



Jeff Richardson, MBA, LCSW-C, Board Chair  
Charles Ingoglia, MSW, President and CEO

April 1, 2020

The Honorable Elinore McCance-Katz, M.D.  
Assistant Secretary for Mental Health and Substance Use  
Substance Abuse and Mental Health Services Administration (SAMHSA)  
U.S. Department of Health and Human Services  
Parklawn Building  
5600 Fishers Lane  
Rockville, MD. 20857

Dear Assistant Secretary McCance-Katz:

On behalf of the National Council for Behavioral Health, an association composed of more than 3,000 community-based providers of mental health and addiction treatment serving over 8 million Americans with serious mental health and addiction disorders, I am writing, first, to thank you for the leadership that SAMHSA has displayed throughout the coronavirus pandemic impacting our country.

To address the imminent health threats to patients with severe behavioral health conditions posed by the COVID-19 crisis, the U.S. Congress appropriated \$250 million to community behavioral health organizations (CBHOs) employing the Certified Community Behavioral Health Clinic (CCBHCs) line item authority in the recently passed Coronavirus Aid, Relief and Economic Security Act (HR 748). We would like your consideration around the following two areas as SAMHSA considers implementation guidelines around these critical funds.

First, because of the emerging nationwide scope of the pandemic, the National Council recommends that eligibility for the funds should extend beyond the CCBHCs authorized under Section 223(d) of the Protecting Access to Medicare Act of 2014 ([42 U.S.C. 1396a](#) note) and those receiving grant funding under the CCBHC expansion grant program. Only 113 clinics are currently participating in either the demonstration, the expansion grants, or both; yet, behavioral health providers of all types play a vital role in preventing the community spread of the coronavirus, ensuring appropriate treatment to keep people with serious mental illness and substance use disorders out of hospitals and emergency rooms, and treating this high-risk population.

The National Council recommends that eligibility for the funds should be expanded to all CBHOs that meet the definition of Community Mental Health Centers specified in Sec. 1913(c)(1)(2) and (3) of the Public Health Service Act, as well as community addiction treatment

providers that are properly licensed, authorized or otherwise overseen by their states. Indeed, recent SAMHSA funding announcements offer a useful precedent for the emergency circumstances we now confront. Specifically, in obligating FY 2020 CCBHC Expansion Grants, the agency extended eligibility beyond states that had filed applications under the original 2016 Excellence in Mental Health and Addiction Treatment Act to CBHOs in all fifty states [SAMHSA Funding Opportunity Announcement (FOA) No. SM-20-012].

Second, because of your years of direct clinical experience, you are well aware that patients with severe mental illnesses and substance use/opioid use disorders are vulnerable to contracting COVID-19. Years of scientific and epidemiologic research shows that these patient populations experience a high incidence of underlying chronic health conditions, including cardiovascular disease, COPD, diabetes and cancer. Moreover, the incidence rate for smoking in these patients exceeds 60%, which puts them at high risk of respiratory symptoms caused by the coronavirus.

The coronavirus crisis is presenting CBHOs nationwide with unique challenges making it necessary for SAMHSA emergency funding to also be available for the procurement of Personal Protective Equipment (PPE) – masks, gowns, gloves, respirators – for front line staff members and assisting with personnel costs including sick leave, overtime pay, hazard pay and shift differential pay. In addition, National Council members are in desperate need of grant funds directed to front line behavioral health care workers for the purchase of equipment to assist in providing tele health including laptops, cameras, headsets and information technology support to help train and manage issues with utilizing telehealth platforms. We are asking SAMHSA to adopt a broader approach to current funding guidelines to provide aid during this crisis, perhaps citing Sec. 223(d) and Sec. 1913 of the Public Health Service Act establish behavioral health service funding criteria including assessment, diagnosis, outpatient care, emergency psychiatric services, etc. to gain additional resources to our essential providers.

In turn, broader SAMHSA grant guidelines would have one overriding goal: helping CBHOs expand triage and treatment capacity to avert community hospital emergency department utilization during this critical time. Meantime, we are happy to engage in dialogue with the agency on all other related issues encompassing geographic distribution, grant amounts, evaluation criteria and reporting requirements.



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Finally, given the truly alarming impact that COVID-19 is having on the community based mental health and substance abuse treatment and recovery system, it is highly likely that additional federal discretionary funds will be required beyond the emergency appropriations allocated to SAMHSA in HR 748. Thank you in advance for your assistance in securing adequate funding allocations for our nation's behavioral health providers during this pandemic and for the long term affects it will have on all of us.

Thank you for all of your assistance during this time of national health care crisis.

Sincerely,

A handwritten signature in black ink that reads "Charles Ingoglia". The signature is written in a cursive, flowing style.

Chuck Ingoglia  
President & CEO