

Minnesota Association of Community Mental Health Programs

Senator Jim Abeler, Chair Human Services Reform Finance & Policy Committee Minnesota State Senate March 29, 2022

Dear Chair Abeler and Members of the Committee

Thank you for hearing Senator Wiklund's Senate File 4151 — Certified Community Behavioral Health Clinics (CCBHC) policy changes. On behalf of the Minnesota Association of Community Mental Health Programs (MACMHP), I am writing this letter asking for the Committee's support of SF 4151.

Minnesota Community Mental Health Programs' Perspective

The Minnesota Association of Community Mental Health Programs (MACMHP) is the state's leading association for Community Mental Health Centers and Programs, representing 35 community-based mental health providers and agencies across the state. Our mission is to serve all who come to us seeking mental and chemical health services, regardless of their insurance status, ability to pay or where they live. Collectively, we serve over 200,000 Minnesota families, children and adults on public programs.

Minnesota's Certified Community Behavioral Health Clinic (CCBHC) model started as a new model of delivering integrated behavioral health care to Minnesotans. Originally developed under a federal demonstration, MACMHP is thrilled CCBHC is now a Medical Assistance (MA) benefit in Minnesota. We wish to thank you and the rest of the legislature for making this a reality and ongoing support.

There are currently 11 certified CCBHCs in Minnesota with several more on the pathway to becoming certified within this year and next. There are also additional agencies with federal expansion grants building out their CCBHC models to become certified within another two years. MACMHP represents all of the currently certified CCBHCs in Minnesota, and we work closely with the prospective agencies with federal funding.

CCBHC was designed with the vision to be a one-stop shop for all eligible clients to receive integrated community mental and chemical health services, with care coordination and streamlined supports from our mental health system. This is opposed to clients and providers having to navigate our fragmented systems for care. However, currently there is no single statutory or regulatory authority today that recognizes all the CCBHC services and requirements under one integrated clinic entity. Rather, CCBHCs must demonstrate compliance separately across individual services licensures/ certifications in addition to the CCBHC certification. These current individual program standards have conflicting requirements. This translates to increased time and costs for providers and our system who are already strapped under the ongoing pandemic and workforce crisis.

SF 4151 takes first steps in streamlining the model's requirements as CCBHC grows and evolves in Minnesota. I am asking you to please support the passage of SF 4151 to help us continue to increase access and sustain our mental health care in Minnesota

Thank you for considering our request. Please do not hesitate to reach out to <u>jin.palen@macmhp.org</u> with any questions or for additional information.

Sincerely

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Executive Director

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