The Honorable Catherine Cortez Masto 520 Hart Senate Office Building Washington, DC 20510

The Honorable John Cornyn 517 Hart Senate Office Building Washington, DC 20510

Dear Senators Cortez Masto and Cornyn:

On behalf of the undersigned organizations, we write to thank you for your leadership in introducing S. 1378, the Connecting Our Medical Providers with Links to Expand Tailored and Effective (COMPLETE) Care Act. By incentivizing primary care to adopt and implement integrated care models, your important legislation would improve access to timely and effective behavioral health care treatment.

Families across the country are struggling to access needed mental health and substance use disorder services. Ongoing workforce shortages and a lack of care coordination all impede patient access. The COMPLETE Care Act would address these issues by helping providers adopt evidence-based integrated delivery models. By facilitating coordinated care between health professionals, in the primary care setting, these team-based models have the capacity to increase access, reduce wait times for treatments, and improve patient outcomes.

Using a team-based, interdisciplinary approach to deliver diagnoses, treatment, and follow-up care to an identified patient population, the Collaborative Care Model (CoCM) has proven particularly effective. The CoCM integrates behavioral health care within the primary care setting and features a primary care physician, a psychiatric consultant, and care manager working together in a coordinated fashion. Importantly, the team members use measurement-based care to ensure that patients are progressing, and treatment is adjusted when they are not. The model has over 100 research studies demonstrating that it improves access, clinical outcomes, and patient satisfaction. Additionally, the CoCM has tremendous cost savings potential with one analysis demonstrating a 12:1 benefit to cost ratio for the treatment of depression in adults.<sup>1</sup>

Critically, by supporting uptake of behavioral health integration services, and specifically the CoCM, your legislation would also help to address existing behavioral health workforce shortages. By taking a population-based approach to better meet the growing demand for services, the CoCM has the capacity to greatly increase the number of patients who can receive care for mental health and substance use disorders relative to traditional 1:1 treatment. Allowing psychiatrists to consult on a registry of up to 60 patients via weekly chart review, oversight of medication and therapeutic interventions, and making clinical recommendations to the primary care physician, the CoCM geometrically multiplies the number of patients who benefit from a psychiatrist's specialized training. In cases where a substance use disorder is being treated, the CoCM would also allow addiction specialist physicians to function in the consultant role.

Despite its strong evidence base and availability of reimbursement, uptake of CoCM by primary care practices, like other integrated care models, remains low due to the up-front costs associated with

<sup>&</sup>lt;sup>1</sup> Washington State Institute for Public Policy Benefit-Cost Results for Adult Mental Health. Retrieved from: https://www.wsipp.wa.gov/BenefitCost?topicId=8

implementation. By providing temporarily enhanced Medicare payment rates for behavioral health integration services, as well as technical assistance, your legislation would help to address both of these issues. The COMPLETE Care Act is a logical and much needed step toward ensuring integrated behavioral health care is more widely implemented, and patients can get the mental health and substance use care they require.

We look forward to working with you to advance this important legislation and improve outcomes for our patients.

Sincerely,

American Academy of Family Physicians

American Association of Psychiatric Pharmacists

American College of Obstetricians and Gynecologists

American College of Physicians

American Foundation for Suicide Prevention

American Psychiatric Association

American Society of Addiction Medicine

Association for Behavioral Health and Wellness

Blue Cross Blue Shield Association

Meadows Mental Health Policy Institute

National Alliance of Healthcare Purchaser Coalitions

National Council for Mental Wellbeing

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