



Danna E. Mauch, PhD
President and CEO

Ambassador (ret.) Barry B. White
Chairperson of MAMH Board of Directors

May 30, 2023

The Honorable David M. Rogers
Chair, Joint Committee on Higher Education
24 Beacon Street, Room 473-B
Boston, MA 02133

The Honorable Joanne Comerford
Chair, Joint Committee on Higher Education
24 Beacon Street, Room 410
Boston, MA 02133

Dear Chair Rogers, Chair Comerford, and Honorable Members of the Joint Committee on Higher Education:

Re: Support for H.1275/S.829, *An Act establishing a behavioral health workforce center of excellence*

On behalf of the Massachusetts Association for Mental Health (MAMH), I write in support of H.1275 (Rep. Khan)/S.829 (Sen. Keenan), *An Act establishing a behavioral health workforce center of excellence*, being heard before your committee today.

Formed over a century ago, MAMH is dedicated to promoting mental health and well being for individuals of all ages across the Commonwealth. We are committed to advancing prevention, early intervention, effective treatment, and research for behavioral health and related disabling conditions. We seek to eliminate stigma and discrimination and advance full inclusion in all aspects of community life. This includes discrimination affecting not only people with mental health conditions, but also people who face unequal burdens and barriers to the protections and benefits of citizenship due to their race, ethnicity, gender identity, or disability status. MAMH has a demonstrated record of furthering its mission by convening stakeholders across the behavioral health and public health communities; disseminating emerging knowledge; and providing subject matter expertise to inform public policy, service delivery, and payment reforms.

H.1275/S.829 would create a centralized entity at a state or community college to analyze data and coordinate a response to the current behavioral health workforce crisis. Currently, there is no single entity at the state level charged with addressing behavioral health workforce issues and disparities. An ongoing center of excellence, staffed by experts and embedded in the field of higher education, would exist over multiple years and conduct long-term planning.

Recognizing the urgent need to build a more robust, diverse, and resilient behavioral health workforce, the Blue Cross/Blue Shield of Massachusetts Foundation recently commissioned Manatt Health to examine the behavioral health workforce in the Commonwealth. Manatt's September 2022 study cited these facts when describing the current problem:

- a Blue Cross/Blue Shield Foundation survey finding that 57% of Massachusetts adults in need of behavioral health care either had difficulty getting appointments or did not obtain any care;
- an Association for Behavioral Healthcare (ABH) survey of outpatient providers showing that 13,797

persons were on a waitlist for outpatient mental health therapy as of fall 2021, with waits averaging 15.3 weeks for youth and 12.7 weeks for adults;

- a May 2019 Massachusetts Health Policy Commission (HPC) report, “Co-Occurring Disorders Care in Massachusetts” revealing long wait times for individuals in need of medication assisted treatment for substance use conditions;
- an increase in emergency department boarding of persons needing psychiatric care, with 540 patients boarding in 50 hospitals in August 2022;
- an increase in the number of inpatient psychiatric beds being taken offline solely because of staffing shortages (for example, from 2021 to 2022, there was a 2.73 increase in the number of inpatient beds being taken offline for this reason);
- as of March 2022, 57 Mental Health Professional Shortage Areas (HPSAs) in the state, indicating a need to improve the geographic distribution of providers, supported by a recent Behavioral Health Workforce Tracker from George Washington University;
- a disparity of access to behavioral health care for historically underserved communities, including communities of color and LGBTQ and a lack of a demographic profile of the state’s behavioral health workforce;
- a recent HPC survey of behavioral health facilities finding that 34% of respondents identified a shortage of clinicians able to treat patients who do not speak English “as a moderate to extreme barrier to care.”¹

Among its principal recommendations, Manatt Health called for the establishment of a “Behavioral Health Workforce Center with a charter to improve the supply, distribution, competency, and diversity of the workforce.”² The Center would serve as the Commonwealth’s : (1) primary data hub on behavioral health workforce data; (2) set the behavioral health workforce research and evaluation agenda for the Commonwealth; and (3) act as a centralized resource for technical assistance and training and identification and dissemination of best practices for the behavioral health workforce.³

The Manatt study only confirms what we have seen and heard from people working in behavioral health care across the state. We know that, in community-based outpatient mental health care settings, more clinicians are leaving than can be hired with ABH reporting their members are able to replace only three of every four departing licensed staff. We know that, in inpatient settings, people are waiting for discharge to community services, preventing movement through the system. Yet, these problems are remediable. This bill will take the crucial step of coordinating workforce remediation efforts, collecting and analyzing data, and engaging in long-term planning to solve our workforce challenges.

Thank you very much for your consideration of H.1275/S.829. Please do not hesitate to be in touch should you have any questions or would like additional information at dannamauch@mamh.org, jessicalarochelle@mamh.org, or jenniferhonig@mamh.org.

Sincerely,



Danna Mauch, PhD
President and CEO

¹ Mindy Lipson, Patti Boozang, and Natassia Rozario, Manatt Health, Creating a Robust, Diverse, and Resilient Behavioral Health Workforce in Massachusetts (Sept. 2022), https://www.bluecrossmafoundation.org/sites/g/files/cspkhw2101/files/2022-09/BH_Workforce_Final.pdf at 5-6.

² *Id.* at 14-17.

³ *Id.*

c: Representative Kay Khan
Senator John Keenan
Rosalind Jordan
Brian Rosman