

February 6, 2019

The Honorable Cory Booker  
The Honorable Josh Gottheimer  
The Honorable Tomasz Malinowski  
The Honorable Frank Pallone  
The Honorable Donald Payne  
The Honorable Albio Sires  
The Honorable Jefferson Van Drew

The Honorable Robert Menendez  
The Honorable Andrew Kim  
The Honorable Donald Norcross  
The Honorable William Pascrell  
The Honorable Mikie Sherrill  
The Honorable Christopher Smith  
The Honorable Bonnie Watson Coleman

Dear New Jersey Congressional Representative:

As you identify legislative priorities for the 116<sup>th</sup> Congress, the undersigned organizations **urge you to act quickly to extend and expand the Certified Community Behavioral Health Clinic (CCBHC) demonstration**. As our country continues to confront an addiction crisis, it is clear that too little has been done to build sustainable addiction treatment capacity in our communities and states. Congress' recent opioid package was an important first step in addressing this issue; however, the package's grant funding will only provide time-limited support for services. **Now is the time to make the long-term investment in the full continuum of care for addiction** needed to address both the root causes and the results of the opioid epidemic – just as we have done for the AIDS epidemic.

Congress established Certified Community Behavioral Health Clinics in the 2014 bipartisan Excellence in Mental Health Act. Since launching in 2017, CCBHCs have dramatically improved access to community-based addiction and mental health care in the eight states where they operate, particularly opioid addiction services. CCBHCs have hired hundreds of new addiction-focused clinicians, expanded medication-assisted treatment (MAT) and other addiction services, and reduced patient wait times. **However, with the CCBHC demonstration set to end in mid-2019, access to these lifesaving treatments could be lost.**

Results from a new National Council for Behavioral Health report shows that states face a looming crisis in access to care with the CCBHC demonstration set to end on March 31, 2019 in Oregon and Oklahoma and June 30, 2019 in Minnesota, Missouri, Nevada, New Jersey, New York and Pennsylvania. **Specifically, the report shows that the end of the CCBHC program would result in 9,100 patients losing access to medication-assisted treatment (MAT) and that 3,000 clinicians and staff would be laid off.** Patients would lose timely access to services with 77 percent of CCBHCs reporting that they would have to re-establish a waitlist for services, while others would lose access to care entirely with over half of CCBHCs reporting that they will have to turn people away from care.



Importantly, certification requirements require that CCBHCs coordinate care with partners in the criminal justice system and veteran's organizations. In communities where CCBHCs are up and running, sheriffs and police officers now have access to on-the-ground support from trained mental health and addiction professionals, alleviating the burden on front-line officers and helping people get access to the correct level of treatment. **If Congress does not act quickly to extend the life of CCBHC program, CCBHCs will be forced to end partnerships with criminal justice agencies, which have been a vital tool in helping communities reduce recidivism and connect people to the right level of care.**

The Excellence in Mental Health and Addiction Treatment Expansion Act would ensure that states and clinics do not see their progress in expanding mental health and addiction care stripped away in the coming months. The bill would extend current CCBHCs' activities for one more year and expand the program to eleven more states that applied but were excluded from participation by the eight-state limit in the current law. We hope that Congress will act swiftly to reintroduce this measure in the House and Senate in 2019.

**In conclusion, we urge you to invest in the promising CCBHC model as a means to address the opioid epidemic and the broader behavioral health crisis in America by supporting the reintroduction and passage of the Excellence in Mental Health and Addiction Treatment Expansion Act.** Thank you for your leadership in addressing this critical issue.

Sincerely,

New Jersey's CCBHC Providers

AtlantiCare Behavioral Health  
CarePlus New Jersey, Inc.  
CPC Behavioral Healthcare, Inc.  
Catholic Charities – Diocese of Trenton  
Northwest Essex Community Healthcare Network, Inc.  
Oaks Integrated Care  
Ocean Mental Health Services, Inc.  
Rutgers University Behavioral Health Care  
SERV Behavioral Health System, Inc.

Other Treatment Providers

The Bridge, Inc.  
Cape Counseling Services  
Capital Health System  
CareLink Community Support Services of New Jersey  
Children's Center of Clifton and Passaic



Corporation for Supportive Housing  
Codey Fund for Mental Health  
Dominion Behavioral Health Policy, LLC  
George J. Otlowski, Sr. Center for Mental Health  
Jewish Family Service & Children's Center of Clifton-Passaic Inc.  
Jewish Federation of Northern New Jersey  
Jewish Federation of Somerset, Hunterdon, and Warren Counties  
John Brooks Recovery Center  
Mental Health Association in Southwestern New Jersey  
NewBridge Services, Inc.  
Robins' Nest Inc.

State/National Associations

Mental Health Association in New Jersey, Inc. (MHANJ)  
National Association of Social Workers – N.J. Chapter (NASW –NJ)  
NAMI New Jersey  
National Association of County Behavioral Health and Developmental Disability Directors (NACBHDD)  
National Association for Rural Mental Health (NARMH)  
New Jersey Association of Mental Health and Addiction Agencies (NJAMHAA)  
New Jersey Chapter, American Academy of Pediatrics  
New Jersey Citizen Action  
New Jersey Health Care Quality Institute  
New Jersey Psychiatric Rehabilitation Association (NJPRA)  
New Jersey Society of Addiction Medicine (NJSAM)  
New Jersey State Association of Jewish Federations  
Supportive Housing Association of New Jersey (SHA)  
Volunteers of America – Greater New York

