



DATE: February 16, 2021
TO: Human Services Committee
FROM: Ben Shaiken, Manager of Advocacy & Public Policy, The Alliance
RE: S.B. 764 An Act Concerning Medicaid Providers

Good afternoon Senator Moore, Representative Abercrombie, Senator Berthel, Representative Case and members of the Human Services Committee.

My name is Ben Shaiken, Manager of Advocacy & Public Policy at the CT Community Nonprofit Alliance (The Alliance). The Alliance is the statewide association of community nonprofits. Community nonprofits provide essential services in every city and town in Connecticut, serving half a million people in need and employing 117,000 people across the State. They are an important part of what makes Connecticut a great place to live and work and an important piece of our economy.

Thank you for the opportunity to provide testimony today in support of S.B. 764 An Act Concerning Medicaid Providers. The Alliance supports two portions of S.B. 764:

- Section 1, which removes a harmful proposal regarding Methadone Maintenance providers from statute, and
- Section 4, which would allow Peer Support Services to be a billable service in Connecticut's Medicaid program.

Section 1 – Methadone Maintenance Providers

In 2019, the budget implementer included language directing DSS to create performance measures for Methadone providers. This language – which was never vetted through a public hearing process – set unrealistic deadlines for performance measures to be developed and go into effect. Ultimately, this language, currently in law, would penalize providers with rate cuts if the measures were not met. After the budget passed, Methadone providers immediately began working with DSS with great concern, and ultimately, DSS decided not to move forward with the proposal in statute just as COVID-19 hit.

While the deadlines set in the language proposed to be deleted have passed, if it were implemented, **lifesaving Methadone treatment would be the only service in the entire Medicaid program in which providers' rates would be cut** for not meeting performance metrics, with no benefits for improving patient outcomes.

Methadone is an FDA-approved medication used to treat Opioid Use Disorder. Connecticut's Methadone clinics are contracted with the State and serve thousands of patients recovering from heroin and other opioid addiction. Of the FDA-approved medications to assist in treating opioid addiction, Methadone is the oldest and has been available since 1964. In study after study, Methadone is shown to

reduce illicit opioid use and improve retention in opioid treatment. Simply put: Methadone and other FDA-approved Medication Assisted Treatments save lives every single day.

This is not only important to providers, but the people they serve who are struggling in the midst of an opioid crisis exacerbated by COVID-19. In the United States, methadone is heavily regulated by the federal and state government. It is offered only through specialized methadone treatment programs that provide psychosocial support as well as close patient monitoring. Connecticut's Methadone providers have continued to provide treatment through a deadly pandemic, helping thousands of people struggling with opioid addiction maintain their recovery.

We urge the Committee to support Section 1 and repeal of this harmful language.

Section 4 – Peer Support Services

Section 4 of S.B. 764 would **allow Peer Support Specialists to bill Medicaid** for their services. Peer Support services are recovery-focused services provided by specialists who have experience recovering from mental health or substance abuse conditions. They are a crucial part of behavioral health treatment, and a growing body of **evidence and experience in Connecticut show their services to be effective** at treating mental health conditions and helping people recover from addiction.

Connecticut does not allow peer support services to be billed through Medicaid, even though many other states do.

Please support adding this program to Connecticut's Medicaid system. Doing so would dramatically broaden the availability of Peer Support services to people in need of behavioral health services.

Please note: The Alliance supports the language as it is drafted and urges the committee not to add restrictions for these services to be offered only "within available appropriations." Expanding access to care means appropriating adequate funds necessary to pay for the cost of services needed by Connecticut's residents. Directing a new service to act "within available appropriations" means funds would likely need to move from an existing service. In a Medicaid program where providers already lose money across almost every behavioral health billing code, this would be unacceptable.

Please also support Section 4 of S.B. 764.