



Testimony

of

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New York City Department of Health and Mental Hygiene

before the

**New York City Council Committee on Health
Jointly with the Committee on Finance and the
Committee on Mental Health, Developmental Disability, Alcoholism,
Substance Abuse & Disability Services**

On the

FY 2015 Executive Budget

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New York City**

Good afternoon Chairpersons Johnson, Ferreras, Cohen, and members of the committees. I am Dr. Mary Bassett, Commissioner of the New York City Department of Health and Mental Hygiene. Dr. Hillary Kunins, Acting Executive Deputy Commissioner for the Department's Division of Mental Hygiene, joins me to answer questions related to mental hygiene.

Thank you for the opportunity to testify on our Executive Budget for Fiscal Year 2015. As you know, the Department is responsible for protecting and promoting the physical and mental health of all New Yorkers. It has been gratifying to begin implementing the Administration's vision for a healthier City.

Before I go any further, I would like to take a moment to introduce a key individual who just rejoined the Health Department. Dr. Oxiris Barbot, First Deputy Commissioner, spent the last four years as Commissioner of the Baltimore City Health Department. In Baltimore, Dr. Barbot developed technology initiatives to improve health outcomes and increase efficiency. She was the architect of the city's Healthy Baltimore 2015 health policy agenda, a plan focused on promoting health equity. During her tenure, Baltimore saw significant improvements in areas including: infant mortality, HIV transmission, youth homicide, and life expectancy. She previously served as Medical Director of the Office of School Health here at the Department, and as Chief of the Pediatrics Division and Community Medicine at Unity Health Care, Inc. in Washington, D.C. Dr. Barbot is from the Bronx, a fluent Spanish speaker, and – with no apologies to the Mayor – a New York Yankees fan. Please join me in welcoming Dr. Barbot back to the nation's premier urban health department.

Program Updates

I want to now update you about some initiatives and programs that my staff and I have been working on. In February, two initial cases of measles were identified by the Department. Between then and early May, 26 cases were identified in total, and a substantial intra-agency response was undertaken to combat an outbreak of measles in New York City. Our staff rapidly confirmed these cases based on diagnostic testing, and identified those who were exposed. Because this disease is uncommon in the United States, there were some delays in its initial recognition by healthcare providers. The Department worked to build awareness, in partnership with hospitals and other providers, through a series of Health Alerts that urged swift and appropriate response to suspected cases. This led to an increase in reports, helped us strategically shape and target our response efforts, and quickly implement control measures to minimize transmission. Providers were also advised to ensure that all eligible patients were vaccinated, particularly those residing in the affected areas. This outbreak illustrates the value of a strong vaccination program linked to our robust immunization registry, close coordination with the medical community, and pro-active communication as essential tools of emergency response.

Our mental health initiatives at the Department include Court-based Intervention and Resource Teams, known as CIRTs. This program, implemented in coordination with the City's Criminal Justice Coordinator and the Department of Corrections, helps incarcerated individuals with mental health problems access community-based services and supervision, based on their risks and needs. It reduces the amount of avoidable jail costs, facilitates linkages to treatment, and supports the re-integration of low-risk inmates with mental illness. The first CIRT team officially began in Manhattan in February, and I am pleased to report that it will be rolled out to all boroughs by the early fall.

The opioid epidemic in our City remains a focus for the Department, for which we continue to implement a multi-pronged public health response. I want to thank you for your resolution in support of the state legislation that increases access to naloxone, a drug that reverses overdoses from opioids such as painkillers and heroin. This bill recently passed both the Senate and Assembly unanimously, and we are hopeful the Governor will sign it soon. In addition, the Department's response includes: implementing a drug surveillance system; encouraging a safe and judicious opioid prescribing among health care providers; promoting overdose prevention by increasing access to naloxone; improving access to medication-assisted treatment; and conducting public education media campaigns. Our work is in coordination with the Mayor's Task Force on Prescription Painkiller Abuse, which facilitates communication and ensures that City agencies work collaboratively to address this problem and save lives.

The Department also continues to expand access to pre and post-exposure prophylaxis (PrEP and PEP). We provide continuing medical education to healthcare providers about how it can be utilized effectively in their practices. Over the past year, educational events have been held in Manhattan, Brooklyn and the Bronx, reaching 130 different providers. We anticipate holding sessions in the remaining two boroughs by the end of 2014. In addition, last month, the Department's own Sexually Transmitted Disease clinics began offering HIV Post-Exposure Prophylaxis to their patients. It is currently available at four of our eight facilities, and we anticipate that by the end of next month, it will be available to patients at all eight sites.

I join you today, after having travelled to Washington, D.C. earlier this month, where I, along with Health Commissioners from across the country, briefed policymakers about electronic cigarettes. These devices, commonly called e-cigarettes, emit vapor and are often designed to look like conventional cigarettes. Sales of these products have increased from nearly \$300 million in 2011 to approximately \$2 billion in 2013. I want to thank the Council for their focus on this issue, including your work to expand the Smoke-Free Air Act to include these products. In April 2014, the FDA announced that it will regulate e-cigarettes, and the Department applauds this important step. It is important to recognize, however, that – in the years before these regulations go into effect – there is no way of knowing the levels of nicotine or amounts or kinds of other chemicals they deliver to the lungs of users. We must continue to work together to discourage the marketing tactics of these companies, which are similar to the tactics used by the tobacco industry to lure youths into cigarette smoking.

FY 2015 Budget

Let me now turn to the fiscal year 2015 budget for the Department of Health and Mental Hygiene. The Department has approximately 6,000 employees and a current operating budget of \$1.3 billion, of which \$585 million is City Tax Levy and the remainder is federal, state and private dollars. While I am pleased that our City funding has increased, reductions to our state and federal budgets remain a big concern. The Department will, unfortunately, lose \$5.4 million of funds from the Article 6 State Aid to Localities for General Public Health Work. We have not yet determined how this loss in funding will impact our programs, but it is one that we do not want to face. In addition, the Department anticipates a reduction of about \$10 million in federal funds; this will impact critical initiatives such as emergency preparedness work in hospitals and other community-based efforts undertaken to improve health outcomes.

When I first spoke with you, I emphasized the importance of addressing disparities in health and mental health. This mission guides all of our work. And it is this commitment that

has driven the development of the Department's new Center for Health Equity, which will launch in the coming fiscal year, with \$3.2 million in funding within the Executive Budget. As part of this initiative, we plan to pilot an innovative Community Health Worker program. We will work across the City to facilitate improved healthcare and to manage conditions such as diabetes, high blood pressure, and asthma. We must exert sustained political will to reallocate and sustain resources for our health systems, giving priority to those most in need and ensuring equal access to good health and the promotion of healthy communities.

The Department will also expand its work in maternal and reproductive health. In New York City, about 90 percent of all pregnancies among teenagers are unintended. These facts, compounded with the reality that many families are unable to access resources, means that the health of many of our youngest New Yorkers suffers. We want to do more to reduce unintended pregnancies, and improve birth outcomes and the developmental trajectory. As a result, I am gratified that \$3.2 million of new funding was added to the Executive Budget; this money will allow the Department to expand both the Connecting Adolescents to Comprehensive Health program in schools, and the Newborn Home Visiting Program, which will provide an additional 1,000 visits to mothers and families each year to support children and new mothers.

This budget also reflects substantial reductions in expected revenue from fines. The Department will, next week, publish final rules to further support restaurants' abilities to maintain food safety standards, while also reducing financial penalties. We will offer consultative, penalty-free inspections to new and existing restaurants, and fix penalties in a way that will realize a 15 percent reduction in levied fines. This reduction is in addition to the significantly decreased fines that restaurants are already paying because of improved practices.

I want to also recognize the Administration's work to expand access to pre-kindergarten. As we move to accommodate thousands of new students, the Department's Bureau of Child Care is tasked to inspect, issue permits, and promote age appropriate education and child development programs to child care centers as part of its role in ensuring the health, safety, and development of children. An additional \$926,000 was added to the agency's budget to ensure that we will be able to bring on new staff, and, per the requirements of the State budget bill, inspect community-based UPK centers twice, rather than once, per year. This will result an additional 1,500 inspections annually.

Legislative

Before I conclude, I want to update the Council on two of our legislative priorities. In early June, the Department will testify at a hearing before the State committees on Environmental Conservation and Health. We will urge the committees to maintain the requirement to report-pesticide applications, so the City can continue to track where, how much, and what kinds of pesticides are used in our communities. Low-income communities in New York City have far greater rates of interior pest and rodent infestation, primarily because of the connection to poor housing conditions. It is crucial that pests be controlled safely, and that pesticides are used judiciously. The Department is committed to promoting pest-free homes and will testify that these data are essential to understanding the scope and response to the problem.

Finally, I want to thank the Council for the Home Rule resolution earlier this month in support of the dog licensing legislation sponsored by Senator Serrano and Assemblyman Kavanaugh. The City is currently governed by an 1894 law, which puts control of the dog license fee with the State; the current fee of \$8.50 no longer covers even the cost of issuing a

license. By amending the state law, to give the Council the authority to set the license fee, the City can generate additional revenue needed to support animals. The Department looks forward to working with the Council to set a fee that is reasonable and not a financial burden on dog owners. Dog licensing is a key component of responsible dog ownership, and helps ensure that a lost dog is reunited with its owner. The added revenue from licensing will allow Animal Care and Control to continue to improve its services for homeless, stray and abandoned animals. In 2013, AC&C adoptions increased 28 percent, its live release rate increased 37 percent, and its rate of dogs and cats that were humanely euthanized decreased 30 percent. Please urge your colleagues in Albany to pass this legislation, S.5048 and A.2046; it will generate revenue that helps animals.

Thank you again for the opportunity to testify. Dr. Kunins and I would be pleased to answer any questions.