Established under the Protecting Access to Medicare Act of 2014, Certified Community Behavioral Health Clinics (CCBHCs) provide a comprehensive range of mental health and addiction services to vulnerable individuals who might otherwise not receive them. In return, CCBHCs receive a Medicaid reimbursement rate based on their anticipated costs of care and treatment.

Minnesota is 1 of 8 CCBHC demonstration states. Since July 2017, 6 CCBHCs in the state have been delivering these important services.

Addressing Workforce Shortages & Creating Jobs

Amid a nationwide behavioral health workforce shortage, CCBHC status has helped clinics recruit and retain desperately needed staff.

“[Since the beginning of the CCBHC program] we have increased our ability to hire at a wage that is comparable to our state/region, which allowed for increased workforce to more appropriately meet the needs in our rural area. Our agency has a renewed focus on internal collaboration and integration to better meet client needs.”

“Our focus on client-centered care and full spectrum services has been attractive to prospective new employees. We have been able to successfully fill over 90% of positions posted since CCBHC launch.”

Fully Integrated Care with Substance Use Disorder Treatment

CCBHCs are, for many communities in Minnesota, the first integrated mental health and substance use treatment facility. CCBHCs are required to provide substance use treatment, helping communities address the ongoing opioid crisis. CCBHCs serve a population with an especially high prevalence of co-occurring disorders: 85% of CCBHCs noted that more than half of their patients with an addiction have a mental health condition such as schizophrenia or post-traumatic stress disorder.

“In year 1, 94% of CCBHCs nationally, treated more patients for addiction by taking new patients & improving screening.

68% of CCBHCs report a decrease in patient wait times for addiction care and nearly 1/2 provide same-day access.”
Future of the CCBHC Demonstration in Minnesota

The CCBHC demonstration is transforming Minnesota’s ability to serve people in their communities. Unfortunately, without Congressional action, the state’s six CCBHCs will be forced to stop in their tracks when the program ends in 2019. The bipartisan Excellence in Mental Health and Addiction Treatment Expansion Act (S. 1905/H.R. 3931), authored by Senators Roy Blunt and Debbie Stabenow and Representatives Doris Matsui and Leonard Lance, would extend Minnesota CCBHCs’ activities for another year and expand the program to include 11 other states.

We urge Congress to take quick action to extend the life of this important demonstration program.

Support for the Criminal Justice System & Reducing Recidivism

CCBHC certification requirements and payment structure support the establishment of new collaborative relationships with partners in the criminal justice system, important since individuals living with mental illnesses are drastically overrepresented in jails and prisons.

“We are becoming very proactive with trauma informed treatment, including evaluating and improving our agency’s knowledge and response. As well, we are offering trauma informed training and support at our area schools and our probation/jail services/adolescent detention center.”

Increasing Access to Care for Healthier Communities & Saving on Hospitalization Costs

Flexibility provided by the CCBHC payment rate allows for clinics to increase their staffing and service offerings as well as engage beyond the traditional clinic walls. CCBHCs are reaching new clients who had either not previously been enrolled in treatment despite having a mental health or substance use need, or were referred to treatment for the first time. They are also creating new partnerships to reduce unnecessary hospitalizations and provide more evidenced-based treatment to communities in need.

“We have increased our number of encounters and have significantly reduced our wait time from initial contact to first visit, nearing our stated goal of 10 business days.”

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“In MN

80% of CCBHCs improved outreach to clients, reducing no-shows & improving treatment adherence.

60% of CCBHCs expanded access to crisis care.

90% of CCBHCs nationally, served more patients, increasing caseload 25% for most clinics.

5 surveyed MN CCBHCs started new care delivery or outreach partnerships with hospitals.

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