June 28, 2021

The Honorable Muriel Bowser Executive Office of the Mayor John A. Wilson Building 1350 Pennsylvania Avenue, NW, Washington, DC 20004

RE: COVID-19 FUNDING FOR DISTRICT OF COLUMBIA NONPROFIT ADDICTION TREATMENT & MENTAL HEALTH SERVICE PROVIDERS

DELIVERED VIA EMAIL TO: eom@dc.gov

Dear Mayor Bowser,

We, the undersigned organizations, urge you to direct the District of Columbia's Department of Behavioral Health (DBH) to immediately allocate and release the \$17.9 million awarded to the District of Columbia via federal COVID-19 response laws – including the CARES Act and American Rescue Plan – to previously funded, non-profit residential substance use disorder and mental health services entities within your jurisdiction. Furthermore, we respectfully request that the entities receive these funds no later than July 15, 2021. As organizations dedicated to and involved in advocating for effective substance use treatment and mental health services for the betterment of our shared communities, we recognize the burdens placed on service providers operating at the intersection of the Opioid Epidemic and the COVID-19 Pandemic. As our nation's capital, it is imperative that the District of Columbia set the standard for other municipalities.

Non-profit addiction treatment and mental health service providers are largely reliant upon federally established reimbursement rates, last adjusted for inflation in 2016. While federal reimbursement rates are not within your purview, funding allocated by both the CARES Act and the American Rescue Plan for the District are explicitly in the purview of local government to distribute. Both laws were passed as emergency measures targeted at addressing the *immediate* financial impacts of the COVID-19 pandemic, with an obvious intent to provide "bridge" funding to entities already providing critically necessary services to the District of Columbia.

In a recent <u>article</u> published in the *Washington Post*, DBH stated an intent to distribute these emergency dollars by September 1, 2021. Waiting nearly 6 months to distribute these critically necessary dollars undermines the intent of the legislation and neglects the nature of this emergency and the community the department is tasked to serve – your constituents. Indeed, waiting to distribute these funds is a deep betrayal of DBH's own stated value to provide "unobstructed access to services", the intent of these dollars to supplement and *sustain* existing services, and abandons the District's own <u>Ending the HIV Epidemic</u> plan by allowing a key strategy to go unfulfilled.

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The need for these services is near unprecedented elsewhere in the country, with the District of Columbia reporting the highest rate of new HIV diagnoses of any state or territory and more than 15,000 chronic Hepatitis C infections in 2019 alone, the residents these providers serve are in dire need of immediate action. As identified in the 2018 National HIV Behavioral Surveillance Report, people who inject drugs are at greatest risk of homelessness, unemployment, and poverty, with 91% reporting an income of less than \$10,000 per year. Non-profit residential substance use treatment and mental health service providers are critical in linking the most vulnerable people in the District to care and dependent upon these awards being allocated and distributed in a timely fashion to meet these needs.

Emphasizing the gaps created by delaying distribution of these funds, one of the District of Columbia's longest serving, non-profit residential substance use treatment programs, Regional Addiction Prevention, Inc., in the face of COVID-19 had to reduce residential services in 2020, resulting in about 300 fewer residents getting the help they need and is at risk having to further restrict programming or close all together. "If we don't have our emergency funds, our 'stimulus check', the oldest continuing residential treatment service provider in the District of Columbia will close. More than 1000 residents per year will lose critical access to care and another 80 people will join the rolls of unemployment. And that's just us. We're not the only provider facing these grave decisions," said Regional Addiction Prevention's executive director, Michael Pickering.

These residents DBH risks abandoning are our neighbors, our friends, our families. These residents in need are the people *you* committed to serving.

Continuing to withhold funding risks obstructing access to services through negligence and risking the closure of facilities in desperate need of these emergency dollars to stay afloat. Rather than any "standard" application for funding in which requires a competitive bid process, "emergency" dollars should be allocated and distributed to programs and entities already funded through DBH. With overdose deaths in 2020 reported at a startling 34 District residents per month, an increase of 46% from 2019, delaying distribution of these funds only risks killing residents in need at increased rates by way of neglect.

As leaders, you are not helpless bystanders. Rather, you are the most direct and powerful voices of your constituents – especially those with the greatest needs. We urge you to rise to the occasion, meet the need of the moment, and direct the District of Columbia's Department of Behavioral Health to treat this moment as the emergency it is and immediately distribute these funds accordingly to already funded service providers.

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Sincerely,

ADAP Advocacy Association (Washington, DC) ADAP Educational Initiative - ADAP EI (Columbus, OH) AMAR Group, Inc. (Washington, DC) Barbara J. Musgrove, PhD, Licensed Psychologist; Independent Tele Practice (Washington, DC) Black, Gifted & Whole Foundation (Brooklyn, NY) Community Access National Network - CANN (Washington, DC) Community Education Group (Washington, DC) Empowering the Transgender Community, ETC (Washington, DC) Family and Medical Counseling Service, Inc. (Washington, DC) HealthHIV (Washington, DC) Jubilee Housing, Inc. (Washington, DC) Miller & Associates SVC Group (Washington, DC) New Jersey Association of Mental Health and Addiction Agencies, Inc. (Mercerville, NJ) Partnership for Safe Medicines (San Francisco, CA) Prevention Access Campaign - U=U (Brooklyn, NY) PlusInc (Washington, DC) Potomac Management Associates, Inc. (Washington, DC) RAD Remedy (St. Petersburg, FL) Regional Addiction Prevention, Inc. (Washington, DC) Rural Health Service Providers Network (Lost River, WV) SOME, Inc. – So Others Might Eat (Washington, DC) Southern Black Policy and Advocacy Network (Dallas, TX) The AIDS Institute (Washington, DC) The Women's Collective, Inc. (Washington, DC) Treatment Action Group (New York, NY) Treatment Communities of America (Washington, DC) Unity Health Care, Inc. (Washington, DC) Woodley House, Inc. (Washington, DC)

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Cc: The Honorable Phil Mendelson, Chair District of Columbia City Council 1350 Pennsylvania Avenue NW, Suite 504 Washington, DC 20004 Email: pmendelson@dccouncil.us

> The Honorable Carolyn B. Maloney, Chair United States House Committee on Oversight and Reform 2157 Rayburn House Office Building Washington, D.C. 20515

> The Honorable James Comer, Ranking Member United States House Committee on Oversight and Reform 2157 Rayburn House Office Building Washington, D.C. 20515

The Honorable Gary C. Peters, Chair United States Senate Committee on Homeland Security and Governmental Affairs 340 Dirksen Senate Office Building Washington, DC, 20510

The Honorable Rob Portman, Ranking Member United States Senate Committee on Homeland Security and Governmental Affairs 340 Dirksen Senate Office Building Washington, DC, 20510