

ANDREW M. CUOMO Governor ANN MARIE T. SULLIVAN, M.D. Commissioner

MOIRA TASHJIAN, MPA Acting Executive Deputy Commissioner

July 9, 2021

Tom Coderre Acting Assistant Secretary for Mental Health and Substance Use Substance Abuse and Mental Health Services Administration 5600 Fishers Lane Room 18-41 Rockville, MD 20857

RE: ARPA Funding Plan 2021 (MH)

Dear Acting Assistant Secretary Coderre,

Thank you for the opportunity to detail the New York State Office of Mental Health's (OMH) vision for the use of additional block grant funding available via the American Rescue Plan Act (ARPA) of 2021 as well as provide a preliminary outline and budget for these much needed resources.

As described in OMH's previous response letters to the Substance Abuse and Mental Health Services Administration's (SAMHSA) notification of additional block grant funding awarded under the Coronavirus Response and Relief Supplemental Appropriations Act (CRRSAA) of 2021, the COVID-19 pandemic has emphasized the essential mental health needs of all New Yorkers and reinforced the fundamental role of OMH and our partners in addressing both the emergent and enduring gaps within our system of care.

OMH monitors and assesses the mental health needs New York's communities as part of regular operations and deployed additional surveys and monitoring strategies to gauge the impact of the COVID-19 pandemic. In addition to these internal actions, OMH also drew upon external surveillance data and studies to improve our analysis of New York State's mental health needs during the pandemic, including information provided by the United State Census Bureau and the Centers for Disease Control and Prevention. Some key findings are outlined below.

- An OMH survey of mental health service consumers found that 70% reported increased instances of anxiety and stress during the COVID-19 pandemic. The same OMH survey also found increased challenges that impact the social determinants of mental health related to income, housing, and food security, posing increased risk and severity of mental illness and/or serious emotional disturbance.
- The United State Census Bureau's COVID-19 Household Pulse Survey found that more than one third of adult New Yorkers reported symptoms of anxiety or depression in the prior week, more than triple what was self-reported nationally using similar measures

during pre-pandemic periods. In addition, the Census Bureau's survey found that New Yorkers of color and young adults reported the higher rates poor mental health throughout the survey period.

- OMH performed an analysis of 190 million emergency department visits from January 2019 to August 2020, which found that visit rates for mental health conditions, suicide attempts, and child abuse and neglect were higher mid-March through October 2020, during the COVID-19 pandemic, compared with the same period in 2019. Notably, a similar analysis found an increase in the proportion of emergency department/inpatient utilization related to suicidal behaviors, especially for children and adolescents, during the first six months of the pandemic.
- An OMH survey of local governmental units (counties and/or municipalities) found increased demand and decreased access for services, with counties identifying growth in the number of new clients not previously engaged by the public mental health system, as well as increased engagement with existing clients. In addition, this survey cited limited mental health supports and social isolation contributing to exacerbated psychiatric conditions and noted increase in anxiety and depression which has contributed to "incidences of self-harm, overdoses and suicide attempts."
- The number of individuals receiving Medicaid-funded crisis services from OMH providers increased by 23% from 2019 to 2020 and the number of Medicaid claims made by OMH crisis services providers increased by 61% during the same time period. Likewise, Medicaid OMH clinic claims increased by 32% when comparing December 2019 to December 2020, driven in large part by an expansion in telehealth services.

In addition, OMH solicited extensive feedback regarding the expanded CMHS Block Grant funding opportunities. OMH hosted eight stakeholder feedback meetings, which included: five regional meetings, one meeting with consumers, one meeting with provider associations, and one meeting with county/municipal Directors of Community Services. In all, over 700 stakeholders participated in these feedback sessions.

To address the needs and gaps across our system of care, as informed by stakeholder feedback, OMH is redesigning the mental health system, with a primary goal of ensuring universal, immediate access to a comprehensive range of mental health services which allow individuals in need of care to remain in their homes, connected to their natural support systems during treatment, while avoiding unnecessary and disruptive inpatient hospitalizations. The federal funding allocated to New York State under both the ARPA and CRRSAA is critical to realizing this redesign, responding to the impact of the COVID-19 pandemic, and improving the mental health of all New Yorkers.

Earlier this year, OMH provided SAMHSA with New York State's initial priorities and allocations for the CRRSAA expanded block grant funding, which included:

- Development of New York State's comprehensive crisis system, including 988 Call Center preparation, Mobile Crisis Response program start-up, Crisis Residence program start-up, Crisis Stabilization program start-up, and integration of crisis services across state agencies.
- Expansion of mental health services for children, youth, and families, including coordinated crisis service development aimed at engaging children and families across

systems including schools, child welfare, and juvenile justice settings, the development of children's crisis residential programs, and the development and expansion of Youth Assertive Community Treatment (ACT) programs.

- Redesigning New York's ambulatory mental health system, including investments for telehealth services, mobile clinic expansion, rehabilitative services, intensive outpatient service models, Certified Community Behavioral Health Clinics (CCBHCs), and ACT services across the lifespan, aimed at modernizing the mental health system and creating closer linkages across systems serving individuals with mental illness or emotional disorders.
- Expanding first episode psychosis teams across New York State via the expansion of the OnTrackNY first episode psychosis model, aimed at assisting young adults experiencing symptoms of psychosis.
- Expanding law enforcement training and diversion programs, in conjunction with crisis system development, to make the systemic preparations necessary to divert individuals in crisis from criminal justice settings to mental health services.
- Improving prison re-entry services through re-entry planning and an expansion of the current Parole Diversion Program conducted in coordination with the New York State Department of Corrections and Community Supervision.

Building upon CRRSAA block grant funding priorities and allocations, OMH is proposing robust investments under the \$80 million ARPA funding award, within five key categories: *Crisis Service Development, Child and Family Service Development, Adult Ambulatory Service Development, Workforce and System Capacity Development, and First Episode Psychosis Service Development.* Additional details about OMH's proposed investments within these key categories are detailed below.

Crisis Service Development- \$17,111,871 in Proposed Investments

As with the CRRSAA block grant funding, OMH is proposing the utilization of ARPA block grant funding to implement the comprehensive continuum of crisis services needed in New York State. This includes 988 call center preparation, to develop and expand call centers, and increase the bandwidth needed to support a 988 crisis line by July 2022, including the adoption of a technology platform to handle telephonic, text, and chat communications and interface with the larger emergency response, crisis, and mental health system. In addition, ARPA funding will be made available to expand mobile crisis services, expand existing mobile crisis capacity, and provide training and technical assistance for implementation and to improve service quality and provider revenues. OMH is also looking to expand crisis stabilization and crisis residence programs across New York State through the provision of start-up funds necessary to increase service availability and volume. Jail diversion programming will also be prioritized within ARPA block grant funding alongside OMH's overall development of the crisis system. Across the crisis care system, OMH is looking to invest in training and technical assistance for both providers and workforce, with a goal of ensuring universal access to crisis services.

Child and Family Service Development- \$16,008,117 in Proposed Investments

New York State is committed to enhancing and expanding the continuum of care for children and families to address existing needs, as well as emergent needs post-pandemic. In addition a

full-spectrum crisis services array, funding will be utilized to address the access and availability to the service continuum, particularly for special populations including Black, Indigenous, and People of Color, those served in multiple systems, those with co-occurring disorders, and those in rural areas. Existing disparities have been and are expected to be exacerbated by the disproportionate effects of the COVID-19 pandemic on children and youth. The long-lasting developmental consequences of both direct and indirect pandemic effects are likely to affect mental health for a generation. Specifically, funding is expected to be used in strengthening a coordinated system of care across child-serving agencies, expanding intensive community-based services, including Youth ACT and school-based services, enhancing training, supporting implementation of evidence-based screening, assessment, and treatment, supporting the pipeline for child/youth mental health workforce, enhancing data quality, including customer feedback and institutional data, and supporting families.

Adult Ambulatory Service Development- \$14,000,000 in Proposed Investments

Expanding and improving upon New York's ambulatory mental health services is central to the redesign of our mental health system and response to the COVID-19 pandemic. Within the ARPA block grant funds, OMH is proposing eight new ACT teams across New York State and otherwise enhancing the ACT service model, expanding hiring and utilization of Certified Peers across service settings, and a modernization of the Personalized Recovery Oriented Service (PROS) program model to support the development of off-site services, telehealth options, and specialty programming. In addition to other investments, OMH is prioritizing Certified Community Behavioral Health Centers (CCBHCs), investing in additional community-based mental health services for individuals with forensic involvement, expanding alternative payment methodologies to incentivize improved outcomes and higher quality of care, and implementing new models of care coordination, including Critical Time Intervention (CTI), to improve outcomes and help individuals in need of mental health services maintain community tenure. OMH is also modifying the 1115 Waiver to implement Community Oriented Rehabilitative Services (CORE) and ARPA block grant resources will assist with CORE implementation and workforce development.

Workforce and System Capacity Development- \$20,914,508 in Proposed Investments

While many of OMH's proposed investments for the ARPA block grant funds will have a corollary effect of strengthening New York State's mental health workforce, OMH is proposing direct workforce investments to increase system capacity. OMH is planning a wide range of recruitment and retention initiatives including targeted loan forgiveness, tuition reimbursement, hiring/signing bonuses, longevity payments, expanded student placements, shift differential pay and expanded retirement contributions, among other initiatives to increase community based capacity and create a mental health career pipeline, such as new classes of staff certification and/or licensure within the mental health field. Furthermore, OMH will prioritize these investments to improve geographic and demographic equity and access throughout the state. In addition, OMH will target recruitment and retention efforts to diverse/multilingual individuals and expand culturally competent mental health services in underserved communities. As referenced in other proposals, OMH will also prioritize the expansion of certified peer capacity (inclusive of adult peer, youth peer, family peer) including resources for recruitment, education/training, and career pipeline investments. Additionally, OMH will look to expand workforce training

opportunities, including the training of law enforcement in diversion techniques, to best support underserved and emerging populations, such as justice-involved individuals and older adults with mental illness, as well as our current service population, to ensure the workforce is adequately equipped to provide effective mental health services to all New Yorkers.

First Episode Psychosis Service Development- \$8,004,058 in Proposed Investments

In addition to initial first-episode psychosis program investments made via the CRRSAA block grant funds, OMH is proposing additional allocations to expand New York's OnTrackNY First Episode Psychosis program to promote statewide accessibility of this valuable program. OnTrackNY is an innovative, evidence-based team approach to providing recovery-oriented Coordinated Specialty Care (CSC) treatment to young people who have recently begun experiencing psychotic symptoms. OnTrackNY helps young adults aged 16 to 30 with newly emerged psychotic disorders achieve their goals for school, work, and relationships. OnTrackNY follows principles of care, which include shared decision making, youth friendly and welcoming environments, and flexible and accessible recovery-oriented services to all referred individuals meeting clinical admission criteria without wait list and regardless of their insurance status or ability to pay.

| Preliminary Budget- OMH American Rescue Plan Act Block Grant Funding |
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| Funding Category | Funding Amount |
|---|----------------|
| Crisis Service Development | \$17,111,871 |
| Child and Family Service Development | \$16,008,117 |
| Adult Ambulatory Service Development | \$14,000,000 |
| Workforce and System Capacity Development | \$20,914,508 |
| First Episode Psychosis Service Development | \$8,004,058 |
| State Administration | \$4,002,029 |
| Total | \$80,040,583 |

Thank you again for allowing New York State to describe our comprehensive vision for the redesign of our state's mental health system in the wake of the COVID-19 pandemic. We appreciate the funding awards made available under the CRRSAA and ARPA and the hope, recovery, and resilience that these funds will enable our agency to offer to the citizens of New York State.

Sincerely,

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Ann Marie T. Sullivan, M.D. Commissioner New York State Office of Mental Health