



**TESTIMONY OF
PATRICK J. MONAHAN II
GENERAL COUNSEL AND VICE PRESIDENT,
PATIENT CARE REGULATION
CONNECTICUT HOSPITAL ASSOCIATION
BEFORE THE
APPROPRIATIONS COMMITTEE
Thursday, February 24, 2005**

**HB 6671, An Act Concerning The State Budget For The Biennium Ending
June 30, 2007, And Making Appropriations Therefor**

My name is Pat Monahan and I am General Counsel and Vice President, Patient Care Regulation of the Connecticut Hospital Association (CHA). I appreciate the opportunity to testify on behalf of CHA and its members concerning **HB 6671, An Act Concerning The State Budget For The Biennium Ending June 30, 2007, And Making Appropriations Therefor**.

CHA is supportive of The Department of Mental Health and Addiction Services' proposed expansion of certain mental health community initiatives and increases in supportive housing funding, as these proposals reflect in part some of the recommendations recently presented to the Governor by the Lieutenant Governor's Mental Health Cabinet. While CHA appreciates the Governor's attention to the need for increased funding to better serve the mental health needs of Connecticut's citizens, CHA is concerned that the Governor's proposed budget, including the proposals specific to DMHAS, do not go far enough. CHA is supportive of a more robust and comprehensive implementation of all of the Mental Health Cabinet's recommendations, and remains committed to working with the Appropriations Committee on exploring ways to commit more of the state's resources to secure adequate mental health care in this state.

For these reasons, CHA was disappointed to see that the Department of Mental Health and Addiction Services, in its budget, among other reductions to mental health and substance abuse services, is calling for the elimination of approximately \$1.6 million in funding over the next two years for partial hospitalization under the General Assistance Behavioral Health Program. At a time when the Governor, the Lieutenant Governor, and the stakeholders who participated in the development of the Mental Health Cabinet recommendations, all recognize the need to commit more resources to improve and increase care for individuals requiring mental health care services, it seems counterproductive to cut programs that are already providing valuable services for the mentally ill. CHA opposes this cut in funding and urges the Committee to maintain the state's support for these partial hospitalization programs.

Thank you for your consideration of our position.