

## A flawed end to a session of failures

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The 2008 General Assembly session ended on May 7, cutting many promising mental health bills because of plummeting state revenue projections. Key losses were bills to raise income limits for Medicaid for the "aged, blind and disabled" and plans to build new units of supportive housing, while lawmakers failed to include "mental health parity" for uninsured adults in the state's Charter Oak plan.

The Medicaid bill was designed to increase the income of the state's lowest income groups from 60 percent to 185 percent of the federal poverty level, as it is for all other adults eligible for Medicaid. These vulnerable individuals will now have to continue with lack of access and continuity of health care coverage, and become more financially burdened.

The loss of any new supportive housing units after 150 units are constructed from funding included in last year's state budget was a bitter pill to swallow for mental health and homeless advocates. The advocates spent considerable time in recent years educating legislators about the dire need for new supportive housing in the state. This negative outcome means a greater reliance on institutional housing such as prisons, nursing homes and emergency care facilities that are a far more costly way to spend taxpayer money. The human toll of having to live in these institutional settings is, of course, enormous and incalculable in terms of dollars and cents. The mental health parity bill, where mental health care would be paid on an equal basis with physical health care, made it through the House of Representatives late in the session but time ran out as the Senate deliberated the bill. The big losers here are the low-income uninsured who are in the Charter Oak plan. The Rell administration has indicated that the plan will provide coverage for comprehensive mental health services and substance abuse treatment, but without the mental health parity law they are not bound to do so and can change the benefit design at will.

Funding from the recommended budget approved by the Appropriations Committee to establish a pilot program for transitioning youth was lost in the "no budget" agreement that Gov. M. Jodi Rell made with Democratic legislative leaders as the session neared its end. The pilot program would have transitioned young adults coming from the state Department of Children and Families to the state Department of Mental Health and Substance Abuse system, enabling them to keep a stable home environment and programming. ("No budget" was the governor's position not to fund any programs that were not approved in second year of the biennial budget approved by the 2007 legislative session.)

In addition, no new funds were allocated to bring the woefully underfunded Young Adult Services statewide, even though large areas of the state have no Young Adult Services.

There was no funding for a Cost of Living Adjustment (COLA) for state-funded private nonprofit providers for the state fiscal year 2009. With gasoline and food costs rapidly rising, the loss of the COLA translates into stagnant wages and certain layoffs for these vital not-for-profit agencies, whose client caseloads are increasing in these difficult times.

On the positive side, mental health advocacy organizations such as NAMI-CT, the Mental Health Association, Keep the Promise Coalition and others were pleased with passage of the "Act Concerning Money Follows the

Person Project," which passed both the House and the Senate and is supported by Rell, who made legislation on nursing homes a high priority this year. This bill increases participation in the Money Follows the Person Project from 700 to 5,000 persons with added legislation that helps transition older adults and people with physical and mental disabilities from institutions back into the community. The bill also establishes a Long Term Care Reinvestment Account into which federal match funds are deposited. Also, the measure provides a service to determine whether individuals who are 18 or older are at risk to be institutionalized.

In a related bill, in which NAMI-CT, the Connecticut Legal Rights Project and KTP pushed for all session, attention is also given to individuals going into nursing homes on a temporary basis, so they don't lose their permanent housing in the community. Advocates applauded another bill that revokes the arbitrary three-day acute hospital stay requirement. Under the new legislation, access to residential treatment programs will be determined by the clinical needs of the individual and not on whether they spend three days in an acute hospital stay.

The House and Senate also approved a bill to support community re-entry program for people coming out of the prisons. The bill calls for a demonstration project affecting 750 people. Legislation to build a costly "mental health prison," for people with mental disabilities, estimated to cost taxpayers \$150 million, was defeated.

The 2008 Assembly session was a big disappointment for mental health advocates and the people they represent. With the downturn in the economy and the loss of state tax revenue, it is understandable that lawmakers took a conservative position and did not approve a lot of new spending. Hopefully, the economy and financial markets will turn around later this year and, with a more robust economy, the 2009 legislative session will be more generous to the "aged, blind and disabled" who are attempting to live lives of dignity, self-respect and independence just like the rest of us.

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