



# Behavioral Health Road Map: 2024 and Beyond

Prepared For: Mayor-Elect Cherelle L. Parker

% Transition 2023 Leadership & Subcommittee on  
Health & Human Services

1835 Market St. Philadelphia, PA 19103

December 11, 2023



Mayor-Elect Cherrille L. Parker

% Transition 2023 Leadership & Subcommittee on Health & Human Services

1835 Market St. Philadelphia, PA 19103

December 11, 2023

Subject: A Strong Behavioral Health Agenda for Philadelphia

Dear Mayor-elect Parker,

On behalf of the Scattergood Foundation, The Alliance of Community Service Providers, and Children's First, we extend our warmest congratulations on your recent electoral victory. Your leadership promises a transformative era for Philadelphia, particularly in addressing the complexities of behavioral health.

In line with your vision for a "safer, cleaner, and greener City," we propose a partnership aimed at enhancing Philadelphia's behavioral health framework. Our organizations are at the forefront of this field, and together, we have developed an analysis and recommendations that address the city's pressing behavioral healthcare needs. Our combined approach highlights the urgency of confronting the multifaceted challenges surrounding behavioral health.

All Philadelphians are impacted by the current behavioral health crisis. Nearly 790,000 residents, including approximately 290,000 children and adolescents, are eligible for Medicaid and can seek services from community-based providers, funded by the Department of Behavioral Health and Intellectual disAbility Services (DBHIDS) and Community Behavioral Health (CBH). Effective policymaking and coordination of services in this realm necessitates a focus on youth needs, behavioral health equity, and the social determinants affecting mental health.

We hope that the recommendations provided in this memo are a strong starting point as you consider the path forward. We are committed to assisting your administration in improving behavioral health services for Philadelphians and establishing the City as a benchmark in addressing these issues statewide. We believe that fostering collaboration among city agencies, community organizations, policy researchers, officials in Harrisburg, and community members is key to enacting meaningful change and expanding services.

We are eager to engage with your administration and offer insights as a resource. Together, we can make significant strides in advancing the well-being of all Philadelphians.

Thank you for considering our recommendations and we look forward to a collaborative effort under your leadership.

Sincerely,

**Cherie Brummans**

CEO and Executive Director | The Alliance  
of Community Service Providers  
P: (267) 385-7440  
E: [Cherie@thealliancecsp.org](mailto:Cherie@thealliancecsp.org)

**Joe Pyle, MA**

President | Scattergood Foundation  
E: [Jpyle@scattergoodfoundation.org](mailto:Jpyle@scattergoodfoundation.org)

**Donna Cooper, MPA, MIM**

Executive Director | Children's First  
P: (215) 563-5848 ext. 301  
E: [Donnac@childrenfirstpa.org](mailto:Donnac@childrenfirstpa.org)

# A Strong Behavioral Health Agenda for Philadelphia

**Upon taking office in January, the next mayor of Philadelphia will have any number of policy priorities, including public safety, education, the local economy, and social and racial equity. There's another vitally important topic that needs to be high on the list—the behavioral health and wellbeing of all Philadelphians.**

The mayor must move quickly and decisively to set a strong behavioral health agenda, a highly visible, clearly enunciated, and broadly understood set of evidence-based goals and standards for the next four years.

Bold leadership is needed to generate innovative and lasting change, with a focus on the needs of the city's children and adolescents; behavioral health equity; and the social determinants of mental health. This agenda should help the city excel in delivering quality coordinated and accessible health services—thereby improving the lives of those in need of help and the wellness of the entire community.

Making a difference won't be easy. The system is complex. Roughly 81% of the nearly \$1.8 billion in funding for the city's Department of Behavioral Health and Intellectual disability Services (DBHIDS)



comes from the federal government via the state, not from local taxpayers, and is designated for the provision of clinical behavioral health treatment. Most of the rest, \$314 million, consists of targeted state and federal grants. Only \$26 million, slightly more than 1% of the total, comes from the city's general fund. Operations are simply not under local control in the same way that the police or streets departments are.

*But the stakes are too high for the next mayor not to take an assertive stance on collective healing.*

Nearly 790,000 Philadelphia residents, including roughly 290,000 children and adolescents, rely on the services offered and managed by DBHIDS and Community Behavioral Health (CBH), the Medicaid managed care organization contracted by the city. The quality of these services makes a huge difference for these individuals, their loved ones, and the entire city. Intentional collaboration between service providers, CBH, DBHIDS, the school system, and various city departments is essential if those in need are to receive the quality of care that can improve their lives. That can only happen with pointed and accessible leadership, beginning in the mayor's office.

In some cases, behavioral health issues are literally matters of life and death. If recipients don't get the necessary attention in a timely and effective manner, the results can include drug overdose and suicide. Even when the consequences are less immediately dire, negative impacts can still be felt throughout the community.

*To put it bluntly: If behavioral health services fall short, the success of other policy initiatives will be at risk as well.*



***Philadelphia's high poverty rate is one of the city's defining characteristics, and there's no doubt that poverty can negatively impact mental health. Residents experiencing poverty struggle constantly with high levels of stress, as they try to make ends meet, feed their families, cope with inadequate housing, deal with exposure to violence, and maintain their physical well-being.***

The financial stakes are high as well. As mentioned earlier, DBHIDS is slated to spend close to \$1.8 billion in the current fiscal year, more than the city spends for any other function. This makes the department arguably the largest health and human services agency in the region; purely from an economic viewpoint, its footprint is huge. A study done in 2015, when the department's budget was quite a bit smaller, put the overall economic impact of the agency at nearly \$4 billion. That figure is surely much higher now.

## What needs to be done?

The mayor must rely on a DBHIDS commissioner who understands the system and is committed to making it stronger and more effective, not just to maintaining the status quo. Given the size of the budget and the stakes for Philadelphians, the mayor and commissioner must work together to develop an action plan with a clear vision and goals, a 100-day plan for the most urgent improvements, and quarterly reporting on key milestones. An early mayoral summit would be one way to jumpstart such an effort and signal its importance. It will be the mayor's role to create a sense of urgency and accountability to orient the system for change.



Improving how we approach children and youth is key. The Philadelphia behavioral health system offers a robust continuum of community-based services designed to meet children and families in school, at home, and in their neighborhoods. Philadelphia has done tremendous work in this area, with several child-serving mobile teams, crisis mobile intervention services, and a children's crisis response center. However, the system is designed only to react and respond to urgent mental health needs. A Children First report found that Philly kids wait an average of 27 days to begin outpatient treatment.



The next mayor must consider solutions that expand upon the existing system to address access challenges as well as intervene earlier and reach children before their mental health needs escalate. Philadelphia's children deserve a system that reaches every child and provides tailored, culturally relevant supports and services regardless of race, ethnicity, age, neighborhood, insurance status, or citizenship. To that end, the next mayor must increase the availability of and access to quality mental health supports in schools; increase access to mental health services for children outside of school; and reform the behavioral health resources and supports for children ages 0-3. More details on these priorities can be found in the Kids' Campaign Platform regarding mental health.



# The Right Leadership

With the right leadership in place, a coordinated approach across city agencies can help break down the silos that create barriers to meeting these needs. The mayor could convene a Children’s Cabinet that includes all child-serving branches of city government as well as several child-serving agencies to lead and direct the provision of services to children and adolescents. Additionally, there should be an emphasis on community-based rather than institutional approaches—through the likes of Family-Based Mental Health Services, Intensive Behavioral Health Services, and Blended Case Management. The mayor should seek to augment and create effective programs, in terms of the behavioral health needs of youth in schools, including those involved the juvenile justice and/or child welfare systems.

It is critical, too, to take steps to make sure that the behavioral health system has a strong and diverse workforce that can address the needs of community members, especially children and adolescents, including those from oppressed and marginalized identities. If we are to attract qualified and dedicated workers, a competitive wage is essential.

Reimbursement rates are negotiated between CBH and the state and are simply not high enough, particularly in a city where costs are higher than in much of the state. To raise rates, the mayor must advocate at the state level and work collaboratively with policymakers across the commonwealth.

**In addition, the next mayor can take the following actions that the next mayor can take to improve the behavioral health and wellness of Philadelphians:**

## 01. Improve accountability for quality behavioral health services.

This is essential, as is effective oversight of CBH by DBHIDS. The need for oversight was laid out in a July 2021 report by the City Controller. To make a difference, the new mayor’s administration will need to address current barriers to compliance with standards and hold the city’s behavioral healthcare system accountable. It should seek the initiation and expansion of pay-for-performance and value-based purchasing models, in which providers can receive incentive payments if they offer high-quality and cost-efficient services. In addition, the administration should increase transparency in data reporting and metrics as a way of elevating service quality and holding the system to the highest standards.

## 02. Consider the social determinants of mental health.

Among those determinants are unequal distribution of economic and educational opportunity in the city, exposure to violence, housing instability, food insecurity, and the lack of access to healthcare. Progress would not only improve the behavioral health landscape but have wide-ranging positive impacts for the entire city. Research has shown that well-designed spending on social determinants more than pays for itself in terms of reducing costs and negative outcomes across the board. While addressing these challenges may seem daunting, doing so aligns with broader goals for racial and social equity. People with behavioral health challenges, and all of Philadelphia, will benefit from higher wages and enhanced economic opportunity, the elimination of food deserts and food swamps, improvement in school quality, and a stronger social safety net.

### 03. Address gun violence.

In Philadelphia, the mental health impact of this problem is far-reaching, particularly with the high homicide rates of the last few years. The mayor must work with DBHIDS to ensure that Philadelphia’s behavioral health treatment providers are mobilized to provide care to individuals and communities traumatized by gun violence. Programs like the Network of Neighbors should be prioritized for expansion, to build community capacity to support one another in the wake of traumatic events. The system needs the ability to respond to these treatment needs, while the new administration takes steps to reduce the violence.

### 04. Increase attention to Intellectual Disability/Autism (ID/A) services for adults.

As a result of labor shortages, state funding policies, and other factors, many providers of these services have shut down; others have reduced their capacities and now have waiting lists. These providers play essential roles in assisting individuals through vocational/employment services, day programs, in-house caretaking, and residential facilities. Unlike the de-centralized, locally driven behavioral health system, ID/A services are administered by the Office of Developmental Programs out of Harrisburg. Philadelphia’s next mayor has a critical role to play in openly communicating with the PA General Assembly concerning the struggles that providers and consumers encounter with these services. Additionally, the mayor can work to build coordination and collaboration between behavioral health and ID/A services, as well as ensuring that health care providers at large are familiar with best practices in treating patients with intellectual disabilities or autism.

**In addition, we urge that you support and expand programs that prioritize connection with peer supports, ensure the maximum use of innovation and technology, and enhance a continuum of care between crisis services and support networks.**



One way is to publicize and encourage use of the new 988 Suicide and Crisis Hotline. Expanded utilization of this telephone number, rather than relying solely on 911, is a way to move crisis care away from law enforcement officers—who often lack the training to address the situation—and improve the crisis care continuum. This could help prevent such tragedies as the October 2020 police shooting of Walter Wallace Jr., a 27-year-old West Philadelphian who was experiencing a mental health crisis.

Another is to invest opioid settlement funds in both a spectrum of harm reduction services as well as medication assisted treatment for opioid use disorder. These funds are intended to repair harms caused by the opioid epidemic and to prevent overdose deaths. In addition to directing these funds toward their intended use, the next mayor must prioritize open, proactive communication with city residents about how these funds are being spent in Philadelphia, as the overdose crisis rages on in neighborhoods across the city.

# We're Here To Help

We're not asking the mayor to start from scratch. In recent years, experts have recommended changes to various elements of Philadelphia's behavioral health system that will improve access, enhance quality, and lower costs. Some of these are laid out in the Vision Philadelphia paper, Priorities for Improving Philadelphia's Behavioral Health Infrastructure. We are here to help The City of Philadelphia on those recommendations both to make necessary changes and to expand on what is working well. It is a tall order, and one in which system participants at all levels must be involved. It requires talking with those who receive care, those who provide it, the officials in Harrisburg who administer the rules and those who can change them.

There's only one way all of that can happen, and that's with clear, forceful, and transformative mayoral leadership. Accountability is critical to the health of the system. Expanding the current DBHIDS and CBH advisory groups to include a variety of diverse voices will allow the system to be more inclusive, transparent, and effective. We are ready, willing, and eager discuss more specific policy ideas with you and your team.

**We look forward to continuing this conversation.**



**Cherie Brummans**

CEO and Executive Director



**Joe Pyle, MA**

President



**Donna Cooper, MPA, MIM**

Executive Director

The Alliance of Community Service  
Providers  
2137 E Huntingdon St, E-2000  
Philadelphia, PA 19125  
215-559-4373

Scattergood Foundation  
30 S 15th St, 15th Floor  
Philadelphia, PA 19102  
215-817-8529

Children's First  
900 Spring Garden St, Suite 600  
Philadelphia, PA 19123  
215-563-5848