



CBHA Public Policy Priorities 2020-2022



Expanding Behavioral Health Workforce

1. CBHA members statewide struggle to fill open positions at all levels, but it is especially difficult recruiting licensed clinicians and psychiatrists. We know the shortage is most acute in rural areas and underserved urban neighborhoods that often are not the first choice for in-demand practitioners.
2. Our work around expanding Illinois' behavioral health workforce shortage will aim to tackle the issue on many fronts, including recruiting, training, retaining staff, and strengthening the behavioral health pipeline.
3. Specifically, CBHA will be advocating for the creation of the Illinois Behavioral Health Workforce Education Center and advocating for funding of the Behavioral Health Professional Loan Repayment Program.

Addressing Payment Disparities

1. While we saw some increases in this year's budget, there remains significant unmet needs due to a pattern of disinvestment and lack of inflationary adjustments to behavioral health reimbursement rates over the years.
2. The reimbursement system for behavioral health services is insufficient and hinders patient access. Community mental health centers struggle to provide access to critical services because Medicaid reimbursement rates have not been increased in a meaningful or enduring manner in nearly a decade.
3. In partnership with our industry colleagues, CBHA will push for adequate rates that cover the costs of providing care.

Reducing Administrative Burdens

1. Complex and excessive mandated administrative requirements increase costs, reduce the amount of time for clinicians to provide services, and deters trained and licensed staff from seeking jobs in a CMHC.
2. CBHA efforts in this area will focus on identifying and reducing administrative burdens levied directly on providers that do not add value, impact quality or safety.
3. For example, we will be looking to align provisions in Rules 132 and 140 and pushing for more flexibility around the IM+CANS.
4. Statewide standards must clear away needlessly complex, outdated, or duplicative requirements that drain clinicians' time but contribute little to quality of care or the health of individuals.