



Association for Behavioral Healthcare



Fiscal Year 2011 Annual Report





Dedicated to the staff of our member organizations.

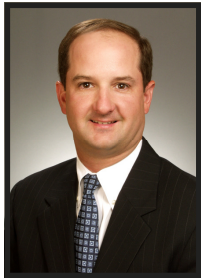
How wonderful it is that nobody need wait a single moment before starting to improve the world. ~Anne Frank

Your dedication and selflessness improve the lives of your clients and the world around you. We admire and thank you.





Kevin Norton
Chair,
Board of Directors



Vic DiGravio
President/CEO

Dear ABH Colleague:

It is with great pride that we submit the Fiscal Year 2011 Annual Report for the Association for Behavioral Healthcare, Inc. and the Association for Behavioral Healthcare Foundation, Inc.

ABH faced many challenges as an Association and an industry but also had many successes during the year. Throughout the year our message remained strong and clear: community-based mental health and addiction services that are person-centered and outcome-driven are the most clinically and cost-effective way to serve individuals. Our work in Fiscal Year 2011 once again put ABH at the forefront of important policy initiatives and debates, including:

The Campaign Against Repeal of the Alcohol Tax: ABH organized and led the coalition of groups that came together to oppose the repeal of the sales tax on alcohol. Unfortunately, the liquor industry outspent our campaign by a 13:1 margin and voters choose to repeal the sales tax on alcohol. Nonetheless, ABH's profile as a leader in the fight for addiction services was strengthened significantly by our leadership of the campaign.

Chapter 257 Implementation: ABH, in conjunction with our partners in *The Collaborative*, continued the fight for implementation of Chapter 257. Collectively, we negotiated compromise legislation with the Patrick Administration that extended the deadline for implementation but which also prevented the Administration from moving forward on service redesigns and procurements without first setting a rate in accordance with Chapter 257.

Safety in the DMH Community System: ABH exercised significant leadership in the aftermath of the tragic death of Stephanie Moulton, a staff person at a community-based mental health program. ABH, with an array of other stakeholder groups, worked to ensure that the public dialogue in the aftermath of Stephanie's death was thoughtful and constructive and avoided furthering the stigma against individuals living with mental illness.

Advocacy for the FY12 state budget: ABH's advocacy around the annual state budget process was very successful. The Department of Mental Health's budget was increased by approximately \$20 million above FY11 levels while funding for the Bureau of Substance Abuse Services met the federal Maintenance of Effort (MOE) requirement. This was especially significant given the repeal of the sales tax on alcohol.

All of this good work would not have occurred if not for the steadfast support of our member organizations. This includes not just annual membership dues, but the active participation and leadership provided by our member organizations on a daily basis. For that reason, this annual report is dedicated to the staff of our member organizations.

Thank you for your commitment and dedication.

Sincerely,

Kevin P. Norton
Chair, Board of Directors

Vicker V. DiGravio III
President/CEO



ABH: Leading the Way for Community Behavioral Healthcare

For over 30 years, the Association for Behavioral Healthcare (ABH) has been the leading advocacy organization in Massachusetts' mental health and addiction treatment arena. Fighting for high-quality, community-based care for families and individuals with mental illness, addiction and substance-use disorders, ABH provides leadership and statewide coordination on important public policy, financing, preferred clinical models and quality assurance issues.

ABH's 80+ members at a glance:

- ◆ Number of clients served by ABH members on a given day: **81,231**
- ◆ Number of clients served in a year by ABH members: **757,613**
- ◆ Number of employees: **37,502**



Change Leaders

In February, ABH announced that it officially adopted a new approach regarding how it will speak about substance abuse. Specifically, the ABH Board of Directors voted to no longer use the term *substance abuse*; instead, ABH now uses the word *addiction*.

Why?, you ask. Well, there have always been a myriad of terms used to describe the illness of addiction and the people it affects. The lack of a common language has fostered fragmentation within the workforce, caused confusion, and has allowed for the ongoing perpetuation of stigma about the disease and the people who are affected by it. ABH is taking a stand and hopes you will join in our efforts to eliminate *substance abuse* from our collective discourse, and to instead speak of the problem of *addiction*, and our need to treat people with substance use disorders.



Recognizing the Heroes Among Us

Each year, ABH recognizes the amazing staff at our member organizations at our Salute to Excellence. In October 2010, over 300 people joined us to celebrate the accomplishments of the year's award winners.

We were honored to hear from many of the key state health policymakers who play a large role in determining the present and future of community-based behavioral healthcare services.

Every year, we are incredibly inspired by the award winners and this year was no different.



Providing Educational Opportunities

At ABH, we believe that there is always an opportunity to learn something new. As a result of this steadfast belief, we strive to provide exceptional learning opportunities and trainings for our members. This year, ABH's Annual and Association Meetings focused on the impact of both healthcare reform and payment reform on behavioral healthcare.



ABH Annual Meeting: Healthcare Reform and Its Impact on Behavioral Health

ABH members joined their colleagues from across the state to engage in a dialogue with Christie Hager, J.D., M.P.H., Regional Director of the US Department of Health and Human Services, and a panel of healthcare leaders from across the state.

ABH Association Meetings

Health Reform and the Outlook for Behavioral Health Providers

Richard Dougherty, Ph.D., CEO of DMA Health Strategies, discussed the most significant changes that are emerging in the healthcare system, such as medical homes and new funding sources, and identified ways that public behavioral health providers can participate most effectively in the emerging system.



Payment Reform in Massachusetts

Senator Richard Moore, Co-chair of the Joint Committee on Healthcare Financing, discussed where the state is headed in terms of payment reform, what this means for a state where healthcare is the largest economic driver, and what this means for behavioral health providers.



Solid Partnerships = Solid Results

While ABH takes great pride in its work, it also takes immense pride in its partnerships with other organizations in order to bring outstanding trainings to our members and to improve behavioral health services in Massachusetts.

Drug Court Trainings

This year, ABH partnered with Join Together at the Boston University School of Public Health, the Massachusetts Organization for Addiction Recovery (MOAR), the National Association of Drug Court Professionals, the New England Association of Drug Court Professionals and Advocates, Inc. to develop and host the **Massachusetts Alcohol and Other Drug Leadership Institute**. These two trainings, *Drug Courts and Addiction Treatment* and *Addiction Treatment and Recovery: What Works? Partnering with Criminal Justice and Drug Courts* promoted best practices in the state's drug courts. The trainings were funded through a grant via Join Together from the Substance Abuse and Mental Health Services Administration.

Army OneSource

ABH also recently partnered with Army OneSource to identify behavioral health programs, services, and supports that can help military service members and their families. Army OneSource is a Secretary of the Army initiative to provide comprehensive community support and service delivery for soldiers and their families regardless of component or geographic location.

Massachusetts Coalition for Addiction Services

ABH continued its work with the Massachusetts Coalition for Addiction Services (MCAS), advocating for addiction treatment funding and policy. MCAS was first organized by ABH following budget cuts in FY 2003 and is comprised of seven advocacy organizations: ABH, AIDS Action Committee, Massachusetts Association of Alcohol and Drug Abuse Counselors, Massachusetts Housing and Shelter Alliance, Massachusetts Organization for Addiction Recovery, Recovery Homes Collaborative, and the Boston Public Health Commission.

The Transformation Committee

ABH is very proud to be affiliated with the Transformation Committee (Transcom), a diverse stakeholder group whose mission is to support services for persons with mental health conditions, including those with co-occurring addiction needs, by supporting flexible, peer driven infrastructure across the state that will support recovery-oriented services and activities.



Coalition Strength

In striving to promote community-based mental health and addiction treatment services as the most appropriate, clinically effective and cost sensitive method for providing care to individuals in need, we have been fortunate to work with a variety of organizations. We are thankful for our coalition partners, including, but not limited to the following:

- Affordable Care Today!! (ACT!!)
- AIDS Action Committee
- Army OneSource
- Association of Developmental Disabilities Providers (ADDP)
- Boston Public Health Commission
- Boston University School of Public Health/Join Together
- The Campaign to Strengthen Human Services
- Children's League of Massachusetts
- Children's Mental Health Campaign
- Committee Against the Repeal of Alcohol Tax
- Health Care for All
- The Health Foundation of Central Massachusetts
- Massachusetts Aging and Mental Health Coalition
- Massachusetts Association of Alcohol and Drug Abuse Counselors
- Massachusetts Association for Behavioral Health Systems
- Massachusetts Coalition for Addiction Services (MCAS)
- Massachusetts Council of Human Service Providers
- Massachusetts Hospital Association
- Massachusetts Housing and Shelter Alliance
- Massachusetts League of Community Health Centers
- Massachusetts Mental Health Transformation Committee (TRANSCOM)
- Massachusetts Organization for Addiction Recovery (MOAR)
- Massachusetts People/Patients Organized for Wellness, Empowerment and Rights (M-Power)
- Massachusetts Psychiatric Society
- Massachusetts Psychological Association
- Massachusetts Public Health Council
- National Alliance on Mental Illness - Massachusetts (NAMI-MASS)
- National Association of Social Workers Massachusetts
- National Council for Community Behavioral Healthcare
- The National Empowerment Center
- New England Association of Drug Court Professionals
- Parent/Professional Advocacy League (PAL)
- Professional Advisory Council
- Recovery Homes Collaborative
- State Associations of Addiction Services (SAAS)



Ensuring Staff and Client Safety

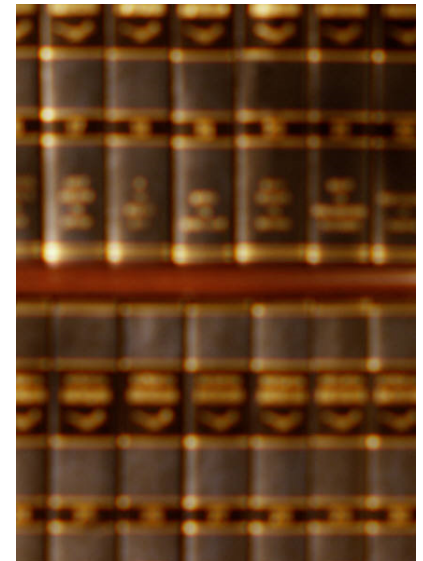
ABH exercised significant leadership in the aftermath of the tragic death of Stephanie Moulton, a staff person at a community-based mental health program. ABH, with an array of other stakeholder groups, worked to ensure that the public dialogue in the aftermath of Stephanie's death was thoughtful and constructive and avoided furthering the stigma against individuals living with mental illness. ABH and our members played a leading role in educating the DMH Task Force on Staff and Client Safety about both the value and challenges of providing community-based services in an era of fiscal austerity.

The Task Force's report contained many of the principles and ideas ABH first offered to the Task Force at the beginning of the process. ABH also hosted a dialogue on safety where staff from our membership organizations came together by modality to talk about safety issues in the workplace.

Modernizing Regulations

Success sometimes comes only after years of work. For a number of years, ABH worked to update and modernize the regulation of mental health clinics. A few years ago, the Department of Public Health amended its mental health clinic regulations to reflect current clinical practice regarding multidisciplinary teams (relative to treatment planning and case review) and utilization team review. These changes had minimal operational impact on outpatient clinics because MassHealth regulations were not amended to align with the Department of Public Health changes.

In April, ABH was extremely pleased to announce that MassHealth promulgated changes to its regulations that align the MassHealth clinic regulations with the Department of Public Health regulations. These proposed changes follow years of work by ABH and its members and ABH is grateful that these efforts came to fruition.



Ensuring Fair and Adequate Rates

Chapter 257 of the Acts of 2008 is intended to replace the Purchase of Service contracting system with a transparent rate-setting system in an effort to remedy the fact that human service contracts have been historically underfunded.

Over the past year, ABH continued the fight for implementation of *Chapter 257*. With our partners in *The Collaborative* (ABH, the Association of Developmental Disabilities Providers and the Providers' Council), we negotiated compromise legislation with the Patrick Administration that extended the deadline for implementation but which also prevented the Administration from moving forward on service redesigns and procurements without first setting a rate in accordance with Chapter 257. The negotiations with the Patrick Administration also included an agreement that a Chapter 257 Advisory Council, with representation from the human service industry, will be established to help guide the Administration in their efforts to implement Chapter 257.

In February, ABH learned that its work to **secure supplemental funding for Children's Behavioral Health Initiative (CBHI) Community Service Agencies (CSA) was successful. The Massachusetts Behavioral Health Partnership (MBHP) agreed to provide a second round of ramp-up funding for providers.** In addition, MBHP announced a series of temporary rate increases to increase access and continuity of care in the mental health outpatient system. As you know, ABH has worked very hard in recent years to educate state policy makers and MassHealth payers as to the inadequacy of outpatient reimbursement rates and their impact on access to services for consumers.

ABH has also been working diligently with the Bureau of Substance Abuse Services and the Division of Health Care Finance and Policy to ensure a rate increase for Acute Treatment Services (ATS). ABH and its members worked to develop a model budget to present to policymakers to advocate for an increased rate for this service.



Strengthening Community Services

ABH staff and its members have been at the forefront of behavioral health policy changes over the past year and strive to ensure that policies are developed and implemented to best serve the behavioral health community.

Community Based Flexible Supports

As the Department of Mental Health continued to implement Community Based Flexible Supports (CBFS), ABH continued to work with providers to elevate both systemic CBFS operational issues and to address macro-level issues relative to CBFS services, including contract capacity, funding, inpatient discharges, rate development, staff and client safety, contract monitoring, inpatient discharges, annual review meetings, and utilization factors. Sara Hartman, ABH's Vice President for Mental Health, co-chairs the state's CBFS Steering Committee with the Deputy Commissioner of the Department of Mental Health.

ABH also convened and supported a group comprised of peer and non-peer staff from eleven member organizations who met to identify concerns regarding CBFS Individual Action Plans (IAPs) and documentation of risk. In March, the group finalized a report of its findings which was submitted to the Department of Mental Health.

Children's Behavioral Health Initiative

In FY 2011, the state continued to implement the Children's Behavioral Health Initiative (CBHI) and ABH devoted a great deal of time and resources to ensure that the system is one that best meets the needs of children served by CBHI. ABH's Children's Services Committee focuses on CBHI services and the Children's Policy Committee identifies overarching policy issues associated with child and adolescent mental health and addiction services. ABH also participates in the Children's Behavioral Health Advisory Council, the Professional Advisory Council, CBHI Stakeholder meetings, and the Children's Mental Health Campaign.

Certified Peer Specialists Subcommittee

Throughout the year, ABH worked with the Department of Mental Health, the University of Massachusetts Center for Health Policy and Research, and peer representatives to research potential Medicaid funding alternatives for Certified Peer Specialists. This resulted in the development of language to be used in submitting a request to the Centers for Medicaid and Medicare Services for Medicaid funding for peer specialists as a unique provider type. In the meantime, the Transformation Committee is supporting the expansion of Peer Specialist services embedded in other new Medicaid initiatives.



Battle at the Ballot Box

Although ABH and its coalition partners in the Committee Against Repeal of the Alcohol Tax worked diligently to defeat Question 1, the liquor industry outspent our campaign by a 13:1 margin and the ballot question passed by a margin of 52-48, repealing the sales tax on alcohol effective January 1, 2011. While the result was not what ABH wanted, we did learn many important lessons. The first, and perhaps most important, is how the behavioral health community can pull together toward a common goal. We also learned (and this is a lesson that has proven true time and time again) that we can count on our outstanding members to get involved and take action. For that, we thank you.

Following the election, ABH successfully worked with the Patrick Administration to ensure addiction treatment funding for the remainder of Fiscal Year 2011. In addition, ABH recognized Senator Jennifer Flanagan, Representative Liz Malia, and Representative James O'Day for their efforts to increase access to mental health and addiction treatment services throughout the Commonwealth.



Implementing Change

The state's behavioral health system is in a constant state of change. ABH works diligently to keep members abreast of any and all changes and to monitor implementation of these policy and systems changes.

ABH monitored a number of procurements during the year, including:

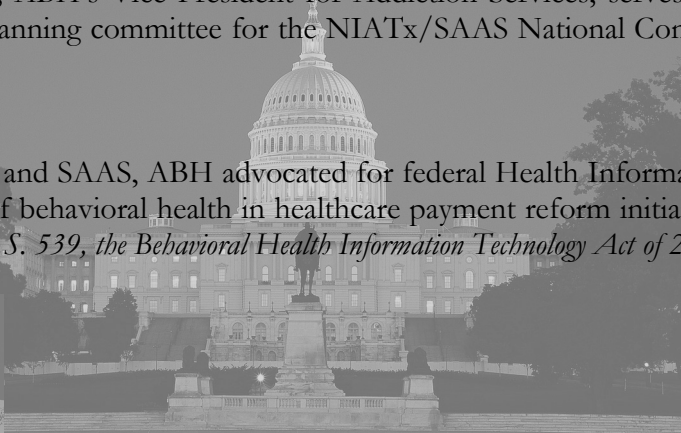
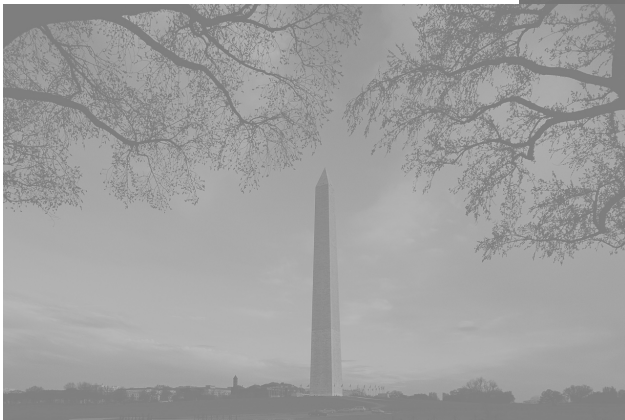
- ◆ Department of Mental Health Individual and Family Flexible Supports Procurement
- ◆ Department of Mental Health/Department of Children and Families Joint Residential Procurement
- ◆ Department of Mental Health Clubhouse Procurement
- ◆ Bureau of Substance Abuse Services — Outpatient Services
- ◆ Bureau of Substance Abuse Services — Clinical Stabilization Services (CSS)
- ◆ MassHealth Primary Care Clinician Plan — Comprehensive Behavioral Health Program and Management Support Services, and Behavioral Health Specialty Programs



Work at the National Level

ABH works closely with two national associations: the **National Council for Community Behavioral Healthcare** (the National Council) and the **State Associations of Addiction Services** (SAAS). This year, Vic DiGravio, ABH's President/CEO, was elected Chair of the National Council's Association Executives Group and also serves on the National Council's Board of Directors and Public Policy Committee. Connie Peters, ABH's Vice President for Addiction Services, serves as the Vice President of the SAAS Board of Directors and co-chaired the planning committee for the NIATx/SAAS National Conference that was held in Boston this past summer.

In partnership with the National Council and SAAS, ABH advocated for federal Health Information Technology funding for behavioral health providers and the inclusion of behavioral health in healthcare payment reform initiatives. ABH was extremely pleased to secure Senator Kerry's co-sponsorship of *S. 539, the Behavioral Health Information Technology Act of 2011*.



State House Advocates

With the state facing uncertain fiscal times, ABH worked diligently to advocate for our budgetary and legislative priorities. As a result of our advocacy and that of our members, the FY 2012 budget:

- Contains an almost \$20 million increase in funding for the Department of Mental Health over projected FY 2011 spending
- Ensures that the state will not lose federal matching funding for the Bureau of Substance Abuse Services
- Transfers oversight authority for MassHealth addiction treatment benefits from the Department of Mental Health to the Department of Public Health

ABH also formed a healthcare reform subcommittee that developed ABH's healthcare payment reform priorities and met with numerous state legislators about these priorities. They include:

- Behavioral health must be recognized as a core service and the state must ensure access to mental health and addiction treatment
- The Legislature must ensure that Accountable Care Organizations identify individuals who are at risk for behavioral health disorders
- Behavioral health providers should be able to be health homes for individuals with mental illness and/or substance use disorders
- The Commonwealth should use both performance outcome measures and process outcome measures to ensure individuals are receiving the behavioral health services they require
- Care coordination should be located at the provider level
- The state must take steps to ensure access to health information technology as well as funding for implementation of health information technology
- The Legislature should consider a "maintenance of effort" requirement regarding existing covered services and/or populations in order to protect against underutilization of behavioral health services

ABH keeps members informed of budget developments through regular correspondence, including ***Community Conversations***, conference calls designed to brief members on key items included in the budget and their impact on ABH members.



Legislative Priorities

Fiscal Year 2011 marked the start of the 2011-2012 Legislative Session. Over the course of the two year session, ABH will monitor the status of hundreds of bills, testify on bills of importance to ABH members and keep members updated on developments. ABH also filed four bills on behalf of our members:

S. 983, An Act Relative to MassHealth Substance Abuse Services

This legislation would give the Commissioner of the Department of Public Health authority over MassHealth addiction benefits. **This language was adopted as part of the FY 2012 budget.**

H. 1299, An Act Relative to Behavioral Health Emergency Services

This legislation would require Medicaid managed care entities to pay a floor rate to providers for adult emergency and crisis services.

H. 1425, An Act Relative to Behavioral Health Managed Care Organizations

This legislation would require that contracts between managed care organizations and specialty behavioral health managed care organizations to be subject the state's public records law.

H. 1426 and S. 982, An Act Relative to Mental Health and Substance Abuse Clinics

This legislation would provide deemed status to mental health and substance abuse clinics that are accredited by a national accrediting body. Clinics that are granted deemed status would be determined to be in compliance with the Commonwealth's licensing requirements.

Copies of ABH's legislative, budget, and regulatory testimony can be found on our website, www.ABHmass.org.



ABH Committees

Our committees are essential to setting ABH's agenda and participation on almost all committees is open to our full membership. Our committees, which fall into three categories: *Policy and Systems*, *Mental Health Services*, and *Addiction Treatment Services*, identify pertinent policies and programmatic issues to be discussed or addressed by ABH.

The work of our committees over the past year has been quite impressive. Some highlights include:

- ◇ Developed a Structured Outpatient Addiction Program Treatment Planning Guide
- ◇ Provided input to the state on the new Medication Assistance Program Draft Manual
- ◇ Assisted ABH in the development of a salary survey
- ◇ Addressed numerous issues regarding cross-over claims
- ◇ Conducted a CBHI Community Support Agency financial survey and rate analysis
- ◇ Conducted a survey regarding Acute Treatment Services authorizations and lengths of stay across payers
- ◇ Developed recommendations for the MassHealth Psychiatric Day Treatment regulations
- ◇ Began initial discussions with the Bureau of Substance Abuse Services regarding a proposal to grant deemed status to Methadone providers
- ◇ Prepared providers for Medicaid 5010 billing implementation
- ◇ Shared organization-specific initiatives on health and wellness

ABH'S EXECUTIVE TEAMS

- The *ABH/Department of Mental Health Executive Team* regularly meets with DMH Commissioner Barbara Leadholm and her senior staff to discuss issues impacting community-based providers in serving DMH clients.
- The *ABH/Bureau of Substance Abuse Services Executive Team* works closely with DPH Commissioner John Auerbach and BSAS Director Michael Botticelli.
- The *ABH/MassHealth Executive Team* meets regularly with the Director of Behavioral Health for MassHealth Chris Counihan.
- ABH meets quarterly with the state's Medicaid Managed Care Organizations to discuss issues of mutual interest.



Policy and Systems Committees

Billing, Rules, Regulations and Policy Committee

Corporate Compliance Committee

e-Health Committee

Human Resources Committee

Managed Care Committee

Quality and Outcomes Committee

Uniform Financial Reporting Committee

Mental Health Services Committees

Children's Policy Committee

Children's Services Committee

Community Based Flexible Supports Committee

Emergency Service Programs Committee

In-Home Therapy Committee

Program of Assertive Community Treatment (PACT) Providers Committee

Psychiatric Day Treatment/Partial Hospitalization Committee

Addiction Treatment Services Committees

Acute Treatment Services (ATS) Committee

Clinical Stabilization Services (CSS) Committee

Driver Alcohol Education/Second Offender Aftercare Committee

Opioid Treatment Providers Committee

Recovery Committee for Residential Services

Structured Outpatient Addiction Program Committee (SOAP)

Member Services:

- ✓ E-Update
- ✓ Regular operational issues updates
- ✓ Annual *Salute to Excellence*
- ✓ Association meetings
- ✓ Trainings
- ✓ Committee meetings
- ✓ Legislative updates
- ✓ State budget tracking
- ✓ Action alerts
- ✓ Legislative and budget testimony
- ✓ Regulatory testimony
- ✓ Updates on regulation changes
- ✓ Essential Learning discounts
- ✓ Salary survey
- ✓ Procurement and policy monitoring
- ✓ Professional Opportunities



ABH Board of Directors

Kevin Norton, Northeast Behavioral Health, **Chair**

Jackie Moore, North Suffolk Mental Health Association, **Treasurer**

Al Scott, Mental Health Association of Greater Lowell, **Clerk**

Vic DiGravio, **President/CEO**

Ellen Attaliades, The Edinburg Center, Inc.

Edward Blain, Community Health Care, Inc.

Scott Bock, Riverside Community Care

Bruce Bird, Vinfen Corporation, Inc.

Maurice Boisvert, Youth Opportunities Upheld, Inc.

Gerard Desilets, SMOC Behavioral Health Services

Henry East-Trou, Gandara Mental Health Center

Deborah Ekstrom, Community Healthlink

Charles Faris, Spectrum Health Systems, Inc.

Norma Finkelstein, Institute for Health & Recovery

Steven Hahn, NFI Massachusetts, Inc.

Karin Jeffers, Clinical & Support Options, Inc.

Janice Kauffman, Addiction Treatment Services, North Charles, Inc.

Eric Masi, Wayside Youth & Family Support Network

Daniel Mumbauer, High Point Treatment Center, Inc.

Nancy Paull, SSTAR

Andrew Pollock, Cutchins Programs for Children & Families, Inc.

Andrew Pond, Justice Resource Institute

Frank Sacco, Community Services Institute

Carla Saccone, Children's Friend & Family Services

Jonathan Scott, Victory Programs, Inc.

Philip Shea, Community Counseling of Bristol County, Inc.

Harry Shulman, South Shore Mental Health Center

William Sprague, Bay Cove Human Services

Susan Stubbs, ServiceNet

Ken Tarabelli, Bay State Community Services

William Taylor, Advocates, Inc.

Joan Wallace-Benjamin, The Home for Little Wanderers

Barry Walsh, The Bridge of Central MA

Carlton Watson, Henry Lee Willis Community Center, Inc.

Kathy Wilson, Behavioral Health Network



ABH Member Organizations

It goes without saying that we are incredibly grateful for the support of our member organizations. Your work truly does make a difference in the lives of thousands of individuals and families

Adcare Educational Institute
 Addiction Treatment Center of N.E.
 Advocates
 Amesbury Psychological Center
 Bay Cove Human Services
 Bay State Community Services
 Behavioral Health Network
 Boston A.S.A.P.
 Boston Healthcare for the Homeless
 Boston Public Health Commission
 The Bridge of Central Massachusetts
 The Brien Center
 Brightside
 Brookline Community Mental Health Ctr.
 Cape Cod Healthcare
 The Carson Center for Human Services
 Casa Esperanza
 C.A.S.P.A.R.
 Catholic Charities
 Center for Human Development
 Child & Family Services of New Bedford
 Children's Friend
 Children's Friend and Family Services
 Children's Services of Roxbury
 Clinical and Support Options

Community Care Services
 Community Counseling of Bristol County
 Community Health Care
 Community Healthlink
 Community Services Institute
 Cutchins Programs for Children & Families
 Dimock Community Health Center
 The Edinburg Center
 Eliot Community Human Services
 Family and Community Solutions
 The Family Center
 Family Services of Greater Boston
 Fellowship Health Resources
 Fenway Community Health Center
 Gandara Mental Health Center
 George B. Wells Human Services Center
 Gosnold on Cape Cod
 Habit OPCO
 Harbor Counseling Center
 Henry Lee Willis Community Center
 High Point Treatment Center
 The Home for Little Wanderers
 hopeFound
 Institute for Health & Recovery
 Jewish Family & Children's Services

Judge Baker Children's Services
 Justice Resource Institute
 Key Program
 Lowell Community Health Center
 Luk Crisis Center
 Massachusetts General Hospital
 Mental Health Assoc. of Greater Lowell
 MSPCC
 NFI Massachusetts
 North Charles Institute
 Northeast Behavioral Health
 North Suffolk Mental Health Association
 Old Colony Y Services Corporation
 Phoenix Houses of New England
 Pine Street Inn
 Project COPE
 The Psychological Center
 River Valley Counseling Center
 Riverside Community Care
 ServiceNet
 SMOC Behavioral Health Services
 Somerville Mental Health Association
 South Bay Mental Health Center
 South End Community Health
 South Shore Mental Health

Spectrum Health Systems
 SSTAR
 Steppingstone
 Team Coordinating Agency
 Valley Psychiatric Service
 Victory Programs
 Vinfen Corporation
 Wayside Youth & Family Support Network
 Youth Opportunities Upheld

Associate Members

Bostonian Group
 Doherty, Ciechanowski, Dugan & Cannon, P.C.
 The Echo Group
 eHana
 Health Enhancement Services
 The Health Foundation of Central Massachusetts
 Hill Associates
 Hirsch, Roberts, & Weinstein
 Human Relations Services
 iCentrix Corporation
 Kalandavis
 Medical Reimbursement Systems
 Sequest Technologies
 STM Technology





ASSOCIATION
FOR BEHAVIORAL
HEALTHCARE

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Association for Behavioral Healthcare Foundation, Inc.**

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