

## 2020 BOARD OF TRUSTEES

### BOARD OFFICERS

Thomas Quatroche, Jr., PhD • Buffalo  
Chair

Bruce Flanz • Queens  
Chair-Elect

Michael Spicer • Yonkers  
Secretary

Jose Acevedo, MD • Geneva  
Treasurer

Richard Murphy • Oceanside  
Immediate Past Chair

Steven Corwin, MD • New York  
Past Chair

### BOARD MEMBERS

#### Former Chairs

Michael Dowling • New Hyde Park

Steven Goldstein • Rochester

Herbert Pardes, MD • New York

#### Class of 2020

Alexander Balko • Brooklyn

Kimberly Boynton • Syracuse

Susan Fox • White Plains

Sylvia Getman • Saranac Lake

Allegra Jaros • Buffalo

Laurence Kelly • Gloversville

Mary Leahy, MD • Suffern

Sharon Norton Remmer • Patchogue

Wayne Riley, MD • Brooklyn

Caryn Schwab • Queens

Mark Solazzo • New Hyde Park

Mike Stapleton • Canandaigua

Mark Sullivan • Buffalo

Vincent Verdile, MD • Albany

#### Class of 2021

Victor Ayala • Brooklyn

Thomas Carman • Watertown

John Carrigg • Binghamton

Evan Flatow, MD • New York

Kenneth Gibbs • Brooklyn

Carol Gomes • Stony Brook

Kenneth Kaushansky, MD • Stony Brook

John Remillard • Elizabethtown

#### Class of 2022

LaRay Brown • Brooklyn

Jeannie Cross • Saranac Lake

Joan Cusack-McGuirk • Newburgh

Alan Guerci, MD • Rockville Centre

Steven Kelley • Ellenville

Mary LaRowe • Dunkirk

Daniel Messina, PhD • Staten Island

Kenneth Roberts • Port Jefferson

Israel Rocha • Queens

Dierdra Sorrell • Star Lake

Robert Spolzino, JD • New Hyde Park

Hugh Thomas, Esq. • Rochester

#### Allied Association Chairs

Robert Chaloner • Southampton

Michelle LeBeau • Plattsburgh

Dustin Riccio, MD • Newark

Charles Urfaub • Lewiston

October 26, 2020

Ann Marie T. Sullivan, MD  
Commissioner  
New York State Office of Mental Health  
44 Holland Avenue  
Albany, NY 12229

Arlene González-Sánchez  
Commissioner  
New York State Office of Addiction Services and Support  
1450 Western Avenue  
Albany, New York, 12203-3526

Dear Commissioners Sullivan and González-Sánchez:

The Healthcare Association of New York State, on behalf of our member nonprofit and public hospitals, nursing homes, home health agencies and other healthcare providers, appreciates the opportunity to comment on the potential creation of a new, single, integrated behavioral health agency.

Our members provide services that span the behavioral healthcare continuum, including ambulatory, inpatient and community-based services. Many of them are also leaders in transforming mental health and substance use disorder care, from prevention and treatment to recovery.

HANYS supports the creation of a unified state behavioral health agency.

The New York State Office of Mental Health and Office of Addiction Services and Support have made significant strides to work together to provide an integrated behavioral healthcare model. However, separation between the two agencies results in an artificial distinction in behavioral health, with unintended consequences on individuals who experience mental illness and substance use disorders, their loved ones and the providers that serve them.

If properly constructed, a single behavioral health state agency could offer efficiencies and improved quality of care that benefits both patients and providers.

The co-occurrence of mental illness and substance use disorders is common and recognized. Approximately half of those who experience mental illness will also experience a substance use disorder, and vice versa.<sup>1</sup> Because services for mental

<sup>1</sup> [Connection Between Substance Use Disorders and Mental Illness](#), National Institute on Drug Abuse, 2020

illness and substance use disorder are often separate, individuals who are already struggling under the weight of these diseases are also confronted with accessing their care through multiple channels; resulting in unnecessary, significant obstacles to recovery.

Further, behavioral health providers are confronted with navigating disparate and duplicative policies and guidelines, which cause additional disruptions to patient care and the behavioral healthcare system. Creation of an integrated behavioral health agency would remove obstacles to care for patients and allow behavioral health providers to redirect limited resources away from administrative tasks to patient care.

As OMH and OASAS carve a path forward, HANYS offers the following considerations:

- ongoing investment in care integration, with particular focus on individuals who are complex in their care needs;
- equal emphasis on prevention, treatment and recovery programing;
- strengthened coordination of community behavioral health resources;
- the need for reimbursement rates that allow providers to cover the costs of providing these vital services;
- increased cooperation from and increased oversight over payers; and
- a clear vision from the state to streamline duplicative processes and provide regulatory relief and flexibility.

HANYS appreciates the opportunity to provide feedback and is here to assist OMH and OASAS as this process moves forward. If you have questions regarding our comments, please contact me at (518) 431-7730 or [jgold@hanys.org](mailto:jgold@hanys.org) or Sarah DuVall, director, behavioral health, at (518) 431-7769 or [sduvall@hanys.org](mailto:sduvall@hanys.org).

Sincerely,



Jeffrey Gold  
Senior Vice President and Special Counsel, Managed Care and Insurance