



**TESTIMONY OF
CONNECTICUT HOSPITAL ASSOCIATION
SUBMITTED TO THE
APPROPRIATIONS COMMITTEE
Monday, February 26, 2024**

**HB 5048, An Act Adjusting The State Budget For The
Biennium Ending June 30, 2025**

The Connecticut Hospital Association (CHA) appreciates this opportunity to submit testimony concerning **HB 5048, An Act Adjusting The State Budget For The Biennium Ending June 30, 2025**. CHA supports increased funding for supportive housing wraparound services for persons with complex medical and behavioral health concerns that were included in the Governor's proposed adjustments to the budget of the Department of Mental Health and Addiction Services (DMHAS). CHA urges the committee to adopt these measures and take additional actions to address the state's current behavioral health crisis and improve access to services.

Connecticut hospitals are critical to their communities. They are confronting the challenges posed by a post-pandemic healthcare system with an exemplary healthcare workforce that continues to provide outstanding care. But challenges remain. Hospitals are treating sicker patients, it continues to be challenging to hire and retain staff, and the financial headwinds are grave. Through it all, hospitals are steadfast, providing high-quality, 24-hour care for everyone who walks through their doors, focusing on making Connecticut's healthcare system more equitable, and driving world-class innovation right here in Connecticut.

CHA supports enhanced state funding for wraparound services to match federal housing vouchers, new positions to expand state-operated homeless outreach, and engagement teams to address the increase in unhoused persons. These services and teams offer a pathway out of homelessness for persons with complex medical and behavioral health needs. This funding is consistent with DMHAS's mission to offer Connecticut residents an array of accessible services and recovery options that are effective in addressing individual health concerns.

Hospitals are doing their part to support the system of care, but the growing demand for mental health and substance use services, coupled with a severe behavioral health workforce shortage, has resulted in an ongoing crisis in timely access to care for patients of all ages.

- During 2023, the average daily number of patients in emergency departments (EDs) seeking treatment for behavioral health disorders was 161 patients

- During that same year, the average daily number of evaluated adult behavioral health patients awaiting an inpatient bed was 53 patients

These numbers provide some insight into the breadth and scope of this crisis. CHA asks the committee to build on what was done in recent years by making additional investments in the system of care to meet current needs and achieve system improvements to meet future demand.

First, CHA urges the state to leverage the impact of existing investments in the behavioral health system and enact additional measures to improve access to care. Hospitals support the establishment of Medicaid rate structures for new initiatives, such as the children's behavioral health urgent crisis centers, statewide emergency mobile psychiatric services, mobile crisis care for adults, and other community-based and school-based services.

Second, CHA urges the state to implement Medicaid reimbursement for collaborative care model (CoCM) services, as authorized by Connecticut General Statutes Section 17b-307a, originally enacted as Section 59 of Public Act 22-47 (HB 5001). No action has been taken to date to implement this requirement.

Third, CHA urges the Department of Social Services (DSS) to extend BOTH *the Interim Rate Add-On for Acuity and Revised Discharge Delay Policy* and the *Pediatric Inpatient Psychiatric Services: Interim Voluntary Value-Based Payment Opportunity* beyond their current expiration date of December 31, 2024.

Finally, CHA asks the state to direct additional financial resources to support the timely and safe discharge of patients with sufficient home-based, community-based, and hospital-based outpatient services. For hospitals, increasing Medicaid rates for partial hospitalization programs (PHP), intensive outpatient programs (IOP), and in-home psychiatric care programs will enable timely and safe discharge from hospitals, reduce waiting lists, and improve timely access to behavioral health services.

The immediate need for additional funding to support the behavioral health system is clear, and CHA believes that the increases and extensions should be provided now, even as DSS completes its comprehensive study of Medicaid rates.

Thank you for your consideration of our position. For additional information, contact CHA Government Relations at (203) 294-7310.