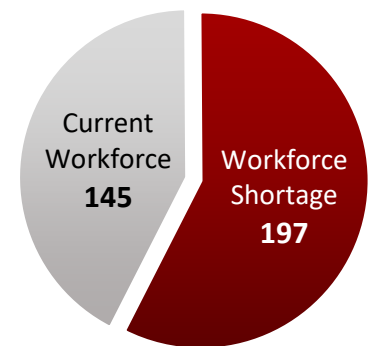


Increasing New York's Behavioral Health Workforce Increases Access to Care and Decreases Avoidable Healthcare Costs

In a 2013 Report to Congress, the Substance Abuse and Mental Health Services Administration identified worker shortages as a key challenge to meet the nationwide demand for behavioral health services. New York needs an infusion of qualified behavioral health providers to drive down avoidable hospitalization costs, reduce recidivism with justice-involved clients, address the opioid epidemic and increase access to timely, evidence-based care.

Even though New York has more behavioral health care professionals than the U.S. average, **New York would need to more than double the current number of full-time mental health and addiction treatment professionals** to meet the demand in its designated behavioral health care shortage areas.¹

- New York currently has 162 Mental Health Care Health Professional Shortage Areas (HPSAs).²
- **22 percent of the total population of New York** resides in a HPSA (over 4 million people). **30 percent of the total population in New York City** resides in a HPSA.³
- It is estimated 197 additional full-time behavioral health staff are needed in New York to properly serve the population.



Investment in Behavioral Health Workforce Increases Access to Care, Decreases Unnecessary Hospitalizations

In 2015, about **1.6 million New Yorkers** were diagnosed with a **Serious Mental Illness (SMI)**.² When these individuals cannot get the behavioral health services they need in their community due to an overburdened and understaffed system, they go to the hospital. In 2014, hospitalizations costs in New York attributed to Serious Mental Illness (SMI) exceeded \$1.1 billion.³

- Over 20 percent of hospitalized adults in New York state are patients with a principal diagnosis of schizophrenia. That is **almost double the national average**.³
- Average **hospital stays for SMI in New York are significantly longer than the rest of the nation**, with duration of stay for a principal diagnosis of schizophrenia averaging more than 19 days in New York, which is **8 days longer than the national average**. Longer hospital stays are often due to a lack of or waitlist for community-based services for continued treatment.

The Bottom Line: We urge State Legislators to support cost of living adjustments and the extension of the 3.25% wage increase to direct care and clinical staff which would allow for the recruitment, retention and staffing of needed behavioral health positions and lower ancillary costs associated with not receiving treatment, such as avoidable hospitalizations.

¹ Heun-Johnson et al. (2018). The cost of mental illness: New York facts and figures. USC Schaeffer Center. Available: https://www.bhecon.org/wp-content/uploads/2018/01/NY-Chartbook-2018_FINAL.pdf

² Kaiser Family Foundation. (2016). Mental Health Care Health Professional Shortage Areas (HPSAs). Available: <https://www.kff.org/other/state-indicator/mental-health-care-health-professional-shortage-areas-hpsas/?currentTimeframe=0&sortModel=%7B%22colId%22:%22Location%22,%22sort%22:%22asc%22%7D>

³ Heun-Johnson et al. (2018). The cost of mental illness: New York facts and figures. USC Schaeffer Center. Available: https://www.bhecon.org/wp-content/uploads/2018/01/NY-Chartbook-2018_FINAL.pdf