STATE OF CONNECTICUT
DEPARTMENT OF MENTAL HEALTH AND ADDICTION SERVICES
A Healthcare Service Agency

DANNEL P. MALLOY
GOVERNOR

PATRICIA A. REHMER, MSN
COMMISSIONER

Testimony by Patricia A. Rehmer, MSN, Commissioner
Department of Mental Health & Addiction Services
Before the Office of Health of the Care Advocate

October 17, 2012

Good morning Ms Veltri, I am Patricia Rehmer, Commissioner of the Department of Mental Health and Addiction Services, and I am here this morning mainly to listen to the individuals and the experts talk about the difficulties experienced when trying to access mental health and addiction services in Connecticut, but also to give you a short synopsis of DMHAS's role in providing behavioral health care to Connecticut's citizens.

DMHAS provides and funds prevention, treatment and recovery services to more than 110,000 people in Connecticut needing care for psychiatric disabilities and substance use disorders. From inpatient psychiatric and substance use treatment to community support programs, jail diversion, peer supports, employment readiness and housing; we are available to individuals and their families who have significant symptoms and are medically indigent. Our major role is to be the safety net for those who do not have insurance coverage and the resources to meet their significant behavioral health needs.

We provide funding to over 170 private not for profit programs in Connecticut communities including 7 local mental heath authorities, operate Connecticut Valley Hospital which serves over 550 individuals per year needing significant inpatient mental health and substance use services, and operate 6 mental health authorities that provide services in our urban hubs as well as an additional 100 inpatient beds. We collaborate with the Judicial Branch on jail diversion, competency exams, and probation programs and we work with DOC in reaching those who enter their system and need behavioral health care as they are leaving. We also work with DCF to transition young adults with significant behavioral health needs from the children's system into DMHAS and we partner with DSS on waivers to help individuals leave nursing homes, and the clinical management of the Husky D program. We fund prevention programs in many of Connecticut's cities and towns, at our universities, and in our schools and also have a small program for problem gambling.

We work hard to assure that individuals leaving an inpatient unit have a follow-up outpatient appointment within a reasonable time period, that individuals have access to peer supports, sponsors, warm lines, recovery telephone supports and immediate access to medications.

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We continue to build on our belief that a recovery-oriented system of care for individuals with psychiatric disabilities and substance use disorders is much more than taking a prescription drug and attending intermittent talk therapy. A recovery-oriented system of care provides for a smooth transition from one level of care to another, it offers choice, it is person-centered and it is responsive to the clinical and recovery needs of the individual.

DMHAS has been recognized nationally for the work we do here in Connecticut. Our public system is strong. All of this work however, does not easily transfer to the privately insured population. We do hear from many parents of adult children with psychiatric disabilities and substance use disorders who have private insurance, that they cannot access the same services we offer and we have worked with many families where appropriate to help them access additional levels of care and recovery services, but it is a difficult task, can be resource intensive and not always successful. One recent study of individuals with schizophrenia who are just entering the mental health system showed that they do not hold on to their private insurance for very long and that private insurance is often not adequate to meet the needs of someone with this serious illness.

Thank you for taking the time to hold this forum and for allowing me to talk a bit about the public system of care. I appreciate your time and attention to this matter.