



# THE NEW YORK STATE PUBLIC EMPLOYEES FEDERATION TESTIMONY

Mental Hygiene Joint Legislative Budget Hearing  
2025-2026 Executive Budget Proposal  
February 5, 2025  
Testimony by Wayne Spence

Good afternoon Chairpersons Krueger, Weinstein, Brouk, Simon, Fernandez, Steck, Fahy and Santabarbara and other honorable members of the Legislature. My name is Wayne Spence and I am the President of the 54,000-member strong New York State Public Employees Federation (PEF). I want to thank you for the opportunity to speak to you about Governor Hochul's 2025-26 Executive Budget. Our union is composed of professional, scientific and technical experts who provide critical services to the residents and taxpayers of New York State, including the staff at the Office of Mental Health, the Office of Addiction Services and Supports and the Office for Persons with Developmental Disabilities. PEF members take a great deal of pride in their work and the care they provide to New Yorkers.

PEF is pleased with many of the proposals advanced by Governor Hochul in her Executive Budget. However, PEF urges the Executive and the Legislature to take action on a number of fronts to enhance staffing and services and to provide enhanced safety for workers in these agencies.

**Executive Budget Overview:**

**I. The Office of Mental Health (OMH):**

Executive Budget Proposals: PEF **SUPPORTS** the following Executive Budget Proposals:

- (1) **Manhattan Psychiatric Hospital:** PEF **SUPPORTS** the Governor's proposal to appropriate \$160 million to fund and staff 100 forensic beds at the Manhattan Psychiatric Facility.
  
- (2) **Capital District Psychiatric Center:** PEF **SUPPORTS** the Governor's proposal to appropriate \$2.4 million to establish an acute care unit at CDPC.
  
- (3) **Expanded Mental Health Staffing:** PEF **SUPPORTS** the Governor's Executive Budget proposals to:
  - (a) Appropriate \$160 million to fund an additional 100 forensic beds at Manhattan Psychiatric Center; and
  - (b) Appropriate \$21.2 million for additional staffing at 4 forensic facilities; and
  - (c) Increase staffing at OMH by 604 staff.

These investments are absolutely critical to reversing the mental health crisis and sustaining the gains we've made to address this crisis.

**II. Office of Addiction Services and Supports (OASAS):**

PEF **SUPPORTS** the Governor's Executive Budget Proposal to increase staffing at OASAS by 34 staff.

### III. Office for People with Developmental Disabilities:

#### PEF **SUPPORTS** the Governor's Executive Budget proposals of:

- (1) \$75 million, 5-year capital upgrade for the Institute for Basic Research – PEF lauds the Governor for this long-overdue investment and urges both houses to support it in the final budget.
- (2) \$18 million, 4-year capital upgrade for Sunmount Developmental Disabilities State Operations Office.

#### PEF **OPPOSES** the Governor's Executive Proposal to make certain temporary programs

**permanent.** PEF believes the following programs should be extended another year to further monitor and calibrate their function and progress moving forward:

- (1) **Make the Preferred Source Program Permanent** (S.3007/A.3007 – PART Z) Allows selected providers to be exempted from competitive procurement procedures. Amendments made in 2022 required that preferred sources perform at least 50 percent of the work on purchases made through this program and increased the OGS Commissioner review threshold to \$100,000.
- (2) **Make Flexibilities for Demonstration Programs Permanent** (S.3007/A.3007 – PART AA) - Makes permanent the authority of the Office of Mental Health, the Office of Addiction Services and Supports, and the Office for People with Developmental Disabilities to utilize flexibilities to develop new methods of services through demonstration projects.
- (3) **OMH and OPWDD Appointment of Temporary Operators** (S.3007/A.3007 – PART BB) - Makes permanent the statutory factors used by OMH and OPWDD to evaluate usage of temporary operators.

#### PEF has concerns with the following Executive Budget Proposal:

- (1) **Involuntary Commitment Proposal:** (S.3007/A.3007 – PART EE)

PEF believes that there are individuals in society who suffer from such pronounced mental health and/or addiction issues that state and local governments must be authorized to act to protect them and the general public. PEF will rely on policymakers to weigh the Governor's proposal and develop a policy that protects the rights of individuals while also protecting the individual and the general public from harm. That said, there continue to be gaps in the current parole laws enacted via "Less is More" (Chapter 427/2021) that preclude parole officers from addressing concerns with parolees' court-ordered mental health or addiction treatments that need to be tightened to protect both the parolee and the community.

**Budget Request:** PEF recommends that the state’s parole officers be equipped with protocols to address parolees who are not abiding by the mental health and/or addiction treatments ordered by the court and agreed to by the parolee as a condition of release. Right now, there are parolees who are actively or unknowingly missing their court-ordered treatment and parole officers have no power or authority to address it. If we are going to authorize officials from state and local governments to involuntarily commit a person to treatment, then why would the state not provide comparable authority to parole officers BEFORE a crisis ensues?

**Budget Recommendations: PEF recommends the following items be included in the enacted state budget:**

**A. Increase Staffing for Agencies Charged with Supporting At-Risk New Yorkers:**

State agencies cannot deliver quality and effective services or maintain appropriate security protocols to protect clients and employees without adequate staffing. The state has rightly begun to address its long-standing staffing issues by reducing arbitrary barriers to hiring practices and improving compensation and benefits for employees, but even more needs to be done to support the state agencies addressing at-risk New Yorkers.

**Staffing Level Comparison at DOCCS, OPWDD, OMH and OCFS**

Select Agencies	Staffing 2013-23				Gov. Hochul Staffing 2021-23				Overtime Cost 2023
	Staff 2013	Staff 2021	Staff 2022	Staff 2023	2013 vs. 2023 Difference	2013 vs. 2023 Percentage	2021 vs. 2023 Difference	2021 vs. 2023 Percentage	
DOCCS	30,162	26,845	25,202	23,911	-6,251	-20.7%	-2,934	-10.9%	\$353M
OPWDD	22,606	18,439	17,488	18,241	-4,365	-19.3%	-198	-1.1%	\$266.7M
OMH	15,717	13,812	13,600	14,118	-1,599	-10.2%	306	2.2%	\$177.5M
OCFS	3,275	2,803	2,767	2,938	-337	-10.3%	135	4.8%	\$21.3M
<b>Total OT Cost 2023:</b>									<b>\$818.5M</b>

(Source: NYS New York State Agency Use of Overtime and State Workforce Trends, 2013 – 2023, Office of the State Comptroller, May 2023)

The continued reduction of state staffing has equated to an explosion in overtime costs. Essentially, the state is paying significantly more in personnel costs just to provide a baseline of oversight and care.

The reliance on mandatory and voluntary overtime to cover shifts is not a cost-effective method to support the needs of at-risk New Yorkers in the criminal justice system and/or otherwise suffering from disabilities, mental health crises, or addiction.

**Total Hours Overtime Worked**  
**B. 2020-2023**

<b>Agency</b>	<b>OT Hours 2021</b>	<b>OT Hours 2022</b>	<b>OT Hours 2023</b>	<b>OT Difference 2021 vs. 2023</b>	<b>% Increase</b>
OPWDD	5,377,977	6,208,658	6,047,354	669,377	11.1%
DOCCS	4,525,292	5,290,451	6,160,437	1,635,145	26.5%
OMH	3,205,164	3,449,114	3,389,715	184,551	5.4%
OCFS	271,437	380,875	431,064	159,627	37.0%

(Source: NYS New York State Agency Use of Overtime and State Workforce Trends, 2013 – 2023, Office of the State Comptroller, June, 2024)

**Budget Requests:**

- (1) **Increase compensation:** Increase resources so OCFS, OMH, and OPWDD can increase compensation to attract and retain the staff necessary to deliver quality and efficient services, to reduce overtime costs and to serve as a deterrent and improve the response time when an incident occurs.
  
- (2) **Repair Tier 6 Pension Plan:** One way to increase the likelihood of filling some of the vacancies at OCFS, OMH, and OPWDD and all state agencies is to fix Tier 6. While you made some progress over the last few years by reducing the vesting period and going back to three years to calculate the final average salary, more needs to be done. Chief among them is reducing the employee contribution and allowing for retirement at 55 with 30 years of service.
  
- (3) **Improve Agency Culture and Address Bullying and Abuse:** Workplaces have been different since COVID-19 and are losing qualified employees due to inappropriate workplace conduct. The state needs a legislative or regulatory policy to identify and eradicate “bullying” and “abusive conduct” in all state agencies. The state currently has a law requiring all state employees to undertake an education program to identify and eradicate sexual harassment in the workplace, but no training to identify and prevent workplace “bullying” and “abusive conduct.” PEF supports the legislation passed by both houses last year which would include “bullying” and “abusive conduct” in the workplace violence law that requires training to identify and eradicate and formal mechanisms to report and track incidents (S. 3065-B by Sen. Ramos/A.8934-A by Asm. Bronson). PEF is open to any and all solutions to this workforce problem as continued inaction is hurting the state’s efforts to attract and retain staff.

**PEF BUDGET REQUEST:**

**Fix Tier 6 to Attract and Retain Talent for the State Workforce**

**Commented [RM1]:** Not sure why this is on there twice?  
Don't we list Fix tier 6 as a budget request above?

**B. Authorize the Deployment of Body Scanners in OMH, OCFS, OPWDD and OASAS Facilities**

To reduce the flow of weapons, drugs and other contraband, New York State rightly enacted legislation and provided funding to equip DOCCS facilities with body scanners. The state must provide similar authorization and funding for the other agencies that deal with at-risk New Yorkers – OMH, OCFS, OPWDD and OASAS.

The surge in assaults has been demonstrated by the findings documented in the “*Prison Violence Task Force*,” Department of Corrections and Community Supervision (June 2023); and the “*Oversight of Juvenile Justice Facilities*,” Office of Children and Family Services; Office of the State Comptroller (April 2024), as well as the stabbing of three mental health professionals at the Buffalo Psychiatric Center on April 3, 2024 and the recent rape of two staff members at Hutchings Psychiatric Center in Syracuse, N.Y.

The increase in assaults and injuries at these agencies is also reflected in the “Annual Report of NYS Government Employees’ Workers’ Compensation Claims” from 2022-2023 which clearly indicates the differentiation of these agencies versus other agencies and our collective need to find solutions to keep workers safe on the job.

The use of body scanners will reduce risks for both staff and clients.

**Top Four Agencies with Highest Injury Rates 2023-2024**

	<b>Incidents</b>	<b>Lost Days</b>	<b>Comp Costs</b>	<b>Medical Costs</b>	<b>Total WC Costs</b>
DOCCS	6,949	109,831	\$9,055,748	\$12,275,339	\$21,331,087
OMH	2,632	53,631	\$7,118,739	\$6,159,299	\$13,278,038
OPWDD	2,245	80,376	\$11,765,521	\$5,037,204	\$16,802,725
OCFS	462	15,834	\$2,626,751	\$950,407	\$3,577,158
<b>Total 4 Agencies</b>	<b>12,288</b>	<b>259,672</b>	<b>\$30,566,059</b>	<b>\$24,422,029</b>	<b>\$54,989,008</b>
<b>All Other Agencies</b>	<b>2,705</b>	<b>44,133</b>	<b>\$5,489,680</b>	<b>\$5,061,318</b>	<b>\$10,550,078</b>

(Source: NYS Department of Civil Service “*Annual Report of NYS Government Employees’ Workers’ Compensation Claims*,” [Annual Report of NYS Government Employees' Workers' Compensation Claims 2023-2024](#))

**Article VII Budget Request:** Pass legislation to authorize the use of body scanners at secure and forensic facilities administered by OCFS, OMH and OPWDD in the same manner and with the same protocols as currently exist for DOCCS.

**C. Real Accountability: Enhanced Penalties for Assaulting State Employees in the Performance of Their Jobs**

The state of New York has rightly enacted enhanced penalties for individuals who knowingly and willfully assault workers performing their responsibilities. The list of covered employees includes peace officers, nurses, sanitation workers, housing authority staff, train operators, and public school teachers and staff.

PEF is seeing an increase in the frequency and the severity of assaults against PEF members. New York needs to expand this law to cover any state employee who is willfully and intentionally assaulted in the course of delivering services. The state of New York can no longer afford to tolerate these behaviors and must hold all New Yorkers accountable for their actions.

**Article VII Budget Request:** Pass legislation to increase the penalties on individuals who willfully and knowingly assault OCFS, OMH, and OPWDD employees in the performance of their duties.

**C. Support and Expand State-Operated Assertive Community Treatment (ACT) Teams**

Since taking office, Governor Hochul invested significant state and federal taxpayer dollars to build a new private provider network to deliver community-based mental health services, including:

- Intensive Crisis Stabilization Centers (\$75 million)
- Supportive Crisis Stabilization Centers (\$71 million)
- Youth Assertive Community Treatment (ACT) Teams (\$21 million)
- New Comprehensive Psychiatric Emergency Programs, including new ACT Teams, new Safe Options support teams, and new home health care plus managers to expand clinic capacity (\$60 million)

Where PEF sees a gap in service is that the private provider network has no duty or obligation to render care and there is limited oversight on the use of these taxpayer dollars. While an important component to the overall network of mental health care delivery, PEF believes that in too many cases these providers are often unable or unwilling to care for clients with needs that are either

beyond their capacity or who require longer-term, resource intensive treatments that challenge their operating margins.

Over the years, policymakers have shifted resources away from state-operated ACT teams and diverted them toward private providers. And, while we understand that correlation doesn't necessarily mean causation, this shift has coincided with the very visible uptick in mental health related incidents, as well as the persistence of the crisis that we find ourselves in today.

**Fortify and Fund More State-Operated ACT Teams:**

State-operated ACT teams have a duty to render care for individuals in crisis regardless of their circumstances or status – i.e., uninsured, underinsured, undocumented, indigent. The state's ACT teams integrate psychiatrists, social workers, nurses and addiction treatment counselors into a single treatment unit to address all levels of mental health and/or addiction issues by actively delivering quality care to clients in the community. However, ACT team caseloads have increased significantly in recent years, and not just in volume, but in acuity and complexity as well. To ensure that these service recipients are treated in a way consistent with expectations and regulations set forth by the state legislature, it is paramount that those services are provided by state employees who are trained and knowledgeable about the standards of care.

State-operated ACT team members develop long-term rapport with the individuals they care for, and provide fast, effective and tailored treatment before and during times of crisis. This helps to keep individuals with persistent or recurring mental health issues stable and saves money by limiting interactions with high-cost emergency room treatment or re-admittance to a mental health facility for stabilization.

The Office of Mental Health provides strict oversight to ensure their ACT Teams are providing the highest standard of care. This year's budget leaves our ACT Teams underfunded and stretched thin and provides no new resources to expand this successful program to other state-operated facilities and the regions that they serve.

**Current Service Gaps:**

(a) Facility Level Service Gaps: Of the 30 state-operated mental health facilities, only 12 have state-operated ACT teams operative; and



(b) Regional Service Gaps: There are no state-operated ACT teams operative in Rochester, Syracuse, the Capital Region or Long Island and only 3 ACT teams covering the entire city of New York.

What is needed now is additional resources to support existing ACT team programs and to expand these programs to all OMH facilities. This would be a cost-effective approach as it would help to further reduce the rates of re-admission in more communities across the state. ACT teams serve as an early, preventative tool to assist those who need services in a setting that meets clients where they are.

**BUDGET REQUEST**: \$25 million to fortify existing state-operated ACT teams and to begin the process of establishing new ACT teams and intensive case management staff at all OMH-operated mental health facilities.

**D. Establish OPWDD Facilities Improvement and Expansion Plan**

Securing affordable housing is a problem for many New Yorkers and PEF supports efforts to address those concerns. Over the past several years, OPWDD has shuttered or “suspended services” at more than 130 state-operated residences for the developmentally disabled with the most profound needs. It is for this reason that we must dedicate funds to address the continued closure or “suspension of services” at state-operated residences for individuals with developmental disabilities and allocate additional resources to acquiring new state-operated facilities to address the current and projected future backlogs.

**BUDGET REQUEST**: \$30 Million to Renovate and Acquire Residences

**E. Universal On-Site Diagnosis and Treatment at State Facilities**

OMH and OASAS facilities currently lack the appropriate number of qualified, licensed staff to provide immediate, onsite evaluation of New Yorkers who present for treatment. For those in crisis, this process delays care and short-term stabilization or inpatient support, if needed. Developing this capacity will enable an expedited diagnosis of mental health, addiction or co-occurring disorders; facilitate the identification and implementation of immediate and universally available treatment

plans and/or appropriate referrals; and allow for a coordination of care between public and private providers of services predicated on the needs of the client.

**BUDGET REQUEST:** \$10 Million to Hire, Train and Deploy Appropriate Staff

Thank you for the opportunity to share our concerns with you. We look forward to working with you to ensure that the final budget provides state agencies with the resources they need to help improve the lives of all New Yorkers.

Respectfully submitted,

Wayne Spence  
President, New York State Public Employees Federation