

**Testimony of Edward B. Michalik, Psy. D.,
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Before the Pennsylvania Senate Committees on Health and Human
Services, Aging and Youth, Intergovernmental Operations and the Health
and Human Services Subcommittee of the Appropriations Committee

Reading Hospital
April 13, 2017

As a career Human Services professional and Administrator of over 32 years, I have had the privilege of working within, overseeing and managing multiple human service agencies and funding streams. Although I remain neutral concerning the Governor's proposed unification of both Department of Drug & Alcohol Programs (DDAP) and Department of Aging (PDA) under the Department of Human Services (DHS), I would strongly urge the Governor, Legislators and appointed officials, to thoroughly examine & consider the "Top Ten" Unification & Policy Goals of the County Commissioner's Association of Pennsylvania (CCAP). To that end that the proposed merger indeed improves collaboration, reduces bureaucracy, enhances and improves programming, and fosters an atmosphere of innovation and cross-system integration, in the service of serving people, then only positive can arise from this effort. However, this proposal by far would be among the most monumental change in State Government in my tenure as a professional.

In Berks County we have integrated several of our Human Service Agencies as have many other Counties in Pennsylvania. Our goal has never been solely or primarily that of saving money but definitely has held the needs of those we serve foremost in our planning, implementation and delivery of service. I ask on behalf of my staff, our various advisory bodies and those we serve, that should you move forward with this unification or consolidation, you keep foremost in your planning the following points to consider. As there is limited information available, I urge you to consider the following recommendations or guiding principles that I and others have asked me to include in this testimony;

1. Maintenance or integrity of current categorical funding streams for both Aging and Drug & Alcohol Programs is the most critical tenet. Any attempts to integrate or unify these Departments AND their funding streams would be ill-advised. This would not preclude the consolidation of Data, Information Technology, Licensing or Human Resource Functions. Explanation of how any savings realized and what impact that would clearly have on service to the people we serve needs to be communicated. As an administrator of MH/DD and HealthChoices programs, and also the Executive Director of our Agency on Aging, I have seen many consumers whose needs cross multiple systems. If this proposal's true intent is to streamline the service recipient's access to service as well as to improve the quality of service, then it is a worthy effort.

2. Many people are concerned about the proposal unveiled thus far as little mention has been made as to how the various stakeholder groups at the grass-roots level will maintain a distinct voice. There are many unique needs of individuals that need to be taken into account when developing this model. Ensuring a voice for Seniors and those with addictions is paramount to the success of such an endeavor and should be one of its primary goals.
3. Ensuring the health of the Lottery Fund and continuing flexibility in that fund is a serious concern of our Seniors in Berks County. The current dedication of Lottery Funds to services delivered through our Area Agencies on Aging must be left in place.
4. Maintenance of the Human Services Block Grant and its flexibility has served Berks County and other counties well. Its continuation is vital to ensure that services continue to be provided without interruption to our most vulnerable citizens.
5. Last but not least, County Government in Pennsylvania is at the forefront of effective and efficient management of services. Our citizens turn to us first and foremost when they require or are in need of service. Please ensure that we remain at the forefront of this process.

I thank you for the privilege and opportunity to be heard. With ongoing changes as to how Seniors access services, current restructuring of our local County Assistance Offices and the dawn of the Community HealthChoices Initiative, there is ample concern and alarm already in play. Careful and concise communication with inclusion of the respective advocacy communities, providers and Counties as full partners is a vital and necessary element to any system change of this proportion.

Respectfully Submitted,



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