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In memoriam

The Honorable Mia Bonta, Chair 1020 N Street, Room 390 Sacramento, CA 95814

# **Re:** Support for AB 1267 (Pellerin) – Consolidated License and Certification.

## Chair Bonta,

The California Association of Alcohol and Drug Program Executives (CAADPE) is writing to express our strong support for AB 1267 authored by Assemblymember Pellerin. This bill takes a critical step in ensuring that Californians struggling with substance use disorders (SUD) can access treatment more efficiently by streamlining the licensing and certification process for SUD treatment facilities. By reducing administrative barriers, AB 1267 will help expand access to essential services, improving health outcomes while ensuring that resources are directed toward patient care rather than excessive regulatory compliance.

For over 30 years, CAADPE has led statewide efforts to improve substance use disorder SUD services through advocacy, policy development, and collaboration. As California's only organization representing the full spectrum of SUD services, CAADPE supports over 300 treatment sites through its member agencies and advances key initiatives in workforce development, regulatory standards, youth recovery, and integrated care. We serve as a vital bridge between providers, policymakers, and communities in our mission to ensure equitable access to high-quality SUD services for all Californians.

California faces an ongoing behavioral health crisis, with demand for SUD treatment services far exceeding available capacity. The 2022 National Survey on Drug Use and Health (NSDUH) found that approximately 2.9 million California adults meet the criteria for a substance use disorder, yet only a fraction receive treatment due to administrative and financial barriers.<sup>1</sup> According to the California Department of Health Care Services (DHCS), 70% of counties report urgently needing residential treatment services, 75% of counties cite a lack of available SUD residential beds specifically for youth patients, and 38% of counties do not have any residential SUD treatment

<sup>1</sup><u>National Survey on Drug Use and Health</u> (2018-2019), Substance Abuse and Mental Health Services Administration, table 20.



## facilities.<sup>2</sup>

DHCS estimates that approximately 50% of the workforce in SUD treatment programs is allocated to administrative tasks, diverting valuable resources away from direct patient care.<sup>3</sup> The current regulatory framework requires SUD treatment providers to obtain separate licenses and certifications for each facility or program, even when they are located in close proximity exacerbates these administrative costs and creates barriers to providing care. This fragmented approach results to unnecessary costs, duplicative inspections, and delays in expanding treatment services to meet growing demand.

AB 1267 provides a common-sense solution by allowing SUD providers to obtain a consolidated license and certification for multiple facilities operating within the same geographic area. This reform aligns with the goals of Proposition 1's Behavioral Health Continuum Infrastructure Program (BHCIP), which is investing \$4.4 billion in expanding behavioral health infrastructure across California. Without this legislation, many BHCIP-funded projects will face significant administrative burdens, limiting their ability to deliver the expanded services that Californians urgently need.

AB 1267 offers a fiscally responsible and urgently needed approach to addressing California's behavioral health crisis. By modernizing outdated regulatory processes, this bill will expand access to SUD treatment, improve the efficiency of state and local resources, and help ensure that the state's recent investments into behavioral health infrastructure have the broadest reach possible. For these reasons, we urge your support for this legislation.

Sincerely,

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Robb Layne Executive Director

CC: Members, Assembly Health Committee Assemblymember Gail Pellerin

<sup>&</sup>lt;sup>2</sup>Assessing the Continuum of Care for Behavioral Health Services in California: Data, Stakeholder Perspectives, and Implications (2022), California Department of Health Care Services, page 73.

<sup>&</sup>lt;sup>3</sup> CalAIM Behavioral Health Payment Reform (2023), California Department of Health Care Services, page 6.