

# FY26 Budget Implications for Behavioral Health



MAMH  
Massachusetts Association  
for Mental Health



# Sustain Funding for Critical DMH Child & Adolescent Services

\$23.56 MILLION IN PROPOSED CUTS TO LINE ITEM 5042-5000

Protect funding for the Department of Mental Health's Child and Adolescent Services line item in the Fiscal Year 2026 state budget. Ensuring stable and adequate funding for these critical services is essential to the well-being of Massachusetts' children and families.



\$15.3 M in cuts to intensive psychiatric residential treatment programs

This would result in a 50% reduction in beds at this level of care for youth with the most serious behavioral health needs in the state.



\$6.7 M in cuts to community-based programs that help keep children in their homes and communities including services that help divert youth boarding in emergency departments.



\$1.83 M in cuts to case management services for child, youth, and family services.

Approximately 50% of the youth case management workforce, serving around 200 children.

# Sustain Funding for Critical DMH Child & Adolescent Services

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**This would result in a 50% reduction in beds at this level of care for youth with the most serious behavioral health needs in the state.**

## What programs would be impacted?

- **Clinically Intensive Residential Treatment (CIRT)** provides clinically intensive residential intervention for children ages 6-12 in a staff-secure setting. *Only one 12-bed program for this age group exists in the entire state.*
- **Intensive Residential Treatment Programs (IRTP)** provide clinically intensive residential treatment intervention for adolescents ages 13-18 in a locked environment. There are 75 beds total across the state.

## The impact of cutting this program includes:

- Reduced access to necessary care, worsening mental health for youth.
- Increased strain on other systems, leading to more emergency department boarding and inappropriate inpatient stays.
- If cuts were to happen there **must** be consideration of impact on special populations such as younger children and youth who identify as gender diverse as limited capacity for these groups exist.

# Sustain Funding for Critical DMH Child & Adolescent Services

\$6.7 M in cuts to home and community-based services and supports - \$5.2 M in Flexible Supports & \$1.5 M in Program of Assertive Community Treatment for Youth (PACT-Y)



- Flexible Supports through DMH include clinical and therapeutic services, young adult peer mentoring, and parent/caregiver peer support, and flexible funding.
- Emergency Department diversion teams are funded out of the DMH Flexible supports line.
- PACT-Y is team-based intensive home and community-based service that includes access to a psychiatric prescriber.



- Children and families deserve to receive treatment that enables them to stay in their homes, schools, and communities.
- Home and community-based care can prevent mental health issues from worsening, making them harder and more costly to treat.

## What impact would these cuts have on children and families?



- Emergency Department (ED) boarding has gone down due in part to ED Diversion teams and other behavioral health investments. Reducing funding for these services may cause ED boarding to rise again and delay access to necessary care for youth.



- Preserving services that can help keep youth in their homes and communities rather than institutions is an important value for the Commonwealth and aligns with our state's Olmstead plan.

# Sustain Funding for Critical DMH Child & Adolescent Services

\$1.83 M in cuts to case management services for child, youth, and family services.



## What is DMH Case Management & how does it serve youth?

Case Management provides comprehensive mental health and family assessment as well as individual service planning, coordination of DMH funded services and care for children and youth with significant mental health needs and their families.

Case managers help families and youth access necessary support and treatment while navigating complex systems and advocating for their best interests within the community.

## The impact of cutting this program includes:

DMH CYF only has 38 youth case managers. Any workforce reduction would have a significant impact on an already constrained service.

Case managers will be less available to assist families with navigating a complex web of services and connecting to support.



- Children, unlike adults, often require more labor-intensive Case Management due to the number of collateral providers they have (e.g. school, DCF, therapists, etc.)

# School-Based Behavioral Health Technical Assistance Center

LEVEL FUNDING - MOVE EARMARK TO #1596-2436

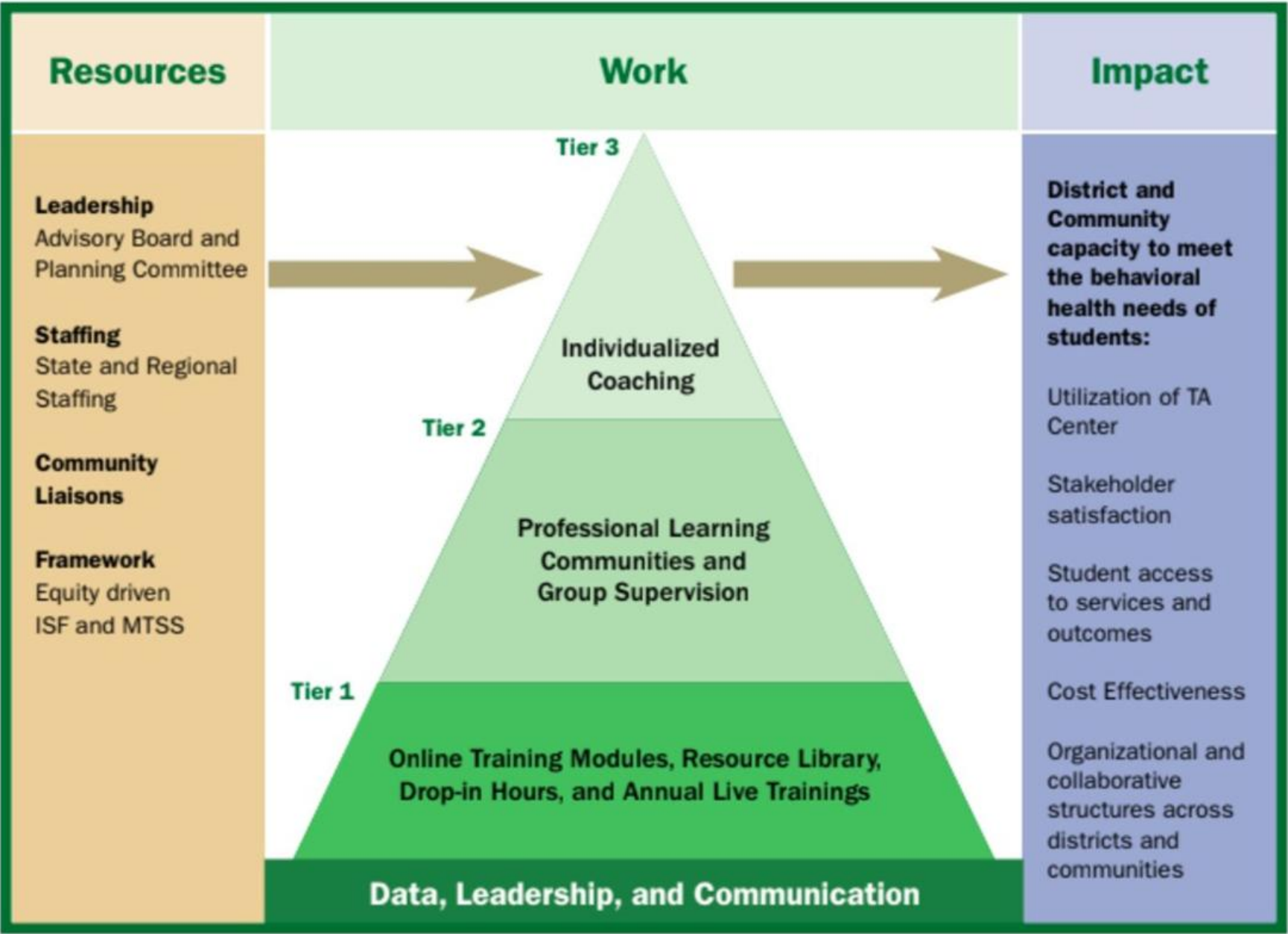
The statewide school-based behavioral health technical assistance (SBBH TA) center provides technical assistance to school districts and partnering community providers to build and sustain district capacity to meet the social, emotional, and behavioral health needs of students.

Over the last three years, the SBBH TA Center has been able to provide **free trainings and resources for more than 100 districts** in the Commonwealth and more **intensive supports to 26 districts**. They also co-coordinate an advisory council and launched targeted supports through a Western Mass hub last year.

The **CMHC requests \$500K in funding (level funding) to support ongoing work of the TA Center**, including planning and collaboration with community stakeholders.

The Governor’s FY26 H1 recommendation includes level funding at \$5M for the development and implementation of an SBBH Framework. These resources come from the Fair Share tax, and would be an appropriate home for funding the TA Center.

FY25 Funding	FY26 Ask	FY26 Governor	FY26 House	FY26 SWM	Conference
\$500,000	Level Funding	Not included			



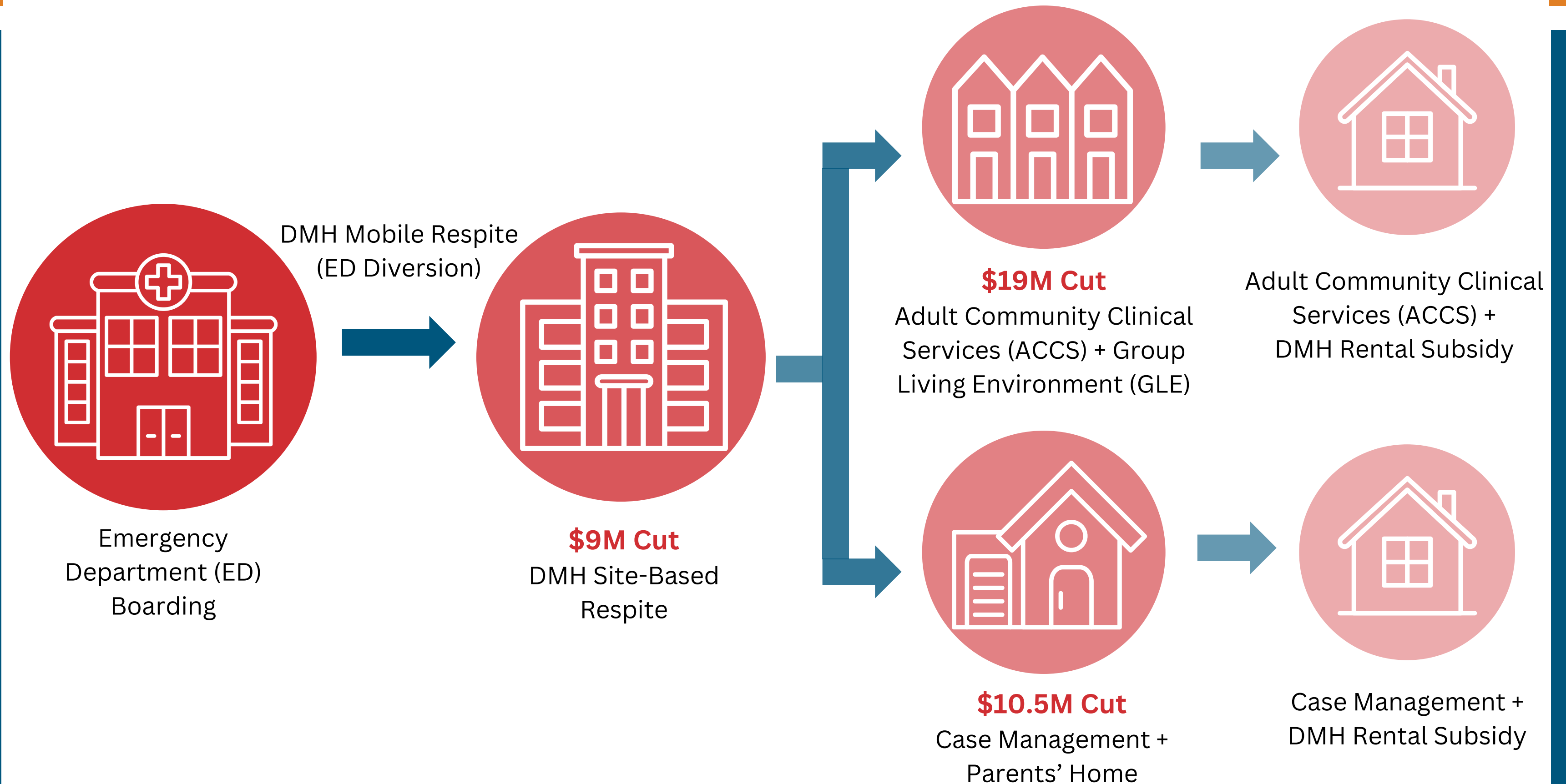
# Cuts to DMH Adult Core and Contracted Services

## Overview of DMH Adult Cuts in the Governor's Proposed Budget:

- \$9M cut to **Adult Respite** expansion
- \$19M cut to **Adult Community Clinical Services (ACCS)** expansion
- \$10.54M cut to decrease **DMH Adult Case Managers** by 50%
- \$14.2M cut to the **Jail Diversion Program**
- \$8.8M cut to close **Pocasset Mental Health Center**



# Possible Journeys Through the Mental Health System



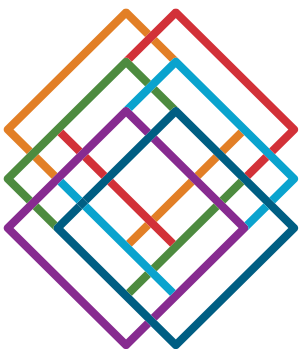
# DMH Adult Respite

## \$9M Cut to **Adult Respite** Expansion

DMH Adult Respite programs are currently operating **AT CAPACITY**

What are respite services and why are they important?

- Generally short-term services (2-4 months)
- Bridge or transitional services when an individual moves from one setting to another (Ex. Someone boarding in an emergency department transitioning to a supported, community setting)
- Provide assessments; interventions and supports to help people remain clinically stable (medication management to peer services); care coordination; skill building; etc.
- Can be mobile, site-based, or both



# DMH Adult Community Clinical Services (ACCS)

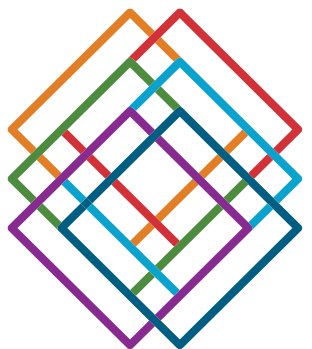
## \$19M Cut to ACCS Expansion

DMH ACCS programs are currently operating **AT CAPACITY**

What are ACCS and why is it important?

- ACCS serves 75% of all adults receiving a DMH community-based service
- ACCS provides vocational housing supports, and comprehensive clinical interventions, peer support, and family support to:
  - Facilitate engagement
  - Maximize symptom stabilization
  - Support functioning
  - Support self management
- Without additional ACCS capacity, some individuals would need to be served in an inpatient setting at **2.6x high cost per patient**

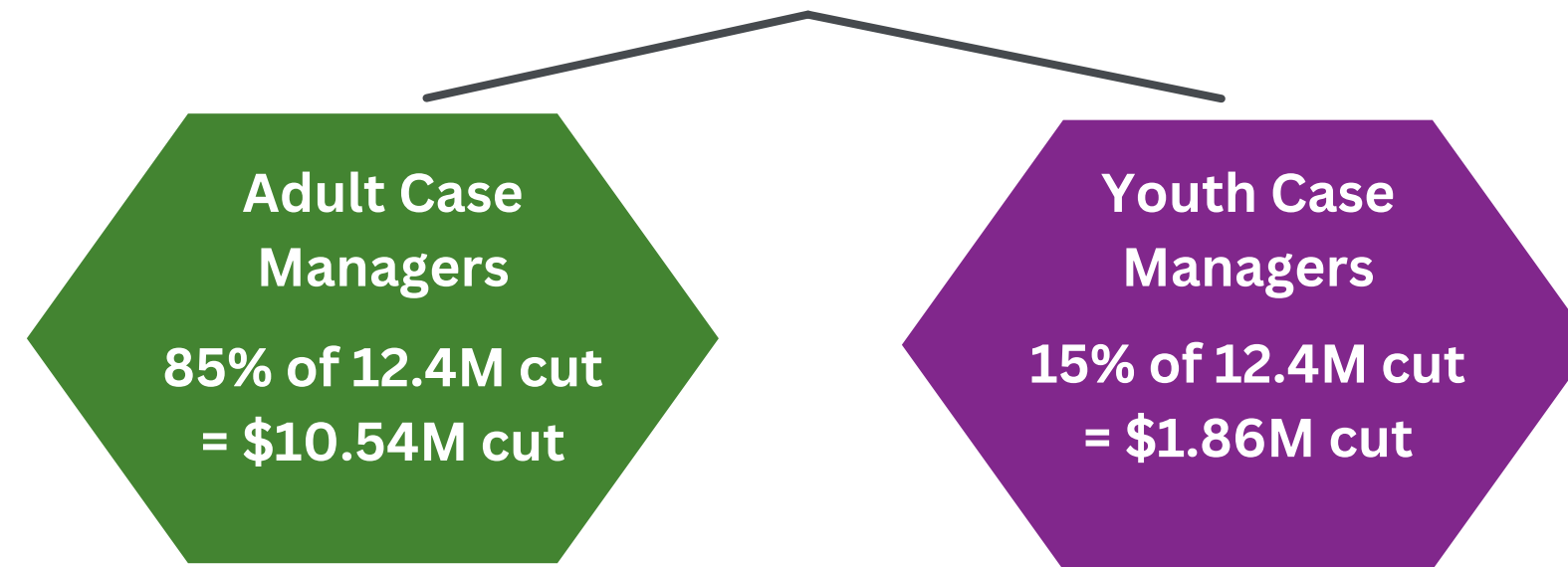
**With this cut, DMH will not be able to expand ACCS capacity in FY26 by 200 beds, putting strain on EDs, hospitals, and other institutions**



# DMH Case Managers

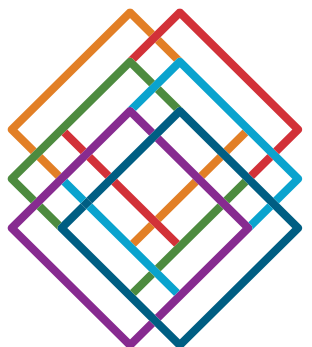
## \$12.4M Cut to Decrease DMH Case Managers by 50%

Case managers would be cut from 340 to 170 positions



DMH case manager are currently operating **AT CAPACITY**

- DMH case managers:
  - Assess people's needs
  - Plan and monitor DMH-funded services an individual receives
  - Provides other referrals and care coordination
  - Offer family/caregiver support
- These cuts will impact workforce diversity and cultural responsiveness of service delivery

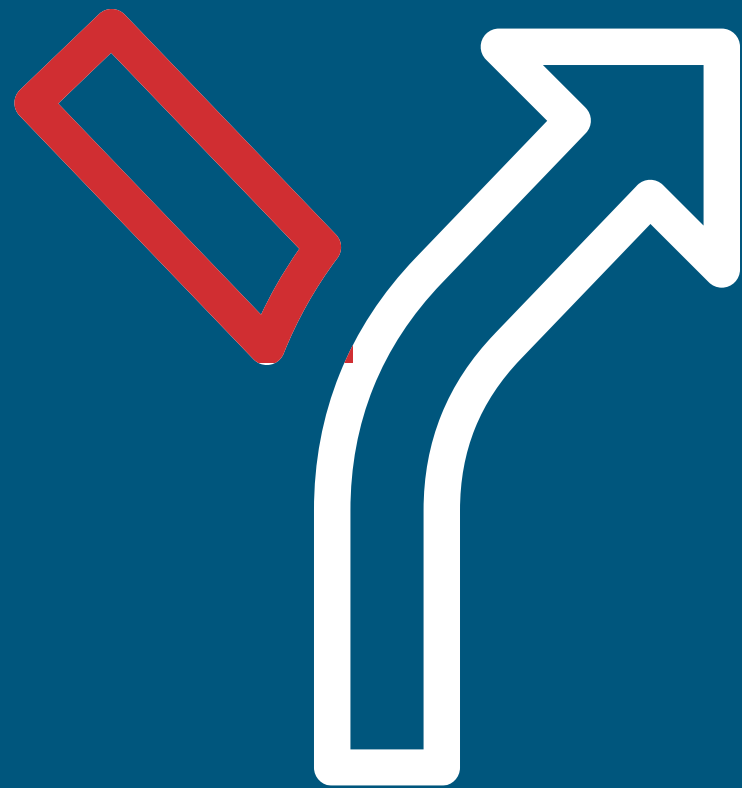
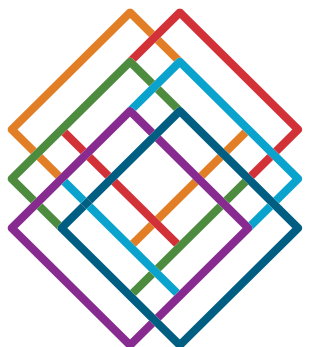


# DMH Jail & Arrest Diversion Grant Program

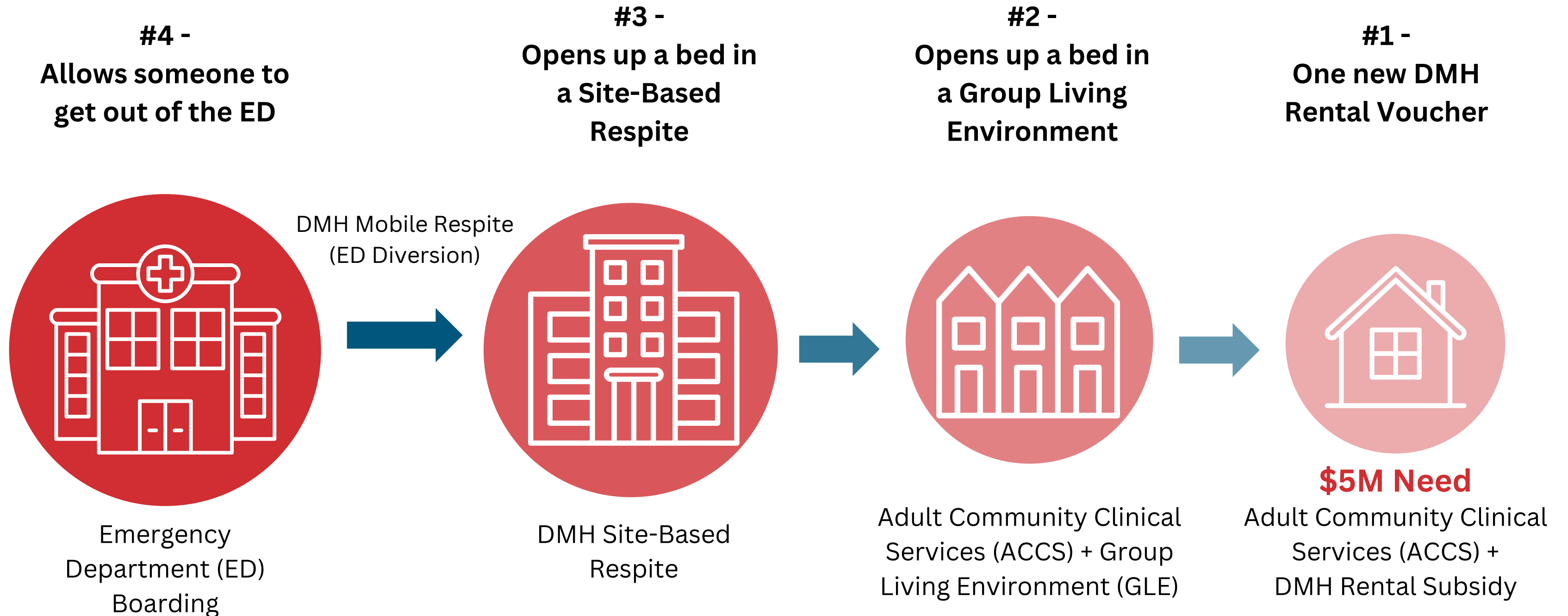
- It is estimated that **20%** of police calls for service are in response to someone in a mental health and/or substance use crisis, although local estimates are much higher
- In FY25, DMH distributed funds to **117 grantees**
- DMH also funds **9 regional TTACs**, Crisis Intervention and Co-Response Training and Technical Assistance Centers

In FY23, the program effectuated 2,327 arrest diversions and 3,659 ED diversions, saving nearly \$28M

- Every \$1 invested in the program saves the Commonwealth ~\$4
- The Governor's Budget has \$3.8M for the program. We seek an additional \$14.2M to cover the full annualized value of the requests received from police departments and TTACs in FY25 at **\$18M**.



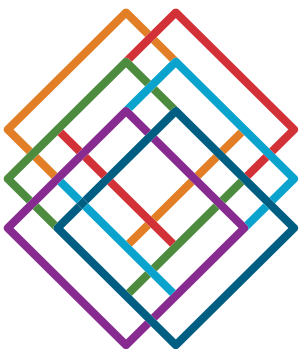
# DMH Rental Subsidy Program: Flow in the System



# DMH Rental Subsidy Program



- The increased demand for these vouchers stems from a confluence of the behavioral health crisis and housing crisis
- DMH clients pay **30% of their adjusted income** toward rent and get services through community providers
- We seek \$41,048M, a **\$5M** increase over FY25 to support ~300 additional vouchers, for a total of **2,877 vouchers** for DMH clients



# DMH Safe Havens



- Use a “**Housing First**” supportive housing model to provide an alternative to shelter placement to serve hard-to-reach individuals who are chronically unhoused
- Maintain the Governor’s **\$29.71M**, a \$3.1 M increase in funding over FY25 for the program
- Increase annualizes 3 new Safe Havens (26 beds) for a total of **18 Safe Havens (161 beds)**



# TAKE ACTION!



*Together, let's make a difference!*



## **CONTACT YOUR STATE REPRESENTATIVE AND SENATOR**

Scan the QR code to tell your legislator that you oppose the Governor's proposed cuts to the Department of Mental Health.



## **PARTICIPATE IN A DAY OF ACTION**

Join the Children's Mental Health Campaign for a day in action at the Massachusetts State House:

**Thursday, April 17, 2025**

**2:00 PM**

**State House, Room 437**



## **STAY INFORMED**

Join the CMHC and MAMH mailing lists!