## Congress of the United States

Washington, DC 20515

May 27, 2025

Robert F. Kennedy Jr. Secretary Department of Health and Human Services 200 Independence Ave. SW Washington, DC 20201

Dear Secretary Kennedy,

We write to express our strong opposition to the reported elimination of the Certified Community Behavioral Health Clinic (CCBHC) Expansion Grant program in President Trump's fiscal year (FY) 2026 budget proposal. While the President's recent "skinny budget" does not explicitly mention Certified Community Behavioral Health Clinics (CCBHCs), it proposes severe cuts to behavioral health programs. Moreover, a leaked early draft of the budget from April reportedly called for eliminating the program entirely. Such an elimination would severely worsen the nation's ongoing mental health and substance use crisis at a crucial moment when demand for these critical and lifesaving services is increasing.

Since FY 2018, the CCBHC Expansion Grant program has helped make the CCBHC model of care available to Americans by providing comprehensive and integrated behavioral health services to millions of children, families, and adults across our country. These centers offer a broad range of critical mental health and substance use care services to meet individuals' needs in their community and include requirements to provide tailored community-based services for our veterans. CCBHCs offer comprehensive behavioral health services all at one location, 24 hours a day, 7 days a week, while adhering to rigorous federal criteria and utilizing evidence-based practices for high-quality care.

Today, more than 500 CCBHCs operate across 46 states, the District of Columbia, and Puerto Rico, and provide comprehensive behavioral health care to over 3 million Americans annually. In the past year alone, CCBHCs hired 11,000 new staff positions, strengthening our country's workforce.

CCBHCs are also key to ameliorating chronic disease in our country. People with serious mental illness and substance use conditions experience disproportionately higher rates of chronic disease, and CCBHCs are designed to support improved coordination with and access to primary care. CCBHCs screen for weight/BMI, blood pressure, blood sugar, cholesterol, and other chronic disease indicators.

Providing effective care in local communities has also helped to decrease the use of more costly levels of care. Studies have shown that people who receive care at a CCBHC experience a 55 percent reduction in hospitalization, a 31 percent reduction in homelessness, and a 60 percent reduction in time in jails. In fact, CCBHCs have been shown to provide savings for law enforcement due to their collaborative work with law enforcement agencies.

Additionally, 87 percent of CCBHCs provide Medication-Assisted Treatment for Opioid Use Disorder (MOUD) directly, with the remainder of centers making this care available through

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partnerships with MOUD providers, which has been a significant tool in addressing the ongoing opioid epidemic and providing treatment that leads to long-term recovery.

Eliminating the CCBHC program would immediately disrupt these critical services, potentially leading to increased, more costly hospitalization rates and exacerbating homelessness. Such cuts would reverse the significant progress that has been made in ameliorating the opioid crisis and in building a more efficient and comprehensive mental health and substance use care system. These cuts would also put our most vulnerable populations, such as veterans and those in rural communities, at risk.

From the start, CCBHCs have been a bipartisan effort. The clear evidence of CCBHCs' effectiveness and related cost savings makes this a wise investment for our country. We therefore urge the Department of Health and Human Services to ensure funding for CCBHCs is protected and can continue to provide critical and lifesaving care to millions of Americans.

Sincerely,

Nikki Budzinski

Member of Congress

Doris Matsui

Member of Congress

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Sharice L. Davids

Member of Congress

Andrea Salinas

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Eric Sorensen

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