



Danna E. Mauch, PhD
President and CEO

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

May 18, 2021

The Honorable David M. Rogers
Chair, Joint Committee on Higher Education
24 Beacon Street, Room 544
Boston, MA 02133

The Honorable Anne M. Gobi
Chair, Joint Committee on Higher Education
24 Beacon Street, Room 413-A
Boston, MA 02133

RE: Support for H1346/S839 An Act establishing a behavioral health workforce center of excellence

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

On behalf of the Massachusetts Association for Mental Health (MAMH), thank you convening a public hearing today to consider investments and general bills related to higher education. We are writing in support of H1346 (Rep. Khan) and S839 (Sen. Keenan), *An Act establishing a behavioral health workforce center of excellence*.

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 track 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.

Mental health and substance use providers have long faced a shortage of staff, which in turn, has hindered individuals and families from accessing timely and appropriate behavioral health treatment. Workforce disparities exist by region, with Central, Northeast, and Southeast Massachusetts having the fewest total licensed mental health professionals per 100,000 population.ⁱ At the same time, racial and ethnic minority communities are less likely to get the behavioral health care they need. According to the 2019 AHRQ National Healthcare Quality and Disparities Report, 73% of Asians and Pacific Islanders, 69% of African Americans, and 67% of Hispanics with a mental health condition do not receive mental health treatment.ⁱⁱ There are many reasons for these inequities, including lack of diversity among mental health providers, lack of culturally competent providers, and language barriers.ⁱⁱⁱ Furthermore, families of children with behavioral health conditions and co-occurring Autism Spectrum Disorders and Intellectual and Developmental Disabilities (ASD/IDD) also face disparities; it is exceptionally difficult to find providers that are trained in providing care to youth with complex needs.^{iv} All of these disparities have been exacerbated as a result of the COVID-19 pandemic, stemming from both increased demand for services as well as the stress, fatigue, and burnout experienced by the behavioral health provider workforce.


Currently, there is no single entity at the state level charged with addressing behavioral health workforce issues and disparities. H1346/S839 *An Act establishing a behavioral health workforce center of excellence*, 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. An ongoing center of excellence, staffed by experts and embedded in the field of higher education, would exist over multiple years and could conduct long-term planning. Tasks for the center would include: 1) engaging a diverse, cross discipline group of stakeholders to address needs in training, in studying the current landscape, and in building career ladders; 2) creating aggregate demographic and geographic profiles of practitioners; 3) creating an inventory of the number of practitioners and their acceptance of insurance; 4) identifying workforce needs and existing gaps by license, certificate and practice setting; 5) working with education and training programs on curriculum improvements focused on best practices in the current behavioral health landscape and coordinate these needs with state purchasing agencies; and 6) examining existing training funds across state and federal agencies and make recommendations on ways to leverage funding.

Thank you very much for your consideration of H1346/S839 *An Act establishing a behavioral health workforce center of excellence*. Please do not hesitate to be in touch should you have any questions or would like additional information at dannamauch@mamh.org and jessicalarochelle@mamh.org.

Sincerely,



Danna Mauch, PhD
President and CEO



Jessica Larochelle, MPH
Director for Public Policy & Government Relations

ⁱ Prepared for the Blue Cross Blue Shield of Massachusetts Foundation by Abt Associates. *Access to Behavioral Health Care in Massachusetts: The Basics*. July 2017.

ⁱⁱ Agency for Healthcare Research and Quality. *2019 National Healthcare Quality & Disparities Report*. December 2020.

ⁱⁱⁱ American Psychiatric Association. *Mental Health Disparities: Diverse Populations*. December 2017.

^{iv} Massachusetts Association for Mental Health and the Children's Mental Health Campaign. *Pediatric Behavioral Health Urgent Care, 2nd Edition*. July 2020.