

The **NYS Coalition for Children's Behavioral Health (CCBH)**, the **Council of Family and Child Caring Agencies (COFCCA)**, the **Collaborative for Children & Families (CCF)** and the **Children's Health Home of Upstate New York (CHHUNY)** collectively and strongly support investments in the human services workforce to ensure that our programs serving children are able to meet community needs, retain their hard-working staff, and enable staff to grow in their careers as they work alongside children and families to achieve families' goals.



**NYS Coalition**  
for Children's Behavioral Health



**Children's Health Home of Upstate New York**  
Family Driven Care Management Services

# INVEST IN THE HUMAN SERVICES WORKFORCE



## 3.2% COLA

The Human Services cost-of-living adjustment (COLA) is a vitally important, necessary annual investment ensuring that New York's communities have a thriving network of supports and services. These programs depend on an annual COLA to keep up with the ever-increasing costs of delivering services and paying staff adequate wages for their critical and often difficult work. Programs continually struggle with workforce turnover and vacancy rates, with some human services programs' turnover rates above 40%.

After many years of struggling without any increases to counter inflation, we appreciate the state's recent COLA investments. Especially given the historical underfunding, this year's COLA *must* reflect the actual increased costs programs are facing, and the **human services sector is speaking with one voice** for a 3.2% COLA, tied to the CPI-U (July 2023). Even with this progress, several human services programs have never been included in the COLA despite their critical work in communities across New York. To support all human services programs equitably, we urge that the COLA include all human services programs, including community-based prevention services programs, Health Homes Serving Children Care Management Programs, and community and residential domestic violence programs, as in [Senate Bill S7793](#).

**Dedicate funds from the Office of Strategic Workforce Development's Health Care Workforce Investment (HWI) to support the future behavioral health workforce.** The HWI is intended to "strengthen the pipeline of diverse medical professionals and support individuals looking to enter and grow in the health care and direct care fields," which is as important in behavioral health and child welfare as elsewhere. We urge the state to invest in this workforce pipeline, from high school education initiatives through scholarships, internships, loan forgiveness, professional development, and support for returning to school for an advanced degree, credential or privilege.

**Launch a human services workforce recruitment campaign.** Create a marketing recruitment campaign for human services workers across the full spectrum of child and family services, including those under OMH, OCFS, OPWDD, OASAS, and DOH. Rather than siloing workforce marketing efforts within individual state agencies, we need a coordinated, cross-systems effort to help improve access to services throughout the whole system.

**Add \$1M for the OMH Community Mental Health Loan Repayment Program for all licensed mental health practitioners.**

# STRENGTHEN ACCESS TO CARE



**Invest \$195 million to implement rate enhancements and reforms across the children's continuum of care –** including but not limited to Article 31, Article 32 (822), CFTSS, and HCBS programs – to create a sustainable children's behavioral health system that enhances quality and access to services across the state. See additional details from the Healthy Minds, Healthy Kids rate study in the attached sheet.

**Save children and families' access to the support they need by excluding the Health Home Serving Children (HHSC) program from the Health Homes Restructuring cost savings proposal.** Over 30,000 children and adolescents would be left without necessary supports if the Restructuring of Health Homes \$125 million cost savings is enacted. **Health Homes primarily serve children with serious mental health conditions,** in addition to children with developmental disabilities, medical complexities, and social care needs; and HHSC is the sole pathway to accessing the array of Home and Community-Based Services (HBSC) that help some of the most high-needs children stay in their communities. Yet HHSC continue to be excluded from funding opportunities, COLAs, and rate enhancements. Despite a commitment to hold HHSC harmless in last year's Health Home program cuts, administrative actions taken by DOH have caused a \$20 million cut to the program this year, which has already led to agency closures and more underserved children. **If the additional proposed cuts are enacted, HHSC are at risk of being completely decimated, further limiting the ability of child welfare and mental health providers to provide services to high-needs children and their families.** To impose cuts of this magnitude with no plan to address the thousands of individuals who would lose services, and the impact this would have on the Children's Waiver, would have catastrophic consequences and run counter to the Governor's commitment to supporting youth with mental health needs.

# BUILD FOR THE FUTURE OF CHILDREN'S BEHAVIORAL HEALTH

**Create a \$25M capital fund for children's behavioral health providers.** Children's providers have a wide range of capital needs, from health and recreation facilities, climate smart upgrades, and safety systems, to updating IT infrastructure for telehealth, electronic health record integration, and other needs.

