have issues with either self-harm or risk to others."

Eric and Robin Dennis know exactly what Couture is talking about.

Eric is mentally ill.

His mother, Robin, says Eric has a "Heinz 57" diagnosis -- a blend of anxiety, depression, and some autistic characteristics.

They've been getting help from Riverbend Community Mental Health Center in Concord since Eric was about 6 years old.

He is 17 now, in his senior year at an alternative school.

Case managers from Riverbend help the family negotiate school issues and are helping Eric meet some big goals:

Eric: "Trying to graduate from school, getting my driver's license, controlling my anxiety, getting better social skills..."

Eric is scared about what will happen if he should lose the help he relies on from Riverbend.

Eric: "... Like I'd forget about my goals and forget about school. If they're cut... I might end up back in the hospital because of stress."

And it's quite likely some of Eric's services will be cut.

Some providers say HHS could shore up mental health funding by looking to other HHS departments for the money instead of cutting rates.

But they're not hopeful.

They are bracing for another round of cuts on January first.