

TESTIMONY OF CONNECTICUT HOSPITAL ASSOCIATION SUBMITTED TO THE PUBLIC HEALTH COMMITTEE Monday, March 28, 2005

SB 1237, An Act Concerning Community-Based Mental Health Care

The Connecticut Hospital Association (CHA) appreciates this opportunity to submit testimony in support of SB 1237, An Act Concerning Community-Based Mental Health Care.

At the request of Governor M. Jodi Rell, Lieutenant Governor Kevin Sullivan organized a broad-based Mental Health Cabinet to develop recommendations to address the mental health crisis in this state. The Connecticut Hospital Association and Connecticut hospitals are proud to have been a part of the Mental Health Cabinet and to have contributed to the final recommendations.

CHA supports SB 1237 as it would implement the recommendations of the Mental Health Cabinet, which are designed to comprehensively improve the state's mental health system by improving outreach services, ensuring that "best practices" continue to be developed and implemented, expanding mental health services for children, expanding supportive housing, providing mental health parity, and increasing rates to providers, including certain hospital outpatient clinics.

The current mental health system is in gridlock and must be repaired with systemic and comprehensive changes. Patients are not moving through the system because the system has broken down. For many patients the hospital becomes the entire system because they cannot find access to the other types of mental health services that are appropriate for proper mental health care. Hospitals are not currently designed to function as the entire mental health system or to provide the range of services included in the continuum of mental health care. Transitional levels of care and wrap around community services are necessary, but many patients who need or would benefit from these services must be put on long waiting lists and wait inordinate lengths of time for the right placement or treatment. Connecticut hospitals provide excellent quality care and are filled with highly skilled and dedicated professionals—but extended emergency department stays are not appropriate for mental health patients in crisis. We in Connecticut can and should do better for those patients in need of mental health care by facilitating timely placement in non-hospital settings when such non-hospital care is appropriate for the patient.

CHA believes that with the implementation of these recommendations, Connecticut would be taking a significant first step to repair a system that, when fixed, will support and maintain existing mental health services and provide full and timely access to the proper continuum of care in our communities. CHA and its members remain committed

to working toward the implementation of the recommendations contained in SB 1237 and providing appropriate services to persons who are suffering from mental illness and in need of help.

Thank you for your consideration of our position.

PJM:jaf