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Mayor Increases Budget for ThriveNYC Initiatives, Promoting Access to Care & Expanding Current Programs

In November 2015 the de Blasio Administration published “ThriveNYC,” a plan to increase access to behavioral health care in New York City.¹ The four-year budget (2016 through 2019) for ThriveNYC totals \$818 million, \$485 million of which was included in last June’s 2016 adopted budget and \$333 million of which was added in the preliminary budget for 2017.² The funding supports 54 initiatives spread among 11 agencies. Three-quarters (\$633 million) of the \$818 million commitment is funded with city funds.

The ThriveNYC budget both increases funding in areas that the city has previously supported and adds new categories of spending. The plan also includes policy-based initiatives that are not connected to funding—such as obtaining commitments from hospitals to screen for maternal depression—and initiatives that will receive funding that does not flow through the city budget.³

The ThriveNYC plan would increase funding for the provision of behavioral health services for targeted populations that the city has previously funded such as: school children, foster care children and families, the homeless, and those involved with the criminal justice system. The new categories of spending introduced in the preliminary budget aim to increase access to behavioral health care for the general public by supporting and adding to the therapeutic workforce and by increasing the public’s awareness of the availability of these services. The plan would fund more social workers, train peer specialists, and provide guidance to community-based organizations on behavioral health issues impacting their clients.

Existing City Support for Behavioral Health Care.

Behavioral health care encompasses a range of services including treatment (psychotherapy, medication, hospitalization); support services (case management,

clubhouses, vocational training); and permanent and temporary housing programs for people with mental illness and substance use disorders (SUD). These services are provided in health centers, hospitals, private practices, community-based organizations, schools, and other spaces. Both public and private health insurers have historically provided limited reimbursement for mental health and SUD treatment and support. Governments typically provide additional direct funding to behavioral health providers that serve vulnerable and low-income populations because reimbursements for these providers are especially low.⁴

New York City government has historically supported the behavioral health care system by both contracting with organizations that provide behavioral health services to the general public and by funding the delivery of services to targeted populations served by public entities, including public schools, the foster care system, the criminal justice system, senior centers, and homeless shelters.⁵

The Department of Health and Mental Hygiene (DOHMH) administers the contracts for behavioral health services and directly provides a small amount of behavioral health services for the general public and targeted populations. Historically DOHMH has also funded some small programs that promote behavioral health care treatment services—including those that connect seriously mentally ill patients with providers and violence prevention programs, but these make up a minor share of the department’s budget. The Department of Education, Administration for Children’s Services, Department of Homeless Services, and Human Resources Administration provide behavioral health services to the students, foster care families, homeless shelter residents, and public assistance beneficiaries they



What Programs Does ThriveNYC Fund?

Dollars in thousands

Programs	Baseline 2015 Funding	ThriveNYC Initiatives				Total New Funding (4 Years)
		Additional Funding				
		2015-2016	2017	2018	2019	
Behavioral Health Care Contracts for General Population	\$166,036	\$0	\$0	\$0	\$0	\$0
Direct and Contracted Provision of Behavioral Health Care & Provider Support for Specific Populations	576,915	150,796	160,309	164,327	166,213	641,645
Court-involved	49,160	88,061	44,137	41,388	42,570	216,156
Crime & Domestic Violence Victims	2,535	7,061	13,179	18,038	18,038	56,316
Elderly	1,930	2,810	3,200	3,200	3,200	12,410
Foster Care Children & Families	64,666	253	4,399	3,605	3,605	11,862
Homeless	8,895	31,310	53,405	53,192	53,442	191,349
School Children	449,729	21,301	41,429	44,344	44,798	151,872
Veterans	0	0	560	560	560	1,680
Supportive Housing	42,575	3,000	3,000	3,000	3,000	12,000
SUD Treatment & Workforce Support	124,165	2,442	2,629	2,719	2,719	10,509
Administrative Support for the Behavioral Health Care System & Assistance with Locating Care	20,475	1,583	6,944	5,566	5,446	19,539
Workforce Training & Expansion	0	2,107	22,164	37,237	49,824	111,332
Media Campaigns	0	5,590	3,075	3,075	3,075	14,815
Research	861	1,311	2,013	2,294	2,294	7,912
All Programs	\$931,027	\$166,829	\$200,134	\$218,218	\$232,571	\$817,752

SOURCE: Mayor's Office of Management and Budget

NOTES: Agencies funded are the Department of Health and Mental Hygiene, Department of Education, Department of Homeless Services, Department of Correction, Human Resources Administration, New York Police Department, Department for the Aging, Department of Probation, and the Mayor's Office of Criminal Justice. All 2019 funding will continue in 2020.

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respectively serve. The city's total behavioral health services budget has been largely funded by state and federal funds and has remained relatively constant over the last decade.

The ThriveNYC Budget. The ThriveNYC initiatives would both increase funding for behavioral health services for targeted populations and fund new programs to increase access to behavioral health services for the general public. As mentioned above, \$333 million of the ThriveNYC budget is newly included in the 2017 preliminary budget; this money funds some of the increased spending on behavioral health services in schools, homeless shelters, the foster care system, and all of the initiatives to increase access to behavioral health care for the general public. The ThriveNYC plan does not significantly affect the city's existing—largely state and federally funded—contracts with behavioral health providers, which advocates for behavioral health services and health care providers have noted in critiquing the new plan.

Funding Increases for Behavioral Health Care. The majority of the ThriveNYC budget (\$642 million through 2019) would fund behavioral health services for targeted populations,

most of which received some support in the past; over three-quarters of these funds are city dollars. The plan vastly increases funding for behavioral health services for people involved with the criminal justice system (\$216 million), for the homeless within shelters and on the street (\$191 million), and for public school students (\$152 million).⁶

The plan also provides funding increases for behavioral health services for the elderly (\$12 million) and families involved with the foster care system (\$12 million). The majority of this portion of the ThriveNYC budget simply funds more behavioral health professionals in these existing settings and expands support programs already in place such as visiting mothers of newborns (\$4 million) and visiting the elderly in senior centers (\$5 million). However, the budget also includes some completely new programs for these populations like art therapy and other programs for incarcerated youth (\$13 million) and social-emotional learning for children in universal pre-k (\$26 million) and the foster care system (\$7 million).

New Funding to Increase Access to Behavioral Health Care. In addition, ThriveNYC funds would target behavioral

How Are the ThriveNYC Initiatives Funded?

Dollars in thousands

	2015	2016	2017	2018	2019	All Years
Total Funding	\$34,890	\$131,939	\$200,134	\$218,218	\$232,571	\$817,752
City Funding	21,166	83,506	156,509	175,302	196,545	633,028
Percent City	60.7%	63.3%	78.2%	80.3%	84.5%	77.4%

SOURCE: Mayor's Office of Management and Budget

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Endnotes

¹Behavioral health care here is defined as treatment and support services for people with mental illness and substance use disorders and services to prevent these illnesses.

²All budget totals are four-year totals (2016 through 2019) and all years are New York City fiscal years, unless otherwise noted.

³IBO's four-year budget total of \$818 million reflects only those funds that flow through the city budget, which is why this total differs from the \$850 million figure published in the de Blasio Administration's ThriveNYC report. Initiatives funded outside of the

city budget include: the \$24 million Connections to Care program, which is funded by federal grants and private donations to the Mayor's Fund; and some treatment for the homeless in shelters and by mobile treatment teams, which will be funded by Medicaid reimbursements. Note that Medicaid reimbursement is dependent on successful enrollment of these individuals in Medicaid, if they are not already enrolled.

⁴Low reimbursement can be attributed to a lack of health insurance coverage for these services, low reimbursement rates for those services that are covered, the tendency of patients to choose not to use health insurance to pay for stigmatized behavioral health issues, as well as a number of other factors.

⁵Again, the behavioral health care system here is defined as providers of treatment and support for people with mental illness and substance use disorders. Support for people with developmental disabilities (including the Early Intervention program) is not included because the ThriveNYC plan does not significantly impact such programs.

⁶Note that the \$216 million figure includes initiatives coming out of the Mayor's Task Force on Behavioral Health and the Criminal Justice System that were initially funded in 2015. The initiatives are funded with all city dollars except for \$2.9 million in state funds and \$40 million in asset forfeiture funds from the Manhattan District Attorney.

health services for two populations that have not received attention in the past: veterans and crime victims. While the city has previously provided some support services for domestic violence victims, ThriveNYC funds advocates for victims of all crimes—including domestic violence—to provide immediate care after crimes occur (\$56 million). The plan also provides modest funding to expand behavioral health services for veterans (\$1.7 million).

The remaining ThriveNYC budget (\$176 million through 2019) consists of new categories of spending, virtually all of which are funded with city dollars, designed to increase the public's access to behavioral health care. These initiatives would expand and train the behavioral health care workforce (\$111 million through 2019), connect the public with this workforce (\$20 million), and coordinate media campaigns to increase awareness of mental illness and SUD and to decrease the stigma associated with these conditions (\$15 million). Specifically, the plan aims to hire 390 masters-level social work graduates to do their training in areas of high need around the city, train 250,000 people in mental health first aid, create a hotline and an online platform for people to find behavioral health care professionals, and provide information to community-based organizations on behavioral health. To inform these and future efforts the plan also funds research on mental illness and substance use disorder prevalence and treatment practices (\$8 million). The plan also funds efforts to increase the use of SUD treatment medications (naloxone and buprenorphine) by directly paying for them and training professionals on their use (\$11 million).

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