



Testimony

of

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New York City Department of Health and Mental Hygiene

before the

**New York City Council Committee on Mental Health, Developmental Disability, Alcoholism,
Substance Abuse & Disability Services**

on

FY 2018 Preliminary Budget

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Good afternoon Chairman Cohen and members of the Committee. I am Dr. Mary Bassett, Commissioner of the New York City Department of Health and Mental Hygiene. I am joined by Dr. Gary Belkin, Executive Deputy Commissioner for Mental Hygiene, and Sandy Rozza, Deputy Commissioner for Finance. Thank you for the opportunity to testify today on the Department's preliminary mental hygiene budget for fiscal year 2018.

In 2015, under the leadership of First Lady Chirlane McCray and Deputy Mayor Richard Buery, the Administration launched ThriveNYC, a four-year investment to improve the mental health and well-being of all New Yorkers. As we enter year two, I am pleased to report that more than 80% of the initiatives in ThriveNYC are operational. These initiatives follow the six guiding principles of ThriveNYC: change the culture, act early, close treatment gaps, partner with communities, use data better and strengthen government's ability to lead.

I want to thank the Council and this Committee for being partners in this work. Over the last year you've held hearings, community town halls and naloxone trainings; shared your personal stories, putting a face to many of these shared struggles; and hosted a Mental Health First Aid training for 50 Council staff. I also want to thank my staff for tirelessly implementing the vision of ThriveNYC and the First Lady for making New York City a national leader in the field.

As we look forward, I am pleased to report that the agency's budget for fiscal year 2018 rises by about \$10 million for the continued implementation of ThriveNYC and the Department's other mental health programming. This continued investment is essential to addressing and reducing health disparities in our city. While mental health issues can affect any New Yorker, they disproportionately affect poor communities, immigrant communities and communities of color. At a time when access to health care is being challenged, this city's leadership and commitment to mental health highlights the importance of physical *and* mental well-being for *all* New Yorkers.

City Priorities

The Mayor's budget priorities reflect the need to better treat and prevent mental health issues and substance use, as well as the need to deal with current crises facing the city, including the opioid epidemic. In 2016, we estimate that more than 1,300 individuals died in New York City of an

unintentional overdose – more deaths than car crashes and homicides combined. Prescription drugs continue to play a role in the opioid epidemic. But since 2010, heroin and, more recently, fentanyl – a powerful synthetic opioid 50 to 100 times stronger than morphine – have driven the increase in overdose deaths. Opioid deaths are preventable. We are committed to ensuring that every New Yorker with a substance use disorder has access to the knowledge and resources to make informed decisions, including effective harm reduction and treatment options. Our goal is to help New Yorkers stay alive and take steps to improve their health.

As part of this goal, in the last year the Department educated more than 33,000 health care providers on judicious prescription of opioids and benzodiazepines. We trained more than 200 health care practitioners on how to prescribe buprenorphine and launched an innovative nurse care manager model, which combines care management services with Medication Assisted Treatment. We have also invested heavily in the lifesaving medication naloxone; more than 10,000 naloxone kits were distributed citywide in fiscal year 2016, and late last year we launched the first phase of “Save a Life, Carry Naloxone,” a \$3 million public awareness campaign.

However, more must be done. Last week, the Mayor announced HealingNYC, the City’s comprehensive effort to reduce overdose deaths by 35 percent over 5 years. The City will leverage previously funded programs and make new investments to prevent opioid overdose deaths, misuse and addiction, and provide effective substance use disorder treatment. I am happy to report that this plan will add \$9.5 million to the Department’s fiscal year 2018 budget. With this funding, the Department will:

- Provide 65,500 naloxone kits each year to more than 100 registered opioid overdose prevention programs when fully ramped up
- Conduct outreach to treatment and harm reduction programs that serve those at high risk of overdose. This outreach includes overdose prevention education, naloxone training, and information on risks associated with fentanyl
- And expand access to buprenorphine treatment by including buprenorphine induction in emergency departments referring patients to ongoing care, working with Health + Hospitals to expand treatment through outpatient services and increasing the number of nurse care manager sites

I want to thank my fellow Commissioners at the Departments of Social Services, Corrections, and Police, the Office of Chief Medical Examiner, the Mayor’s Office of Criminal Justice, and NYC Health + Hospitals for their commitment to this work.

Through the Mental Health Council, Community Services Board, Regional Planning Consortium and RxStat, the Department is able to coordinate with City agencies, community-based organizations, service providers and advocates to ensure data sharing, program coordination and strategic planning. Together I am hopeful that we will be able to reverse the overdose trend that has plagued the city by providing effective services and treatment, and preventing addiction before it starts.

Federal Priorities

While our City budget prioritizes the mental health needs of New Yorkers, we are closely monitoring the impact that changes in Washington D.C. may have on local services.

It would be naïve to say that the results of the presidential election will not affect our work. As the Mayor said in the days after the election, we will continue to keep our people safe – all our people, regardless of who they are or where they come from – and protect New Yorkers’ access to affordable behavioral health care and substance use treatment, regardless of insurance or immigration status. The future of insurance coverage for mental health and substance use disorder services is uncertain. While we still do not know the outcome of the ACA repeal plan currently under discussion in the House, we will persist in advocating for mental health parity and we encourage you to do so as well.

ThriveNYC Updates

As you know, many agencies participate in ThriveNYC, reflecting the Administration’s commitment to cross-agency work. But this Department has a key role. I would like to take a moment now to discuss the considerable progress the Department has made in implementing ThriveNYC’s initiatives in the last year.

Last October we launched **NYC Well**, a universal point of entry to New York City’s behavioral health system. This enhanced call center provides crisis counseling, peer support, information and referrals to behavioral health services via text, chat and phone. It is free, confidential and available 24/7

in English, Spanish, Mandarin and Cantonese – with the ability to connect with an interpreter for all other languages as needed. This truly unique model connects the public to trained behavioral health personnel based on their needs, insurance and location. Since its launch, NYC Well has fielded more than 80,000 calls, texts and chats; referred more than 27,000 New Yorkers for services; made more than 3,000 follow-up calls, and has directly connected more than 1,000 callers to behavioral health services by assisting in the introductory call with a provider. In a comparable time period last year, our previous call center received only 42,000 contacts. The number is 888-NYC-WELL. We appreciate your ongoing support in encouraging your constituents to use this service.

The **Mental Health Service Corps** has currently deployed 110 clinicians – including psychiatrists, psychologists and social workers – to primary care and behavioral health clinics in communities with limited access to mental health care. This was done at no cost to the facilities or the community members. In fiscal year 2018 we will add an additional 130 clinicians. Once at full capacity in year three, we will spend \$48 million to fund up to 400 corps members, who will provide approximately 400,000 additional hours of clinical services. To aid in efforts to reduce opioid overdose deaths, all Corps members will be trained to distribute naloxone and to counsel clients about overdose risk.

We are making progress towards our goal of training 250,000 New Yorkers in **Mental Health First Aid** by 2020. To date, 12,060 New Yorkers have been trained along with 252 Mental Health First Aid volunteer instructors, who will exponentially expand our training capacity. Through this work, we will equip a critical mass of New Yorkers with tools to broaden the reach of mental health treatment and shatter the stigma of mental illness.

Through **NYC Safe**, we are providing behavioral health support to the small subset of New Yorkers who have both displayed or threatened violence against the public and struggle with a mental illness or substance use disorder. Through a reorganization of NYC Safe, all such client referrals now come directly to the Department. Trained Department clinicians provide clinical assessments and connect clients to appropriate care through our Single Point of Access network and a suite of enhanced mobile and community treatment teams. This new approach also allows the Department to work more closely with our contracted behavioral health providers to ensure continuity of quality care and access to

other social supports. We are proud to report that 96 percent of NYC Safe clients in the community have not been charged with a violent offense since being referred to the program, and there has been an 86 percent increase in housing stability among the same group.

Finally, we are working with the Department of Education to ensure that every school is aware of available mental health services to better support students and help them thrive in their education and lives. We are implementing universal programs that promote mental health for all students, more intensive prevention services for students who are at higher risk and targeted crucial services for students with identified mental health conditions – all while building mental health competency in school staff. This three-tiered model is currently being implemented at all 130 Community Schools and being expanded to an additional 900 New York City schools through the support of 100 **Mental Health Consultants**. This represents a nearly 800% increase in mental health staffing levels throughout the system. Also, there are now school based mental health clinics providing mental health services in 285 schools, up from 190 in 2014.

Looking Ahead

ThriveNYC is a guidepost in our work to promote and protect the health of all New Yorkers by addressing the effects of mental illness and substance misuse in New York City. I want to thank again Mayor de Blasio, the First Lady and the Council for their leadership as we pursue the ambitious and needed work required to transform the mental health landscape and motivate other jurisdictions to follow our lead. Thank you for the opportunity to testify, for your support of this work and for the partnership between this Committee and the Department. I am happy to answer any questions.