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Submitted to the DC Council Committee on Health
Department of Behavioral Health FY 2024 Budget Oversight Hearing on March 29, 2023

Testimony of Scout Cheeks, Policy and Project Management Analyst at the DC Appleseed Center for Law and Justice

Thank you for the opportunity to testify regarding the Fiscal Year (“FY”) 2024 proposed budget for the District’s Department of Behavioral Health (“DBH”). My name is Scout Cheeks and I am the Policy and Project Management Analyst at DC Appleseed Center for Law and Justice (“DC Appleseed”). DC Appleseed is a non-profit, non-partisan organization that aims to make the District a better place to live and work for all through litigation, teamwork, and advocacy. Throughout our history, we have taken on some of the District’s toughest problems, developed proposed solutions to those problems, and then worked to get our proposed solutions adopted and implemented. DC Appleseed has worked closely with the DC government to address the HIV epidemic in DC, including fighting against Congressional intervention into local funding for syringe services programs (“SSPs”). DC Appleseed also works to address the needs of children in DC, with an emphasis on special education and students with disabilities.

I am testifying today to urge the City Council to support health equity in the District by: (1) ensuring appropriate, expedient, and transparent funding of the Opioid Litigation Proceeds Act; (2) ensuring local dollars are allocated to SSPs; and (3) fully-funding DC’s School-Based Behavioral Health Program.

Opioid Litigation Proceeds Act
DC Appleseed encourages the DC Council’s Committee on Health to seek clarification regarding DC’s existing Opioid Abatement Fund, as it is not obviously located within DBH’s FY 2024 budget. In recent years, the opioid epidemic inflicted immense damage on communities across the country. DC’s Office of the Attorney General worked in collaboration with other states to hold the opioid industry accountable through litigation. Through several settlement agreements, the District may receive more than $49 million over the next eighteen years.
To ensure settlement funds are spent appropriately, the DC Council passed Law 24-315001, the Opioid Litigation Proceeds Act. This legislation was signed by Mayor Muriel Bowser on January 17, 2023, and the Congressional Review period for the Act ended on March 10, 2023. The Opioid Litigation Proceeds Act requires the establishment of an Office of Opioid Abatement, which will support an Opioid Abatement Advisory Commission. The Advisory Commission will serve a variety of functions, not the least of which is determining how DC should spend the proceeds received in multistate opioid litigations, known as the Opioid Abatement Fund. Pursuant to the Opioid Abatement Act, the Opioid Abatement Fund should be housed at DBH. We understand that some reprogramming of funds is required to move existing Opioid Abatement Funds from the Department of Health (“DOH”) to DBH. Unfortunately, we cannot find any mention of the Opioid Abatement Fund, the Opioid Abatement Advisory Commission, or the Office of Opioid Abatement in the Mayor’s 2024 budgets for either DBH or DOH.

DC Appleseed urges the DC Council, DBH, and the Office of the Chief Financial Officer to clarify the current status and balance of the Opioid Abatement Fund and to ensure these funds are clearly depicted in FY 2024 and subsequent budgets. Additionally, to the extent feasible, DC Appleseed recommends that the Opioid Abatement Fund, Office, and Commission be assigned a unique budgetary code (similar to the Office of the Chief Clinical Officer or the Office of System Transformation within DBH’s budget). Using a distinct code for Opioid Abatement Funds will promote public involvement, increase transparency, and ensure accountability in the expenditure of the settlement funds. A unique budget code would additionally help ensure the Opioid Litigation Proceeds Act is being used to create new programs (as opposed to contributing to existing initiatives) and streamline the annual reporting by the Mayor and DC’s CFO which is required by this law.

Sustained Funding for Syringe Service Programs

DC Appleseed urges the DC Council to ensure local funds are allocated to support DC’s SSPs. Opioid addiction has disrupted the lives of many District residents, many of whom are marginalized people of color. DC now has one of the highest opioid death rates in the country, and it loses hundreds of residents each year to opioid fatalities. DBH and other local healthcare providers work to reduce the impact of opioid abuse disorders on DC’s community by implementing harm reduction initiatives, including SSPs. Comprehensive SSPs provide needle exchange and harm reduction services including connecting patients to care for substance use disorders, giving them access to sterile syringes and other injection supplies, and disposing of them. SSPs may use federal dollars for some components of programming, such as personnel, educational materials, and syringe disposal services. However, they cannot use those federal funds for sterile injectable supplies (i.e., hypodermic syringes or needles, alcohol swabs, and other necessary equipment). Thus, DC must allocate local DC funds in addition to federal funds to support SSPs.

Prior to 2023, SSP funding came from the HIV/AIDS, Hepatitis, STD and Tuberculosis Administration (HAHSTA), which is housed in DOH. During calendar year 2023, a transition in funding sources occurred, and DC Appleseed understands that SSP funding is now housed in DBH. Publicly released budget documents for DOH and DBH do not clearly reflect the amount of funds allocated to SSP providers in FY 2024 nor the source of those funds. For this reason, DC Appleseed recommends that the Committee on Health verify that DC allocated sufficient local and federal funds to keep DC’s SSPs providing these critical harm reduction services.

Fully-Funding the School-Based Behavioral Health Program

Finally, DC Appleseed urges the DC Council to allocate at least $5.7 million in FY 2024 to the District’s School-Based Behavioral Health (“SBBH”) Expansion Program to guarantee stable wages for collaborating community-based organizations (“CBOs”). DBH administers a school-based program in public and public charter schools that provides adolescents and their families with preventive, early
intervention, and clinical care services. The SBBH initiative has the potential to be a national leader in providing access to high-quality, reliable, and culturally sensitive behavioral healthcare to District students where they spend the majority of their waking hours. However, the Program requires additional investment to support CBO clinicians in DC schools and ensure competitive compensation to draw and retain skilled behavioral health specialists.

Stable compensation for collaborating behavioral health CBOs is essential to the present and future success of the SBBH program due to the shortage of behavioral healthcare providers in the District and across the country. Given the District's rising cost of living, staffing behavioral healthcare roles has become even more difficult. With many clinicians experiencing burnout and receiving competing offers with higher pay, better benefits, and more flexibility to work remotely and set their own schedules, DBH recently increased the CBO grant to $99,371 per clinician in order to ensure that CBOs can successfully recruit and retain clinicians.

Now, in order to account for inflation in FY 2024, the DC Council must make sufficient program investments. With an investment of at least $5.7 million, DBH could offer a grant of approximately $103,000 per clinician—the whole of what CBOs presently receive plus inflation. Allocating less than $5.7 million for this program will reverse existing progress and hamper the program's long-term potential.

Thank you for your time and consideration. I would be happy to answer any questions you may have regarding these important health equity matters in DC, and I can be reached at the contact information below.

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