



New Jersey's Certified Community Behavioral Health Clinics

Overview

The Certified Community Behavioral Health Clinic (CCBHC) federal demonstration program launched in 2017 in eight states, including New Jersey. These programs serve adults and children and provide mental health and substance use treatment, crisis services, case management, primary health care and more. An enhanced rate allows providers the flexibility to deliver truly holistic, integrated care. Study after study on the impact of CCBHCs report very positive outcomes.

New Jersey's CCBHC Organizations and Areas/Numbers Served

New Jersey now has nine CCBHCs. Seven are funded under the initial demonstration program¹: AtlantiCare Behavioral Health, Care Plus NJ, Catholic Charities – Diocese of Trenton, CPC Behavioral Health Care, Northwest Essex Community Healthcare Network, Oaks Integrated Care, and Rutgers University Behavioral Health Care. Ocean Mental Health Services and SERV Behavioral Health became CCBHCs with funding from the one-time expansion grants appropriated in the fall of 2018.

The CCBHCs have one dozen locations in Atlantic, Bergen, Burlington, Essex, Mercer, Middlesex and Monmouth Counties. While the majority of their clients come from their home counties, these CCBHCs have served individuals from sixteen counties: Atlantic, Bergen, Burlington, Camden, Cape May, Cumberland, Essex, Gloucester, Hudson, Mercer, Middlesex, Monmouth, Ocean, Passaic, Somerset, and Union. New Jersey's CCBHCs served 18,130 individuals in their first year of operation and 19,101 in year two.

Outcomes

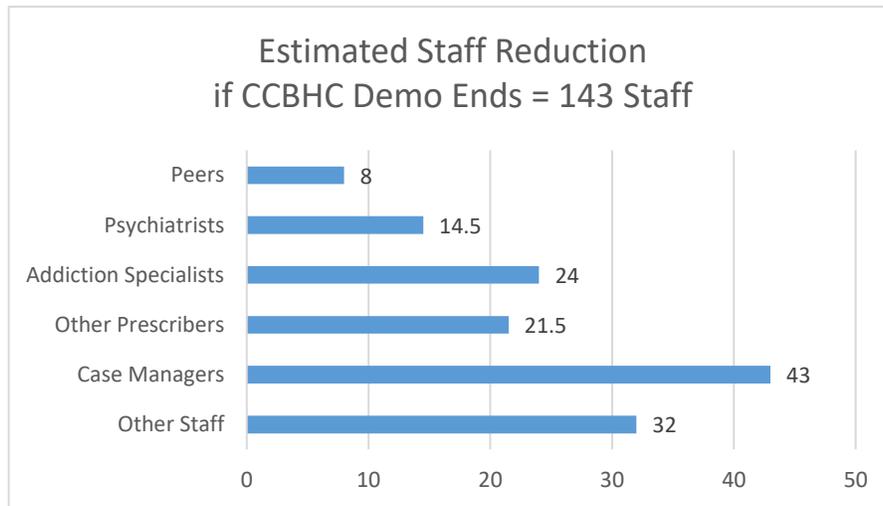
New Jersey's CCBHCs have dramatically improved access to community-based substance use treatment and mental health care, having had the ability to hire many new substance use-focused clinicians and expand medication assisted treatment (MAT) and other services, while reducing patient wait times. Those outcomes derive from not only the model itself, but also the reimbursement that is provided, which has enabled the CCBHCs to add the new staff positions. New Jersey's seven CCBHCs that began operating in 2017 shared a sampling of the remarkable outcomes they have achieved to date, including:

- Three CCBHCs noted reductions in psychiatric hospitalizations in their region, with one region experiencing a 65% drop.
- Two CCBHCs noted 26% and 33% drops in emergency room screenings.
- Many CCBHCs reported on the increased percentage of the number of their clients receiving medication assisted treatment, ranging from 30% to 100%.
- All CCBHCs saw an increase in the number of clients served.
- Some reported on the significant increase in the number of prescribers on staff, including one that doubled their prescribers (to eight), including three certified to treat children.
- A decrease in wait times also was achieved by the CCBHCs, with one organization reducing wait time for a first appointment from 21 days to less than 4 days.

¹ All data in this document – staffing, numbers served, etc. are from the original seven CCBHCs, as the other two were not operational until 2019.

Staff Expansion

In a February 2019 survey, New Jersey’s CCBHCs reported that 143 of their 195 new hires will have to be let go if the demonstration is not extended. This includes psychiatrists and other prescribers, addiction specialists, case managers, peers and other staff. Subsequently, almost all new or expanded services will be reduced or cease (see chart on service reduction below).



Expanded, and Potential Loss of, Services

As shown in the table below, four agencies would no longer provide ambulatory detoxification, the other three would see a reduction in those services; six CCBHCs would reduce their MAT services and one would cease those services altogether. All services will be affected. CCBHCs anticipate that over 600 individuals will no longer receive MAT services.

	Added New Service	Expanded Service	Will Have to Reduce Services	Will Cease This Service
Ambulatory detoxification	7		3	4
Toxicology	3	3	4	
Withdrawal management	7		5	1
Medication-assisted treatment (MAT)	3	4	6	1
Addiction counseling		7	5	
Case management	4	3	2	5
Peer Recovery Coaches	5	2	1	3
Supported employment	1	4	4	1
Education support services	1	2	1	1
Addiction services via telehealth	3		1	2

The Future for the CCBHCs

If the CCBHC demonstration program is not sustained and expanded, not only will many gains in fighting the opioid epidemic be lost, but a promising model of integrated care providing community mental health and collaborating to great effect with law enforcement, hospitals and other community institutions will disappear.