



June 3, 2019

The Honorable Anna G. Eshoo  
Chairwoman, Subcommittee on Health  
Committee on Energy and Commerce  
U.S. House of Representatives  
Washington, D.C. 20515

The Honorable Michael C. Burgess  
Ranking Member, Subcommittee on Health  
Committee on Energy and Commerce  
U.S. House of Representatives  
Washington, D.C. 20515

Dear Chairwoman Eshoo and Ranking Member Burgess:

On behalf AFSCME District 1199J, the National Union of Hospital and Health Care Employees, and CarePlus NJ, we applaud you for holding this timely hearing on programs that invest in health care delivery, such as the Certified Community Behavioral Health Clinic (CCBHC) program.

AFSCME 1199J members deliver many CCBHC services at CarePlus NJ. Both our organizations support the CCBHC model to provide a comprehensive range of addiction and mental health services to vulnerable individuals. Sixty-five AFSCME 1199J members who are therapists, case managers, administrative support staff, a Licensed Practical Nurse and a receptionist provide services in 14 clinical departments in Paramus, Fair Lawn and Hasbrouck Heights New Jersey. Their positions and the care they provided depend on the CCBHC funding.

These crucial employees see from the frontlines how the CCBHC program offers hope to individuals with severe mental health and substance use disorder conditions. With every new individual we help, we can strengthen families and communities. From July 2017-June 2018 the CCBHC fiscal model enabled CarePlus NJ to decrease wait times for care from an average of 45 days to 6 days with the CCBHC staff. We have an average of 1,000 patients a month being served in the CCBHC, and we have had the highest consumer satisfaction from 93% to 97% overall that has been reported.

While several factors make the programs at CarePlus NJ work, including a positive labor-management partnership, proper financing is a crucial investment to increase capacity and sustain the level of staff necessary to delivery high quality coordinated behavioral health services. Under the CCBHC model, the Medicaid reimbursement rate is not a fee for service

payment, but a prospective payment based on the anticipated costs of expanding services to meet the needs of these complex populations.

Our organizations have decades of experience in health care and in working to strengthen communities across New Jersey. The CCBHC funding model is far more effective and less costly than when individuals in need of mental health services or addiction treatment instead find themselves in emergency rooms, county jails, homeless shelters and local law enforcement agencies.

We urge you to continue your bipartisan support for this program's funding model and ensure that the June 30 termination of funds does not occur.

Sincerely,



SUSAN M. CLEARY  
President  
AFSCME District 1199J



JOSEPH MASCIANDARO, MA  
President and CEO  
CarePlus NJ

cc: The Honorable Frank Pallone, Jr., Chairman, House Energy and Commerce Committee