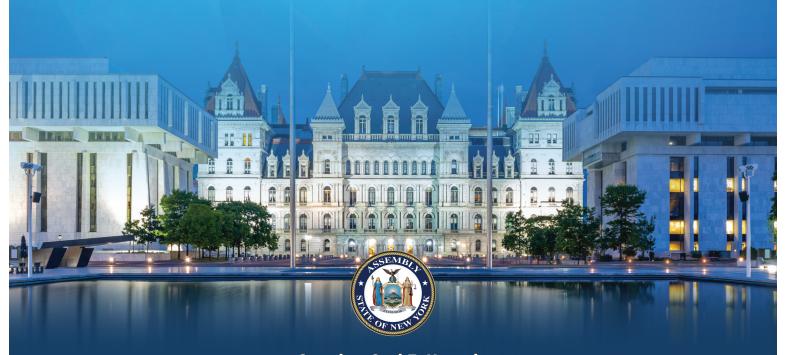


Committee on Mental Health



Speaker Carl E. Heastie Aileen M. Gunther, Chair

THE ASSEMBLY STATE OF NEW YORK ALBANY



Aileen M. Gunther Member of Assembly 100th District CHAIR Mental Health

CHAIR
Subcommittee on Women's
Health

COMMITTEES
Agriculture
Environmental Conservation
Health
Racing and Wagering

December 15, 2024

Honorable Carl E. Heastie Speaker of the Assembly Legislative Office Building, Room 932

Dear Mr. Speaker:

It is my duty and privilege to submit to you the 2024 Annual Report for the Assembly Standing Committee on Mental Health.

As you are aware, over the past few years, New York State has made significant investments into the mental health service system. Under your guidance, my colleagues in the Assembly Majority and members of the Assembly Standing Committee on Mental Health have been successful through the budgetary process in securing resources to increase capacity for mental health programs, including mental health housing, in-patient beds, out-patient treatment services, crisis services, and expanding access to mental health services provided under managed care organizations (MCOs).

With your support, the Assembly Majority must continue to advocate for budget initiatives such as the Human Services COLA and loan forgiveness programs for mental health professionals, which will help to recruit new staff and retain the current workforce. It is also imperative that we recognize there is a mental health crisis for the youth living in New York State and across the nation. In the upcoming fiscal year, we must ensure that the mental health needs of our youth are met promptly and there is no wrong door to receive care.

While the Committee is cognizant of the many fiscal priorities across the State, we cannot allow New York's bold investment in mental health services be diminished at a time of such great need.

In closing, I would like to thank you for your leadership and support of the Assembly Standing Committee on Mental Health, and I am confident that the Assembly Majority will have a productive 2025 Legislative Session.

Aileen M. Gunther, Chair

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Assembly Standing Committee on Mental Health

2024 ANNUAL REPORT OF THE NEW YORK STATE ASSEMBLY STANDING COMMITTEE ON MENTAL HEALTH

Aileen M. Gunther Chair

Committee Members

Majority

Minority

Sam Berger
Monique Chandler-Waterman
Manny De Los Santos
Chris Eachus
Edward Gibbs
Chantel Jackson
Anna R. Kelles
Angelo Santabarbara

Jake Blumencranz Jarett Gandolfo Brian Maher Mary Beth Walsh

Committee Staff

Cody Vegliante, Legislative Director Lena DeThomasis, Committee Clerk

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Janice Nieves, Assistant Secretary for Program and Policy Willie Sanchez, Principal Analyst Alice Bagley, Executive Secretary

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I. INTRODUCTION

The Assembly Standing Committee on Mental Health has jurisdiction over policy and initiatives affecting programs that deliver services, care, treatment, and advocacy for individuals with various disabilities. The Committee focuses on ensuring that individuals with a mental illness or a developmental disability are provided appropriate and necessary services to live a fulfilling life and are protected from abuse or harm in institutional and community settings.

The Committee has oversight of programs administered and licensed by the Office of Mental Health, the Office for People with Developmental Disabilities, the Justice Center for the Protection of People with Special Needs (Justice Center), and the Inter-Office Coordinating Council (IOCC).

The agencies are expected to serve nearly one million individuals in 2024, including persons with mental illness, individuals with developmental disabilities, and their families. The Committee also works closely with the New York State Assembly Standing Committee on Alcoholism and Drug Abuse, the Assembly Standing Committee on Veterans Affairs, the Assembly Standing Committee on Correction, and the Assembly Standing Committee on People with Disabilities.

During the 2024 session, the Committee reviewed bills and addressed many issues aimed at providing quality services, enhancing protections, and increasing access to services for individuals with various disabilities.

This report describes the Committee's major legislative activities during the 2024 session.

II. STATE BUDGET HIGHLIGHTS

Over the past several years, the mental hygiene service system has experienced sweeping changes to funding structures of programs under the auspices of the Office of Mental Health (OMH). The State Fiscal Year (SFY) 2024-25 Enacted Budget provides critical resources for individuals with mental illness, and their families. The following proposals and appropriations were enacted in the SFY 2024-2025 Enacted Budget:

A. Inpatient Bed Expansion and Increased Residential Support for High Need Individuals

\$55 million was provided to add 200 new inpatient psychiatric beds at state-operated psychiatric facilities, including 15 beds serving children and adolescents, 85 civil beds for adults, and 25 forensic beds; and establish three 25-bed Transition-to-Home units at state-operated psychiatric centers that will provide services to populations in need of specialized care, including individuals with a history of recurring criminal justice involvement. These Transition-to-Home units provide an intensive focus on life management skills for individuals experiencing homelessness and mental health issues.

An additional \$43 million in funding was allocated to increase stipends for over 17,000 OMH Supported Housing units to keep pace with rising property costs.

B. Human Services Cost of Living Adjustment (COLA)

Provides funding for a 2.8% COLA for programs and services under OMH, the Office for People with Developmental Disabilities (OPWDD), the Office of Addiction Service and Supports (OASAS), the Office of Temporary Disability Assistance (OTDA), the Office of Children and Family Services (OCFS), and the State Office for the Aging (SOFA). Any eligible local government unit/direct contract provider must provide a targeted salary increase of at least 1.7% for support staff, direct care staff, clinical staff, and non-executive administrative staff. A total of \$66.3 million is provided to OMH for implementation of the COLA.

C. Youth Assertive Community Treatment (ACT) Teams and Crisis Supports

\$9.6 million in funding to create 12 new youth Assertive Community Treatment (ACT) teams. ACT is an evidenced-based practice that offers treatment, rehabilitation, and support services, using a recovery-based approach, to individuals that have been diagnosed with serious mental illness.

D. Expand Training and Education for the Advancement of Children's Health (Project TEACH)

\$1.5 million provide to expand Project TEACH through specialized support for mental health and substance use resources for therapists, lactation consultants, Women, Infant and Children (WIC) staff, home visiting nurses, and other frontline perinatal practitioners.

E. Establish Loan Forgiveness Program for Mental Health Clinicians Serving Children

\$4 million in funding was provided for the recruitment and retention of psychiatrists, psychiatric nurse practitioners and other licensed clinicians in mental health programs for children licensed by OMH or the OCFS.

F. Suicide Prevention and Peer Supports for 1st Responders

\$2 million in new funding for services and expenses related to suicide prevention, peer to peer training, and other mental health supports and services for veterans, first responders, including disaster relief workers.

III. SIGNIFICANT LEGISLATION

1. Expand Access to Peer Programs and Services

A.7395 (Darling)/S.9787 (Brouk) Chapter 233

This law creates statutory definitions for a mental health peer; family peer advocate; youth peer advocate; NYS certified peer specialist; credentialed family peer advocate; and credentialed youth peer advocate and amends current law to clarify that OMH is required to foster and develop programs for the delivery of peer services.

2. Enhance the Diagnosis and Treatment of Post-Traumatic Disorders (PTSD) for Veterans

A.8485 (Hunter)/S.8076 (Parker) Chapter 105

This law requires the Commissioner of OMH to identify existing information and training programs relating to the diagnosis and treatment of PTSD in military veterans, including trainings that were developed using funds provided by New York State.

3. Provide Peer Supports and Services for a Mobile Crisis Response

A.8016-A (Cunningham)
Passed the Assembly

This bill would require a mobile crisis team to include any combination behavioral professional or certified peer specialists, certified recovery peer advocates, credentialed family peer advocates, and credentialed youth peer advocates.

4. Create Mental Health Parity with Physical Health

A.5588 (Barrett)/S.2992 (Harckham) Passed the Assembly

This bill would amend the New York State Constitution to create parity between health and mental health by clarifying that physical and mental health are equally matters of public concern and mandate the state and local authorities to provide for the protection and promotion of its inhabitant's mental health.

5. Ensure Quality of Care for Service Recipients in a Forensic Hospital

A.5853-A (Weprin)/S.231-A (Gallivan)
Passed the Assembly

This bill would authorize the governor, lieutenant-governor, commissioner of general services, secretary of state, comptroller, attorney general, and members of the legislature to visit at their pleasure, an inmate-patient facility operated by the office of mental health, provided that, a concerted effort is made to notify the director of the facility as soon as practicable, and the director would be authorized to deny any visit that would interfere with therapeutic activities or impact the management of the facility.

6. Remove Treatment Barriers for Aging Residents of Mental Health Housing Programs *A.4308 (Gunther)*

Passed the Assembly

This bill would require the commissioner of OMH to identify barriers which may prevent a provider from participating in the geriatric service demonstration program and share recommendations with the relevant commissioner to address the identified barriers.

7. Facilitate Career Development within the Mental Health Service System

A8464-A (Gunther)/S.8765-A (Bailey) Referred to the Committee on Rules

This bill would direct OMH to establish a new, supervised entry level position of "qualified mental health associate" and establish the minimum qualifications for the position.

8. Increase Availability of Peer-to-Peer Services for 1st Responders

A.7552-A (Burdick)/S.7079-A (Harckham) Referred to the Committee on Ways and Means

This bill would require the commissioner of OMH, in consultation with the Department of Health (DOH) the Office of Fire Prevention and Control, the Municipal Police Training Council, and the Superintendent of the State Police to establish a statewide grant program for eligible entities to establish peer-to-peer mental health programs for first responders.

9. Increase Training and Clinical Supervision Opportunities for Social Workers

A.9039-A (Gunther)/S.8597-A (Brouk)
Referred to the Committee on Ways and Means

This bill would require the commissioner of OMH to establish up to three, 3-year Social Worker Residency pilot programs in community behavioral health organizations for the purpose of providing post-graduate supervised clinical social work experience.

IV. HEARINGS & ROUNDTABLES

A. Mental Hygiene Legislative Budget

On February 13, 2024, the Legislature convened a joint public budget hearing to examine the SFY 2024-2025 Executive Budget proposal for the New York State Office of Mental Health (OMH), the Office for People with Developmental Disabilities (OPWDD), the Office of Addiction Services and Supports (OASAS), and the Justice Center for the Protection of People with Special Needs. The hearing provided an opportunity for the Legislature to receive feedback and recommendations from individuals and stakeholders on the Executive budget, and proposals for the Legislature to remove, add, or amend in drafting their budget resolutions in response to the Executive budget.

Throughout the hearing, many witnesses discussed the severity of the workforce crisis across New York State. The depleted behavioral health care workforce compounds access and quality of care challenges throughout the service system. Testimony provided by stakeholders identified multiple ways the SFY 2024 enacted budget could help to remedy the challenges the system is currently facing, including increasing funding for Direct Support Providers, increasing Medicaid rates, expanding loan forgiveness programs, the implementation of a 3.2% Cost of Living Adjustment (COLA), and an investment of \$500 million in behavioral health service system. These investments would help to stimulate the fiscal viability of service providers, enhance the ability for the recruitment and retainment of the workforce, and promote access to care.

Some witnesses recommended that language be added by the Legislature that would support the development of a career pipeline, produce an OMH credentialing program for paraprofessionals, and create an entry level position known as a Qualified Mental Health Associate. Other witnesses supported A.6839, a study bill that would bring together the Comptrollers' Office, the New York State Department of Taxation and Finance Department and the New York State Department of Financial Services to cost out how much a retirement benefit would cost the state and employers.

In their testimony, several witnesses stated that the Executive budget lacked sufficient funding for children behavioral services and recommended an additional \$195 million to address the gap in the funding. They noted there is an ever-increasing demand for services, mounting waitlists, very limited access to care and an extremely hard-pressed workforce that service providers are struggling to attract and/or retain.

Nearly every witness indicated support for the Executive Article VII proposal that required managed care organizations (MCOs) to reimburse behavioral health service providers no less than the Ambulatory Patient Group (APG) for the provision of services. Many witnesses testified that this proposal would increase access to care for individual's ineligible for Medicaid and bring financial stability to outpatient clinics and other service settings, thereby ensuring capacity for behavioral health treatment services and supports.

The Legislature and its respective members utilized the information from this hearing to develop its one house budget resolution and enact the SFY 2024-2025 New York State budget.

APPENDIX A

2024 SUMMARY OF ACTION ON ALL BILLS REFERRED TO THE COMMITTEE ON

TOTAL NUMBER OF COMMITTEE MEETINGS HELD	4
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	ASSEMBLY	SENATE	TOTAL	
	BILLS	BILLS	BILLS	
BILLS REPORTED FAVORABLE TO:				
	0	0	0	
Codes	0	0	0	
Judiciary	7	0	7	
Ways and Means	/	0	,	
Rules	2	0	2	
Floor	4	0	4	
TOTAL	13	0	13	
COMMITTEE ACTION				
Held For Consideration	0	0	0	
Defeated	0	0	0	
Enacting Clause Stricken	2	0	2	
REMAINING IN COMMITTEE	54	6	60	
BILLS REFERENCE CHANGED TO: WAYS and MEANS				
TOTAL	1	0	1	

APPENDIX B

FINAL ACTION ON BILLS REPORTED BY THE STANDING COMMITTEE ON MENTAL HEALTH IN 2024

ASSEMBLY BILL # SPONSOR	SENATE BILL # SPONSOR	FINAL ACTION	Description
A.4308 Gunther	NA	Passed the Assembly	This bill would require the commissioner of OMH to identify barriers which may prevent a provider from participating in the geriatric service demonstration program and share recommendations with the relevant commissioner to address the identified barriers.
A.5588 Barrett	S.2992 Harckham	Passed the Assembly	This bill would amend the New York State Constitution to create parity between health and mental health by clarifying that physical and mental health are equally matters of public concern and mandate the state and local authorities to provide for the protection and promotion of its inhabitant's mental health.
A.5853-A Weprin	S.231-A Gallivan	Passed the Assembly	This bill would authorize the governor, lieutenant-governor, commissioner of general services, secretary of state, comptroller, attorney general, and members of the legislature to visit at their pleasure, an inmate-patient facility operated by the office of mental health, provided that, a concerted effort is made to notify the director of the facility as soon as practicable, and the director would be authorized to deny any visit that would interfere with therapeutic activities or impact the management of the facility.
A.6801-B Buttenschon	NA	Referred to the Assembly Committee on Rules	This bill would require OMH to establish a community stakeholder committee to examine appropriate and effective evidence-based screening, intervention and educational supports for students with developmental, behavioral health conditions.
A.7188-A Gunther	S.3587-A	Passed both Houses	This bill would establish the rural suicide prevention council.
A.7395 Darling	Helming S.9787 Brouk	Chapter 233	This law creates statutory definitions for a mental health peer; family peer advocate; youth peer advocate; NYS certified peer specialist; credentialed family peer advocate; and credentialed youth peer advocate and amends current law to clarify that OMH is required to foster and develop programs for the delivery of peer services.
A.7552-A Burdick	S.7079-A Harckham	Referred to the Assembly Committee on Ways and Means	This bill would require the commissioner of OMH, in consultation with the Department of Health (DOH) the Office of Fire Prevention and Control, the Municipal Police Training Council, and the Superintendent of the State Police to establish a statewide grant program for eligible entities to establish peer-to-peer mental health programs for first responders.
A.8015 Cunningham	NA	Referred to the Assembly Committee on Ways and Means	This bill would direct the commissioner of OMH to conduct a study of youth mobile crisis outreach teams in New York State.

A.8016-A Cunningham	NA	Passed the Assembly	This bill would require a mobile crisis team to include any combination of behavioral professional, certified peer specialists, certified recovery peer advocates, credentialed family peer advocates, and credentialed youth peer advocates.
A.8464-A Gunther	S.8765-A Bailey	Referred to the Assembly Committee on Rules	This bill would direct OMH to establish a new, supervised entry level position of "qualified mental health associate" and establish the minimum qualifications for the position.
A.8485 Hunter	S.8076 Parker	Chapter 105	This law requires the Commissioner of OMH to identify existing information and training programs relating to the diagnosis and treatment of PTSD in military veterans, including trainings that were developed using funds provided by New York State.
A.8989 Gunther	S.8368 Brouk	Referred to the Assembly Committee on Ways and Means	This bill would establish a task force to study aging in place in mental health housing.
A.9039-A Gunther	S.8597-A Brouk	Referred to the Assembly Committee on Ways and Means	This bill would require the commissioner of OMH to establish up to three, 3-year Social Worker Residency pilot programs in community behavioral health organizations for the purpose of providing supervised post-graduate clinical social work experience.
A.9336 Seawright	S.8267 Mannion	Advanced to 3 rd Reading	This bill would require OMH and the office for people with developmental disabilities (OPWDD) to provide relevant reports to the chair of the assembly committee on people with disabilities and the chair of the senate committee on disabilities.
A.9452-A Gunther	S.8820-A Sepulveda	Referred to the Assembly Committee on Ways and Means	This bill would establish a statewide person-centered mental health services work group.
A.10202 Davila	NA	Referred to the Assembly Committee on Ways and Means	This bill would require OMH to convene statewide forums and listening sessions in areas with high rates of death by suicide, suicide attempts, or other risk factors associated with high-risk minority groups or special populations.

APPENDIX C

LAWS ENACTED 2024

ASSEMBLY BILL # SPONSOR	SENATE BILL # SPONSOR	FINAL ACTION	DESCRIPTION
A.7395 Darling	S.9787 Brouk	Chapter 233	This law creates statutory definitions for a mental health peer; family peer advocate; youth peer advocate; NYS certified peer specialist; credentialed family peer advocate; and credentialed youth peer advocate and amend current law to clarify that the OMH is required to foster and develop programs for the delivery of peer services.
A.8485 Hunter	S.8076 Parker	Chapter 105	This law requires the Commissioner of OMH to identify existing information and training programs relating to the diagnosis and treatment of PTSD in military veterans, including trainings that were developed using funds provided by New York State.

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