



August 1, 2025

Chair John Velis
Joint Committee on Mental Health, Substance
Use, and Recovery
State House, Room 513
24 Beacon St
Boston, MA 02133

Chair Mindy Domb
Joint Committee on Mental Health, Substance
Use, and Recovery
State House, Room 33
24 Beacon St
Boston, MA 02133

**Re: Support for S.1407 - Resolve to ensure delivery of mental health services to
adults with acute mental illness**

Dear Chair Velis, Chair Domb, and Honorable Members of the Committee,

On behalf of the National Alliance on Mental Illness of Massachusetts (NAMI Mass), I write to express our strong support for **S.1407** *Resolve to ensure delivery of mental health services to adults with acute mental illness*.

NAMI Mass is a grassroots nonprofit organization comprised of individuals with mental health conditions, their families, and caregivers. Our mission is to ensure that all people affected by a mental health condition receive the support they need when they need it. Many of our members are clients of the Department of Mental Health (DMH) or have loved ones who rely on DMH services—particularly the essential support provided by DMH case managers.

DMH case managers are vital to the long-term stability and success of the individuals they serve. They provide a lifeline to those navigating a fragmented and often overwhelming mental health system. Case managers help their clients access mental health support, maintain stability and obtain needed services. By providing early intervention, case managers help individuals get the care they need before symptoms escalate into a crisis. This reduces pressure on hospitals and residential programs while supporting long-term recovery, independence, and community integration.

Despite their crucial role, the Governor's FY26 budget proposed cutting the number of DMH case managers in half. The proposal sparked widespread concern from DMH clients, families, and advocates from across the state¹. That is why it's essential to collect and analyze data on current staffing levels and caseloads to ensure that decisions are informed and prioritize the well-being of individuals who depend on these vital services.

¹ Laughlin, J. & Serres, C. (2025, January 23). *Health and social service programs see significant cuts in Mass. budget proposal*. *The Boston Globe*. <https://www.bostonglobe.com/2025/01/23/metro/massachusetts-healey-budget-pappas-pocasset-mental-children-disabilities/>

The initial Governor's budget proposal to cut these roles highlights a concerning disconnect between administrative decisions and the realities faced by individuals living with mental health conditions that depend on these services. Studying these issues would provide a clearer picture of the current demand, better reflect the experiences of both clients and staff, and help guide future policy decisions that protect access to essential supports.

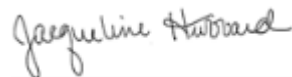
S.1407 takes an important step forward by creating a special commission to study the staffing levels and service delivery of DMH case managers. This commission will provide essential insight into the current caseloads, resource gaps, and service challenges, and explore ways to better meet the needs of individuals with acute mental health conditions across the state.

We are honored that NAMI Mass is named as a member of the commission. However, we respectfully request one correction to the bill text: we are currently listed as the "National Association on Mental Illness". Our correct name is the "National Alliance on Mental Illness of Massachusetts." Making this small change will ensure clarity in commission representation.

For these reasons, I urge you to report favorably on S.1407. This legislation is a necessary step toward protecting and strengthening the case management system that so many rely on for stability, recovery, and hope.

Thank you for your attention to this matter.

Sincerely,

A handwritten signature in cursive script that reads "Jacqueline Hubbard".

Jacqueline Hubbard, Esq.
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