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July 11, 2014

The Honorable Sylvia M. Burwell
Secretary

U.S. Department of Health and Human Services
200 Independence Avenue, S.W.
Washington, DC 20201

Dear Secretary Burwell,

I write on behalf of the American Psychiatric Association (APA), the medical specialty association representing over 35,000 psychiatric physicians and their patients and families, to express strong support for the swift implementation of the enacted Demonstration Programs to Improve Community Mental Health Services (the Act) (P.L. 113-93, Section 223). APA supported the Excellence in Mental Health Act, which offers a promising and cost-effective way to strengthen community-based mental health care. We are eager to work with the Department of Health and Human Services (HHS) in order to facilitate a smooth implementation and are pleased to offer the following recommendations on structuring the demonstration programs.

Recommendation #1:

APA's foremost concern in the carrying out of the demonstration programs is ensuring that the Community Behavioral Health Clinics (CBHCs) are structured to provide high quality health care and that appropriate and efficacious quality metrics are built into the system. These facilities should provide care utilizing evidence-based practices which are adequately measured. We believe that rigorous evaluations carried out at the demonstration program level are needed to ensure that all future CBHCs provide the best quality care when expansion takes place. We look forward to working with HHS in establishing the framework for staffing and reimbursing the CBHCs and developing the criteria for evaluating and critiquing the quality of the care provided at the centers.

Recommendation #2:

Given the stated goals of the CBHC demonstration program to provide treatment for individuals with serious mental illness, APA believes that each qualified CBHC must have a medical director, who is a psychiatric physician, with responsibilities to lead and/or participate in the design, implementation and management of quality clinical services that are provided throughout the CBHC. The appointment of a physician medical director is common practice in Federally Qualified Health Centers (FQHCs). As



medical doctors, psychiatrists are uniquely trained in both general medicine and the specialty of psychiatry, and consequently, are most qualified to serve as clinical leaders in the provision of care to patients with complex serious and persistent mental illness. The psychiatrist serving in this role should be afforded sufficient time to participate in the design and the delivery of services while serving on the executive leadership level of the CBHC. We recognize that psychiatrists are in short supply and that there are areas of the United States where it may not be possible to have a psychiatrist in a medical director role. We recommend that in this situation, the requirement for a psychiatrist medical director be waived through a renewable waiver process that requires an explanation as to why a given CBHC cannot hire a psychiatrist for this role. CBHCs should be sufficiently funded so that the financing of administrative time for a psychiatrist is adequately supported.

For further background, we have attached the APA's "*Resource Document on Guidelines for Psychiatric Practice in Community Mental Health Centers.*" This document outlines in greater detail the extent to which APA recommends that psychiatrists be involved and the responsibilities afforded to a psychiatrist in a similar facility. Considering the greater extent to which the proposed CBHCs will be offering high-quality care, APA strongly encourages HHS to consider these guidelines when structuring the demonstration program.

Recommendation #3:

The Act requires that HHS, through the Centers for Medicare and Medicaid Services (CMS), establish guidance for a prospective payment system (PPS) for the CBHCs which participating states can use in the demonstration programs. APA strongly recommends that this PPS model closely mirrors the PPS developed for FQHCs, supports best practices, and is population-based. The PPS should be flexible to accommodate a wide range of delivery methods, but also ensure that psychiatrists are able to participate in the full range of services available to patients. APA would be pleased to work with CMS in developing appropriate rate formulas for the PPS as we move forward.

Recommendation #4:

When children and adolescents are seen through a CBHC, the APA recommends that a child and adolescent psychiatrist be available to provide consultation, and, be available to see the more complex patients. We are aware of the difficulties involved in such a requirement, given the shortage of child and adolescent psychiatrists; however, access to such specialty care is extremely important for this population. We urge HHS to require access to specialty care, either through referrals or telemedicine.

Recommendation #5:

The Act has several terms of art that are not clearly defined and APA is eager to work with HHS in developing clear definitions of these terms. In particular, there are a few terms, such as "crisis management," "sliding scale payment," and "outpatient primary care screening," which have not been applied to this type of health care setting and

require clear definitions. APA is pleased to work with HHS and offer our suggestions on how these terms could be defined in the regulations and used in the demonstration programs to ensure their proper and consistent application.

Again, we look forward to working with you as you develop the structure of these important demonstration programs, and we thank you for your consideration. We encourage you to contact Jeffrey P. Regan in APA's Department of Government Relations at (703) 907-7800 if you have any questions.

Congratulations on your recent appointment as Secretary of Health and Human Services. I hope we can meet personally in the near future.

Sincerely,

A handwritten signature in black ink that reads "Saul Levin, M.D., MPA". The signature is written in a cursive, flowing style.

Saul M. Levin, M.D., MPA
CEO & Medical Director