January 22, 2019

Honorable Chairman Thomas Sherman  
Senate Health and Human Services Committee Room 101  
36 North State Street  
Concord, New Hampshire 03301

Dear Chairman Sherman:

My name is Ken Norton and I serve as the Executive Director of NAMI NH, the National Alliance on Mental Illness. I also have a family member with serious mental illness and co-occurring substance use disorder. On behalf of NAMI NH, I am here today to offer testimony strongly supporting SB 5 relative to Medicaid reimbursement rates for mental health and substance misuse services.

As you heard in the previous hearing on SB 11, timely access to mental health treatment continues to be a significant challenge for people in our state. While people in a mental health crisis being boarded in emergency departments is the most visible symptom of this, less visible and yet a likely contributing factor to the emergency department boarding crisis, is the difficulty people have accessing timely outpatient treatment and/or a provider that accepts Medicaid.

One of the most significant factors impacting access to mental health care in New Hampshire has been workforce shortages across all discipline areas. The chart below provided by the NH Community Behavioral Health Association tracks the number of vacancies at community mental health centers from January of 2016 to March of 2018 at which point there were 240 vacancies, the majority of which were clinical positions. Although low unemployment rates and other factors contribute to this, low Medicaid reimbursement rates are a major factor in workforce shortages. Rates have not been permanently

*Figure 1*

**Total Vacancies and Total Clinical Vacancies for All Centers**  
January CY2016 - March CY2018

*Figure 2:* Recruitment of prescribers – physicians and advanced practice registered nurses – is a consistent challenge for the ten centers.
increased since before 2006. This, in turn, results in a workforce that is not sustainable with high vacancy rates and high turnover. High turnover is particularly problematic for our most severely and chronically ill individuals who need the stability of therapists, prescribers, and other key staff who know and recognize the course of their symptoms and illness to assist them in achieving stability and in their recovery process.

On behalf of NAMI NH, we would like to thank Senator Rosenwald for sponsoring this bill, and ask you to vote it as ought to pass.

Respect fully submitted,

Kenneth Norton, LICSW
Executive Director