



Joint Special Committee on Coronavirus Response Senate Committee on Mental Health House Committee on Behavioral Health March 19, 2020

Dear Committee Chairs and Members,

People living with untreated mental illness and addictions are some of Oregon's most vulnerable citizens, putting them at high risk for the coronavirus. We are reaching out to you to highlight how Certified Community Behavioral Health Clinics (CCBHCs) are critical to creating a safety net in our communities to provide treatment to people with behavioral health needs during this crisis and beyond.

All CCBHCs are required to deliver 20 hours of primary care per week and right now nearly all CCBHCs have implemented telehealth to reach consumers, meaning they are poised and ready to leverage technology to expand access during this heightened time of concern. They are able to do this because of the reimbursement provided by the CCBHC model.

As you well know, there is a shortage of community-based treatment options for people with mental illness and addictions, leaving people seeking behavioral health care to use the Emergency Department. Across the nation, CCBHCs have shown to significantly reduce ED usage. As the number of people with COVID-19 rises we must free up our EDs to treat those with the virus. Extending CCBHCs will allow them to expand behavioral health access, giving hospitals the space they need to treat this pandemic.

The rise of COVID-19 in our country increases stress for everyone. However, the effects of additional stress on those living with mental illness and addictions (treated or untreated) magnifies feelings of anxiety, fear, and uncertainty, creating a need to connect with a provider for help immediately. As the number of people seeking mental health treatment and physical health screenings increase amidst the COVID -19 pandemic, the extension of CCBHCs will divert those with immediate needs who might otherwise seek help in hospital settings and proactively address the long term emotional effects of this pandemic.

In the 2020 Session, the State was poised to provide funding to continue this essential program and draw down more than \$60M in federal funds for our behavioral health system. Without this funding our state is at risk of losing a system of care at the time we need it most. We are asking that the Legislature allocate the funds necessary to continue this program.

Below are additional examples of how Oregon's CCBHCs have been able to expand COVID-related care:

- Additional health screening and service personnel (nurses, peer wellness facilitators, care coordination team) who screen for coronavirus and other illnesses, by phone and in person
- Onsite crisis and urgent clinical support, medication management (including injectables)
- Outreach and engagement, housing and social supports, and other services offered outside clinics
- Continuing operations to minimize clients' anxiety and to assure a community safety net, contingent on continuing PPS payment model and restoring other funding as requested in 2020 legislative session

Please let us know if we can provide any additional information. Thank you for your leadership during this uncertain time.

Sincerely,

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CC: Oregon Health Authority