NEW JERSEY ASSOCIATION OF
MENTAL HEALTH AND ADDICTION AGENCIES, INC.

ANNUAL REPORT 2020
A YEAR LIKE NO OTHER
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NJAMHAA began the year with many priority issues. Advocacy efforts achieved the desired results for many of them, and we continue fighting for those that remain, such as the $25 million fee-for-service supplemental funding. As the pandemic hit and 2020 became a year like no other, advocacy for sustainable funding expanded, with extending monthly emergency payments of state funds and similar Medicaid retainer payments a priority. Other issues, inconceivable just months ago, are also the focus of NJAMHAA’s current advocacy, including adequate personal protective equipment, COVID-19 testing and many legal, staffing and client issues.

George Floyd’s murder and the intense reactions to this tragedy further characterize 2020 as a year like no other. NJAMHAA remains dedicated to justice and equality for all human beings and continuously advocates for equal access to all healthcare services and supports.

All of our proactive and relentless advocacy has continued throughout the pandemic. As a testament to our effectiveness, NJAMHAA was just selected for the prestigious 2020 Advocacy Leadership Award for Organizational Excellence from the National Council for Behavioral Health.

While this crisis changed the world, NJAMHAA did not miss a beat. Rather, we prioritized coronavirus related issues and immediately gathered members’ feedback to bolster our advocacy. NJAMHAA also works with other stakeholders, including national organizations, to amplify our voice and impact in securing funding and regulatory flexibility.

Meanwhile, we successfully advocated for an increased rate for long-term residential substance use disorder treatment programs, effective June 1, 2020, despite the state’s budgetary challenges and had a win securing waivers to increase access to medication assisted treatment. Nationally, we played a significant role in securing the extension and expansion of Certified Community Behavioral Health Clinics. Many more examples of our impactful advocacy follow in this report.

NJAMHAA’s readily available technical assistance – for a technology issue or about a policy, regulation or legislative bill – increased exponentially throughout the pandemic. Our Information Technology staff has assisted members in transitioning to the virtual world and our advocacy team has provided a continuous flow of information regarding telehealth, fiscal support and more.

Membership engagement is at an all-time high, with the value of NJAMHAA’s advocacy and real-time communications even more evident during the pandemic. NJAMHAA has provided avenues for members to share best practices with unrivaled collegiality. Together, we have come this far and, together, we will sustain and strengthen New Jersey’s system of care.

Amidst this year’s challenges that have been unlike any other, NJAMHAA made sure to honor several members who have served others with unparalleled leadership. This is the legacy we will carry forward as we celebrate NJAMHAA’s 70th anniversary in 2021.

Sincerely,
NJAMHAA Thanks our FY2020 NJAMHAA Board of Directors for Ensuring Success despite Unique Challenges this Year

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NJAMHAA Thanks our FY2020 NJMHI Board of Trustees for Exploring New Opportunities

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  Rutgers University Behavioral Health Care and
  Senior Vice President, Behavioral Health and Addiction
  Service Line, RWJBarnabas Health
- Erika Kerber, Esq., Director of Litigation
  Community Health Law Project
- Robert L. Parker, MPA, Chief Executive Officer
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NJAMHAA
NJMHI
Immediately after Governor Phil Murphy announced a state of emergency due to the coronavirus, NJAMHAA focused its advocacy on the related difficulties providers were experiencing and anticipating. Members were quickly engaged to provide input on the impact of COVID-19, challenges and support needed.

NJAMHAA continued communication with the Governor’s Office, state departments and New Jersey’s Congressional delegation, as well as media representatives, to build awareness of the critical role of behavioral health providers, especially during the pandemic, in efforts to secure funding, regulatory flexibility and personal protective equipment (PPE).

While everyone was focused on the pandemic, our state and nation were faced with another crisis: George Floyd’s murder and the ongoing protests it incited. NJAMHAA remains dedicated to fighting for justice and equity for all human beings and continuously advocates for equal access to all healthcare services and supports.

In the midst of this and other ongoing and pandemic-related advocacy, NJAMHAA was selected to receive the 2020 Advocacy Leadership Award for Organizational Excellence from the National Council for Behavioral Health. This distinguished honor recognizes NJAMHAA for its effectiveness at both the state and federal levels.

I am truly awed by those on the frontlines and how they have been responding to this changed world and unprecedented crisis. They are working incredibly long hours, placing themselves at risk and making personal sacrifices.

– Debra L. Wentz, PhD, President and CEO of NJAMHAA
Leadership in Advocacy and Impact during the COVID-19 Pandemic

Two member surveys about the impact of and challenges imposed by the coronavirus crisis were developed. Respondents provided compelling details about programs being closed and other anticipated closures, significant shortages of staff and additional resources needed for providing services through telehealth and for obtaining PPE and supplies and services for increased sanitization, as well as physical plant reconfigurations to accommodate social distancing. A third survey was conducted in collaboration with Rutgers School of Health Professions. NJAMHAA encouraged members to participate in this survey and several undertaken by the National Council for Behavioral Health and the National Association of County Behavioral Health and Developmental Disability Directors. NJAMHAA also conducted surveys on COVID-19 testing in March and May to quantify the actual and estimated impact on revenues, staffing, and program reductions and closures. In April, another survey was conducted to gauge expenses being incurred and the access providers have to testing in order to ensure the safety of both clients and staff, particularly as they prepare for new admissions and a return to their facilities.

While most of the NJAMHAA staff has been telecommuting, they remained readily available, practically around the clock in the early weeks of the pandemic, to obtain answers to members’ many questions and advocate for solutions to challenges members have been encountering. NJAMHAA also made arrangements for conference calls with the Department of Human Services (DHS) and Department of Health, and shared updates gained from these discussions and correspondence with state representatives, along with a wealth of other information and resources in the triweekly Newswire, through other e-mails, on the website and on social media.

“I have personally and professionally benefited from NJAMHAA’s advocacy and professional development services and my agency has greatly benefited from their legislative support. NJAMHAA’s commitment to its members is without parallel!”

– Galindo “Glenn” King, MHS, LCADC
Executive Director
Freedom House, Inc.
NJAMHAA has been working nonstop advocating for regulations to be relaxed. Successes at both the state and federal levels include: reimbursement for services provided through telehealth and in alternate locations; having the Division of Mental Health and Addiction Services (DMAHS) rapidly respond to requests for emergency funding by issuing monthly retainer payments for state-funded contracts in lieu of having providers bill fee-for-service (FFS); and having members recognized as priority providers to receive medical supplies and PPE. In addition, NJAMHAA’s advocacy contributed to the relatively quick passage and signing by Governor Phil Murphy of bills to expand access to telehealth services and to allow professional and occupational licensing boards to expedite licensure of out-of-state professionals. Following these many initial successes, NJAMHAA is looking to make several new policies permanent, including the end to the FFS reimbursement system that the pandemic has shown to be inadequate and a risk to sustainability.

NJAMHAA has been actively involved with the statewide Mental Health Coalition and the New Jersey Business Coalition, which was convened by the New Jersey Business and Industry Association (NJBIA). NJAMHAA has been advocating for nonprofits of all sizes to be eligible for the Paycheck Protection Program and, working with NJBIA, is focused on providing a safe opening of the state with funding and a regulatory environment that supports all businesses, including NJAMHAA members. On the federal level, NJAMHAA has been collaborating continuously with the National Council for Behavioral Health, National Association of County Behavioral Health and Developmental Disability Directors, National Association for Behavioral Healthcare, National Alliance on Mental Illness, and Mental Health America on advocacy about the various stimulus packages and other legislation that remains critical to the behavioral healthcare system.

NJAMHAA will continue looking to the future to develop strategies for how members can safely transition back to facility-based operations amidst COVID-19, which will remain a factor for some time to come.

Advocacy and other Member Services

NJAMHAA held multiple membership conference calls and conducted several surveys to gain feedback from members. Some calls were for the full membership, others were for a specific program type, such as residential providers and Children’s Mobile Response and Stabilization Services. Others were dedicated to topics, such as telehealth, federal employment laws and loan provisions. During regularly scheduled discussions with several Practice Groups, members shared their concerns, challenges, best practices and successes related to the pandemic, including conducting group sessions via telehealth; quarantining and isolating clients who test positive and/or were symptomatic in adults’ and children’s congregate care settings; and how to manage staff stress and the transition to telecommuting.
Media Outlets Turn to NJAMHAA and its Members during the Pandemic

NJAMHAA has always been a resource for the media and this reputation certainly remained strong during the coronavirus pandemic with several significant placements in early May – a notable achievement during Mental Health Awareness Month.

In late March, an opinion-editorial piece written by NJAMHAA Board Chair Robert J. Budsock, MS, LCADC, President and CEO of Integrity House, and NJAMHAA President and CEO Debra Wentz, PhD, was published by the Star-Ledger. This article demonstrated how assisting those with mental health and addiction issues will help slow the spread of COVID-19. In early April, Frank Ghinassi, PhD, President and CEO of Rutgers University Behavioral Health Care and Senior Vice President, Behavioral Health and Addiction Service Line, RWJBarnabas Health, was featured in two articles in ROI-NJ, one on the impacts of the pandemic on clients, the other about how the healthcare workforce was faring amidst the pandemic.

Next, a NJAMHAA press release sent on May 1st was quickly published on Insider NJ.com and led to Dr. Wentz being interviewed on New Jersey News Network about the mental health impact of COVID-19. Also in early May, an opinion-editorial piece written by Anthony Comerford, PhD, President and CEO of New Hope Integrated Behavioral Health Care and a NJAMHAA Board member, was published by the Asbury Park Press. Dr. Comerford urged Congress to include an emergency appropriation of $38.5 billion for behavioral health organizations in the next pandemic relief package.

In early June, another op-ed piece written by Bob Budsock and Dr. Wentz was published by the Star-Ledger. This article reinforces the need to strengthen our members’ services for individuals’ well-being and the state’s economic recovery.

The NJAMHAA team always does great work in keeping the members informed, but during the pandemic, their work has been invaluable. I am receiving a ton of e-mails related to COVID-19; it can be information overload. However, their e-mails are always precise and to the point!

– Brigitte D. Johnson, Esq., Executive Senior Vice President, Corporate Affairs/In-House Counsel/Compliance Officer, CarePlus New Jersey
Throughout FY2020, NJAMHAA continued to have a substantial impact on legislation and policies, as it has done throughout its nearly 70-year history. Following are highlights of advocacy achievements from FY2020.

NJAMHAA’s advocacy led to several provisions in the FY2020 State Budget that benefit providers and, ultimately, the individuals they serve. The budget continued: $100 million from the previous year to fight the opioid crisis; rate increases for psychiatric diagnostic evaluations in outpatient mental health programs; and the increased rate for Care Management Organizations. The budget also included an increase in the hourly wage and other additional funding for direct support professionals (DSPs) who provide services for individuals with intellectual/developmental disabilities; several increases to re-entry programs; a $7 million increase to Charity Care; and language to expand access to medication-assisted treatment (MAT) for incarcerated individuals.

Also in July 2019, Gov. Murphy signed into law two bills that require warning labels on opioid prescription bottles and codify the elimination of the prior authorization mandate for Medicaid beneficiaries seeking MAT. Moreover, the Governor signed a resolution designating “Knock Out Opioid Abuse Day”, with the goal of increasing awareness of opioid misuse.

In November, an important win for providers resulted from NJAMHAA’s advocacy to extend contracts for Community Support Services (CSS) programs until June 30, 2021, allowing more time to restructure the program model to help ensure its ongoing viability when programs eventually transition to fee-for-service (FFS) reimbursement. NJAMHAA’s continued participation in the CSS workgroup, in collaboration with
other stakeholders, the Division of Mental Health and Addiction Services (DMHAS) and the Division of Medical Assistance and Health Services, led to recommendations that will significantly improve the fiscal support, and reduce the administrative burden, of these programs.

In December, NJAMHAA testified on the FY2021 budget at a Department of Human Services (DHS) budget listening session. NJAMHAA highlighted the need for rates that cover the actual costs of providing services; increases to be able to better recruit and retain a qualified workforce and avoid wage compression in light of minimum wage increases; capital funding to support integrated care and electronic health record systems; FFS supplemental funding to fill deficits while rates are studied; and inflationary indexing of rates going forward.

Another significant advocacy win came following NJAMHAA’s close work with the sponsors of bills calling for the expansion of Early Intervention Support Services to all counties and establishing a grant program for Screening Centers to expand services. The Screening Center grant program was signed into law in January 2020 and NJAMHAA immediately began working to have funds appropriated to it. The law requires DMHAS to accept grant requests from designated screening centers that emphasize outreach and early intervention, such as expanded mobile and satellite services.

In his FY2021 Budget Address in February 2020, Gov. Murphy underscored the Administration’s commitment to protect the Affordable Care Act, integrate behavioral and physical health care, and strengthen the economy. His proposal included rate increases for long-term residential substance use treatment services, Integrated Case Management Services (ICMS) and children’s behavioral health care – all priorities for which NJAMHAA had been advocating.

On the day of the Governor’s Budget Address, NJAMHAA staff exhibited at the State House Annex, presenting its new advocacy campaign, Invest in a Healthy New Jersey, to State Legislators. NJAMHAA is persevering in advocating specifically for $25 million in supplemental funding for FFS programs, and for expansion of School Based Youth Services; funding to support upgrades to electronic health records for all behavioral healthcare providers; and capital funding for behavioral healthcare providers to integrate primary care into their facilities.

Also in February, the Department of Health (DOH) responded to NJAMHAA’s persistent advocacy to alleviate barriers providers were suddenly facing in their efforts to provide MAT services. DOH issued three blanket waivers for providers licensed under 10:37E and 10:161B to improve access to MAT and expedite the licensing process. The waivers addressed medical directors’ and designees’ qualifications for outpatient substance use disorder (SUD) treatment facilities, and granted regulatory relief to both mental health and SUD outpatient facilities regarding prescribing, storing and administering all medications approved by the Food and Drug Administration for the treatment of SUD other than methadone.

NJAMHAA testified before the Senate Budget Committee in March 2020, adding requests for $5 million to support unfunded minimum wage increases and an increase for the children’s psychiatric assessment rate to equal the adult rate to its list of budget priorities.

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NJAMHAA Achieves Impact through Advocacy throughout the Year: Federal Policy and Legislation

NJAMHAA has been equally active and effective in its year-round federal advocacy on both funding and policy issues and has been at the forefront nationally in its advocacy to sustain and expand the Certified Community Behavioral Health Clinic (CCBHC) demonstration program.

In 2019, the CCBHC program was continuously facing an end to its funding, which was tied to Continuing Resolutions (CRs) expiring in June, July, September, November and December. NJAMHAA worked closely with the National Council for Behavioral Health at each juncture, taking a lead role in scheduling, attending and providing materials for meetings with the full New Jersey Congressional delegation, eventually succeeding in having four more Representatives sponsor the CCBHC extension and expansion legislation. In addition, NJAMHAA President and CEO Debra Wentz and NJAMHAA member Vera Sansone, LCSW, President and CEO of CPC Behavioral Healthcare, met with Governors Chris Christie and James McGreevey, Chairman of the Board for New Jersey Reentry Corporation, in September to engage them in securing key legislative support from around the nation for the extension and expansion of the demonstration program. A CR passed in December once again extending funding, but only until May 22, 2020. This was amended in the Coronavirus Aid, Relief, and Economic Security (CARES) Act, which was passed in March, further extending the funding to November 30, 2020 and adding two states to the demonstration.

NJAMHAA headed to Washington D.C. in September 2019 for the National Council's Hill Day, again taking on a coordinating role, in collaboration with other advocates and NJAMHAA members. NJAMHAA's legislative agenda for Hill Day 2019 was broad and comprehensive, (See the box on the next page.) NJAMHAA also fulfilled a key coordinating role for the National Council’s “CCBHC Fly-in” in March 2020, keeping a full slate of meetings scheduled despite declining in-person meetings and travel in those early days of the pandemic.
Since mid-March, NJAMHAA has remained relentless in its federal advocacy, adding to its priorities: a request for $38.5 billion for behavioral health organizations in the next COVID relief package; a waiver from the Centers for Medicare and Medicaid Services to permit Medicaid retainer payments; amendments to the Paycheck Protection Program and Mid-Size Business Loan program to expand eligibility to nonprofits with more than 500 employees; expansion of Medicare telehealth to allow audio-only services; and a recognition of behavioral health providers as essential healthcare workers with equal priority for essential resources, including personal protective equipment (PPE).

NJAMHAA was successful in seeing the last two priorities implemented—audio-only services are now permitted by Medicare and the Substance Abuse and Mental Health Services Administration wrote a letter solely for the purpose of specifying that all behavioral health providers are essential healthcare workers. Other successes are on the horizon, as additional funding and amendments to the loan programs are in the most recent COVID relief package introduced by the House in May. NJAMHAA will continue its advocacy to see those provisions and more signed into law.

As NJAMHAA fights for COVID-related resources and policies, other important federal advocacy efforts continue, with several pieces of legislation being added to NJAMHAA’s federal priorities list, including: The Mainstreaming Addiction Treatment Act, the National Suicide Hotline Designation Act and the Medicaid Re-entry Act, among others.

NJAMHAA’S HILL DAY 2019

LEGISLATIVE PRIORITIES

• Co-sponsor and support immediate passage of S.824/H.R.1767, the “Excellence in Mental Health and Addiction Treatment Expansion Act”, to extend and expand the CCBHC demonstration program.

• Amend Public Law 115-271, the 2018 SUPPORT for Patients and Communities Act (Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment for Patients and Communities Act) to ensure that evidence-based counseling and behavioral therapies are included in MAT funding packages.

• Support S.1122/H.R.1109, the Mental Health Services for Students Act of 2019, to provide access to school-based comprehensive mental health programs.

• Support H.R.2569/S.1365, the Comprehensive Addiction Resources Emergency Act of 2019.

• Support H.R.2431, the “Mental Health Professionals Workforce Shortage Loan Repayment Act of 2019” and H.R.2439, the “Opioid Workforce Act of 2019”.

• Support H.R.2848, The Parity Enforcement Act of 2019, to strengthen parity in the provision of mental health and substance use disorder treatment benefits.

• Support H.R.1884, the “Protecting Pre-Existing Conditions and Making Health Care More Affordable Act of 2019”, to improve affordability of, undo sabotage with respect to, and increase access to health insurance coverage, and for other purposes.
I have witnessed NJAMHAA change the course of the field in the most meaningful and powerful ways.

Theresa C. Wilson, MSW, LCSW
President & CEO
South Jersey Behavioral Health Resources, Inc. and
Executive Vice President
Inperium NJ

As a member of NJAMHAA we have an opportunity to collectively make an impact with issues that present barriers to providing the best services possible to a vulnerable sector of our community.

Robert J. Budsock, MS, LCADC
President and CEO
Integrity, Inc.

NJAMHAA’s focus on caring for the whole person aligns with the best practices for integrated care.

Julie Drew, LCSW, MPA
System Executive Director
AltantiCare Behavioral Health and NJAMHAA
& NJMHI Board Member
NJAMHAA continuously promotes equal access to quality mental health and addiction services for all New Jersey residents. We appreciate NJAMHAA’s commitment and shared partnership. Their advocacy efforts help us to preserve precious resources as we confront multiple challenges in health care today.

– Lynne Chandler, LCSW
Administrator
St. Clare’s Behavioral Health

What I found most impressive about NJAMHAA is its tenacity, legislative advocacy and very broad scope.

– Robert N. Davison, MA, LPC,
Chief Executive Officer
Mental Health Association of Essex and Morris, Inc.
and Former NJAMHAA Board Member

NJAMHAA has been the go-to organization for advocacy, information, strategic direction, training and IT support for decades.

– James McCreath, PhD, LCSW, Vice President
Behavioral Health/Psychiatry, Trinitas Regional Medical Center and St. Joseph’s Health and
Former NJAMHAA Board Member
NJAMHAA Gains Significant Media Coverage Year-Round

NJAMHAA secures numerous placements in the media with coverage of issues important to NJAMHAA members. Media coverage raises the awareness of and educates the public, the State Legislature and Administration and federal policymakers and elected officials, with the goal of gaining support for NJAMHAA’s advocacy positions. FY2020 highlights include the following:

• **Spreaker.com** - Mental Health News Radio, “Technology and Compliance Leadership in Mental Health”, podcast featuring June Noto, NJAMHAA’s Vice President of Information Technology, Human Resources and Administrative Services, May 8, 2020

• “New Jersey organization provides ongoing MH support following 2004 tsunami,” Debra Wentz was interviewed by Mental Health Weekly on December 16, 2019. See details on this project, which was undertaken by the New Jersey Mental Health Institute, of which NJAMHAA is the sole member, on page 25.

• **PHL17’s In Focus** - Shauna Moses, NJAMHAA’s Vice President, Public Affairs and Member Services and Board member for Attitudes In Reverse® (AIR™), and AIR Co-founder Tricia Baker, YMHFA, CPDT-KA, were interviewed about youth suicide prevention, September 18, 2019

• “In NJ, a Suicide Every 11 Hours – They’re Aiming to Change That,” Debra Wentz was interviewed on NJ101.5 on September 9, 2019

• “10 Sure Cures for the Holiday Blues,” Debra Wentz interviewed by New Jersey Monthly, Dec. 2019

• “Depression’s Dramatic Rise,” Debra Wentz interviewed by New Jersey Business, Nov. 2019

• “Lessons to be taken from Saoirse Kennedy Hill’s death,” opinion-editorial piece by Debra Wentz, published on Northjersey.com on August 8, 2019

• “Using mental illness as a scapegoat will not prevent mass shootings, professional says,” opinion-editorial piece by Debra Wentz, published by the Star-Ledger on August 8, 2019

• “NJII joins initiative to combat opioid crisis, bring behavioral health providers into the digital age,” featuring NJAMHAA’s Information Technology (IT) Project’s collaboration with the New Jersey Innovation Institute (NJII) and the Department of Health and Department of Human Services to make electronic health record systems more affordable for substance use treatment providers, published by NJBIZ, June 10, 2019. See details on this initiative on page 24.

• “Mental Health Awareness & Advocacy: Perspectives from Dr. Debra Wentz, President & CEO of NJAMHAA,” published online by PsychU on May 28, 2019
A YEAR LIKE NO OTHER

Lessons to be taken from Saoirse Kennedy Hill’s death | Opinion

Using mental illness as a scapegoat will not prevent mass shootings, professional says
NJAMHAA Evolves to Meet the New Norm for Conferences, Training and Technical Assistance

In addition to formal conferences, workshops and webinars, NJAMHAA provides extensive technical assistance, including research and communication with contacts in the state and federal governments to answer members’ questions about legislation, policies and regulations to ensure their compliance. NJAMHAA’s Information Technology (IT) Project team offers support with IT specific issues, such as network installations and reconfigurations; electronic health record systems; and guidance to ensure compliance with confidentiality rules. NJAMHAA continues to evolve with the times by offering more online trainings, as necessitated by the COVID-19 pandemic, starting in March 2020.

NJAMHAA was recently selected to serve as a subcontractor for JBS International, which received a grant from the Division of Mental Health and Addiction Services to provide a series of evidence-based practices trainings for 300 staff at five New Jersey substance use treatment provider organizations. NJAMHAA hosted the kickoff meeting for JBS, NJAMHAA staff (including 1.5 new full-time employees dedicated to the grant) and staff of the two other subcontractors, OMNI Institute and Wandersman Center, in February and will host the project end meeting in September. NJAMHAA staff continue to fill a key role in providing significant input and administrative support to the implementation phase, which was slowed due to the pandemic. The pandemic has also shifted NJAMHAA’s role in this project, to which new staff easily adapted. The trainings, which will be on motivational interviewing and cognitive behavioral therapy, will all be online and will conclude in July.

Known for the high caliber of the content of its training and conferences, NJAMHAA presented these in-person conferences and workshops in FY2020 before the pandemic struck:

**Conferences**

- Seventh Annual National Suicide Prevention Day Conference, Story Tellers: It’s Never too Early to Talk to Children about Mental Health, developed in collaboration with Attitudes In Reverse®, a member of NJAMHAA’s Integrated Healthcare Council, and co-sponsored by Hackensack Meridian Health – Carrier Clinic, a NJAMHAA member, and the American Foundation for Suicide Prevention – New Jersey Chapter, September 23, 2019.

- Fall Behavioral Healthcare Conference, Winning Innovations in Health Care, October 17, 2019, which, for the first time, offered continuing education credits for licensed and certified alcohol and drug counselors, marriage and family therapists, psychologists, nurses and physicians, in addition to social worker credits. Joshua Sharfstein, MD, Vice Dean, Johns Hopkins Bloomberg School of Public Health Practice, delivered the keynote presentation, The Opioid Epidemic from a Public Health Perspective, and the plenary featured Chuck Ingoglia, MSW, President & CEO, National Council for Behavioral Health, who provided updates from Washington.
A YEAR LIKE
NO OTHER

19

As soon as I came to live and work in New Jersey, I learned about NJAMHAA and became involved. NJAMHAA provides so many services: advocacy, information, training, education, supports. It’s a true benefit to nonprofit mental health agencies.

– Cynthia Heller, LCSW
Chief Executive Officer, Circle of Care for Families & Children of Passaic County, Inc.

Workshops

- Partnering to Improve Population Health, planned and presented with the Hospital Community Integration Council (HCIC) on November 18, 2019, which highlighted successful partnerships between hospital-based and freestanding providers and encouraged other organizations to establish similar alliances. The program included a presentation on interoperability, data collection and real-time access to data and a panel discussion by hospital-based and freestanding behavioral healthcare providers on the successes of their partnerships, as well as challenges they have overcome.

- Coping with Provider-Related Grief and Loss, presented by Barry Jacobs, PsyD, a clinical psychologist and Principal of Health Management Associates, on May 28, 2020

NJAMHAA’s and its IT Project’s annual conferences were postponed to October and will be held virtually due to the coronavirus pandemic. NJAMHAA will be using a sophisticated virtual platform in order to not miss a beat in helping providers to succeed in the “new normal”.

In addition, the IT Project hosted a series of webinars and workshops, which are detailed in the IT Project section of this report, beginning on page 24.

The following workshops were presented virtually as they took place during the coronavirus crisis:

- Improve Your Resilience by Upgrading Your Personal Operating System, presented by Anne Collier, MPP, JD, PCC, Chief Executive Officer of Arudia, on May 14, 2020

- Clinical Expertise Series, launched May 21, 2020 with topics including mindfulness-based stress reduction, ethics and professional boundaries, gender/transgender issues in clinical work settings and motivational interviewing.

- Opportunities with Private Equity Firms, presented on January 23, 2020 by Ann Clemency Kohler, MCRP, who previously served as Executive Director of the National Association of State Medicaid Directors; Deputy Commissioner, New Jersey Department of Human Services; and Director, New Jersey Division of Medical Assistance and Health Services

Workshops

• Opportunities with Private Equity Firms, presented on January 23, 2020 by Ann Clemency Kohler, MCRP, who previously served as Executive Director of the National Association of State Medicaid Directors; Deputy Commissioner, New Jersey Department of Human Services; and Director, New Jersey Division of Medical Assistance and Health Services

In addition, the IT Project hosted a series of webinars and workshops, which are detailed in the IT Project section of this report, beginning on page 24.

The following workshops were presented virtually as they took place during the coronavirus crisis:

• Improve Your Resilience by Upgrading Your Personal Operating System, presented by Anne Collier, MPP, JD, PCC, Chief Executive Officer of Arudia, on May 14, 2020

• Clinical Expertise Series, launched May 21, 2020 with topics including mindfulness-based stress reduction, ethics and professional boundaries, gender/transgender issues in clinical work settings and motivational interviewing.

As soon as I came to live and work in New Jersey, I learned about NJAMHAA and became involved. NJAMHAA provides so many services: advocacy, information, training, education, supports. It’s a true benefit to nonprofit mental health agencies.

– Cynthia Heller, LCSW
Chief Executive Officer, Circle of Care for Families & Children of Passaic County, Inc.
Members continued to contribute significantly to the content and impact of NJAMHAA's advocacy through in-depth discussions during Practice Group meetings. The long-standing Practice Groups are:

- Addictions
- Adult Mental Health
- Billing
- Chief Financial Officers
- Children's
- Compliance and Performance Improvement
- Human Resources
- Information Technology
- Professional Advisory Committee

This year, based on repeated requests, NJAMHAA reactivated Practice Groups for providers of Integrated Case Management Services and Programs of Assertive Community Treatment and is hosting a new Practice Group that is focused on evidence-based practices. In addition, the Hospital Community Integration Council will soon be gearing up to host additional events – hopefully in person, but likely virtually – to highlight successful collaborations between hospital-based and freestanding providers of mental healthcare and substance use disorder treatment services, and to encourage other organizations to establish similar partnerships.

The impactful work of the Practice Groups continues to be a valuable resource for all members. In FY2020, the Chief Financial Officers (CFO) Practice Group established a new planning group to replicate, with updates, the very well-received salary benchmarking survey that was distributed in December 2017. The survey results will once again be free to participants and available for purchase by others. The CFO Practice Group also hosted compliance training.

The Addictions Practice Group enabled NJAMHAA to make a compelling and successful case for higher reimbursement for long-term residential services, as well as for waivers to allow for increased access to medication-assisted treatment. Earlier in the year, this group hosted several guests, including Mollie Greene, MA, CADC, Assistant Commissioner, Department of Children and Families (DCF), Children's System of Care (CSOC), to discuss efforts to increase access to youth's substance use treatment services; and Denise Hien, PhD, ABPP, Director, and Lorraine Y. Howard, LCSW, LCADC, Director of Addiction Education, Graduate School of Applied and Professional Psychology, Rutgers University Center for Alcohol and Substance Use Studies, who shared the Center's recent research and current initiatives and offerings.

Several experts on a variety of valuable topics presented during meetings of the Adult Mental Health Practice Group (AMH PG) throughout the year. These presentations, along with those hosted by other groups, help providers enhance their effectiveness. Guests and topics included Serving Clients with Criminal Charges and Addressing Related Challenges in Securing Housing and Employment by Erika Kerber, Esq., Director of Litigation, Community Health Law Project; Blind Data Collection by Aaron Levitt, PhD, Director, Integrated Employment Institute, Rutgers School of Health Professions; Cultural Change and its Impact on Operations and the Bottom Line by Deborah Visconi, President & CEO, Bergen New Bridge Medical Center; and the Centers for Excellence and the Office Based Addiction Treatment Program by Clement Chen, PharmD, BCPS, Clinical Pharmacist Specialist, The CARE Center, and Erin Zerbo, MD, Assistant Professor, Department of Psychiatry, Rutgers New Jersey Medical School. Like all Practice Groups, the AMH PG also significantly contributed to NJAMHAA's impactful advocacy on the need to increase access to all services.
In the Children’s Practice Group, the long-standing issue of children’s screening services took on a new approach, with the Mental Health Emergency Services Association Chairs Albert Bassetti, MA, LPC, Director of Emergency Services, Hunterdon Medical Center/Behavioral Health, and Jennifer Plews, Senior Program Director, Psychiatric Emergency Services, Acenda Integrated Health, joining the group for a discussion on how advocacy around children’s emergency services should proceed. Children’s needs in this regard were identified, as were the current gaps in services and the many creative solutions implemented in counties around the state. A survey has been developed to gather more detail on the various collaborations and innovative programs at the county level to both inform and add detail to the continued advocacy efforts for children’s emergency mental health services. On multiple occasions, the Children’s Practice Group also hosted DCF Commissioner Christine Norbut Beyer, MSW, Deputy Commissioner of Operations Katie Stoehr, MA, and CSOC Assistant Commissioner Greene.

Following are highlights of the Information Technology (IT) Project’s groups’ achievements:

The Billing Practice Group continued its high level of activity through the NJAMHAA Groupsite, providing valuable information and advice to fellow members including timely conversations about fee-for-service billing changes and very active discussions on billing requirements and coding for telehealth.

The Compliance and Performance Improvement Committee demonstrated an equally high level of activity through their NJAMHAA Groupsite and they had guest speakers present on various topics, including fraud, waste, abuse and compliance; and prepared for implementation of the Centers for Disease Control and Prevention’s Checklist on Preparedness in the early stages of the coronavirus pandemic. This committee also started the Spotlight Presentation Series, through which agencies present on topics they would like to spotlight and share with the committee. The series was launched with Victoria Hewitt, Privacy Specialist on HIPAA Security, Acenda Integrated Health, presenting on Champions for Healthcare Quality Assurance and Compliance.

The NJAMHAA Human Resources Practice Group has joined forces with the Human Resources Committee of the New Jersey Alliance of Children, Youth and Families as both associations have many of the same members. The staff of these agencies recommended that both associations meet together on a quarterly basis to save time and to work on issues more collaboratively. The committee listened to presentations on employee benefit programs and changes in federal and state employment laws. The Alliance shared the results of its salary survey with the committee this fiscal year, as well.

The IT Professional Advisory Committee has held steadfast that the data collection mechanism for the Unified Services Transaction Form needs to be updated to be consistent with codes that are included in the Diagnostic and Statistical Manual of Mental Disorders IV and International Statistical Classification of Diseases-10. This year, members of the IT Project secured two meetings with Valerie Mielke, MSW, Assistant Commissioner, Division of Mental Health and Addiction Services (DMHAS), to bring this to the forefront. DMHAS assured NJAMHAA that this would be a priority moving forward (prior to the pandemic). The committee also assisted with modifying the Quarterly Contract Monitoring Reporting system to align several of the definitions with the data that needs to be collected.
JAMHAA created several councils as a way to facilitate networking between member providers and companies that are important for maximizing the effectiveness of services delivered by the mental healthcare, substance use treatment and social services field. NJAMHAA also established relationships with certain businesses that are Approved Vendors.

### Approved Vendors

- Brown & Brown - Insurance consultant: property/casualty and other services
- Butler Human Services, Inc. - Furniture
- CBIZ Employee Benefits - Helps organizations meet the challenges of today's healthcare environment
- Chorus Communications - Full service technology solution firm
- ComplyAssistant - Security and risk assessments
- Domain Computer Services - IT solutions for small to medium businesses
- GoMo Health® - Science-based behavioral health software/app to augment clinical treatment
- Unemployment Services Trust - Minimizes unemployment costs and liabilities

### Educational Council

- Adelphi University, School of Social Work
- Bergen Community College Wellness Center
- Caldwell College
- College of Saint Elizabeth
- Columbia University
- Monmouth University
- Montclair State University
- New Jersey Association of State Colleges & Universities
- New Jersey City University
- Ocean County College
- Ramapo College of New Jersey
- Robert Wood Johnson Medical School
- Rowan University
- Rutgers School of Health Professions
- Rutgers School of Management and Labor Relations
- Saint Peter's College
- Seton Hall University
- Stockton College
- Temple University College of Health Professions and Social Work
- The College of New Jersey
- Thomas Edison State College

### Information Technology Council

- Advanced Data Systems – Healthcare software
- Ancero - Full service IT and communications provider
- Applied Business Services – Accounting and business software
- Chorus Communications – Full service technology solution firm
- Core Solutions – Electronic health record (EHR) software
- ComplyAssistant - Security and risk assessments
- Credible Behavioral Health Software – Web-based software
- DATIS HR Cloud – Human resources and payroll software
- Domain Computer Services – Networking solutions
- Foothold Technology – Web-based EHR software
- Hunter Technologies – Telephony, networking, video conferencing
- Netsmart Technologies – EHR software, health information exchange, data analytics
- NextGen Healthcare Information Systems – Healthcare solutions
- NextStep Solutions, Inc. – Electronic medical records and billing software
- Ocellus Tech (formerly Mercadien Group) – Accounting and other business services
- Patagonia Health, Inc. – Cloud- and apps-based healthcare software
- Qualifacts, Inc. – Software-as-a-Service and web-based EHR software
- Streamline Healthcare Solutions – Service coordination software
- TenEleven Group – Business process management software
- Zoobook Systems LLC – EHR software and support for revenue growth
A YEAR LIKE NO OTHER

Integrated Healthcare Council
• Acutis Diagnostics – Clinical lab and tools for monitoring medications
• Aetna Better Health of New Jersey – Health maintenance organization (HMO)
• Amerigroup Corporation – HMO
• Ammon Labs – Toxicology laboratory
• Ammon Foundation – Scholarships for individuals in recovery
• Attitudes In Reverse® – Mental health and suicide prevention education
• Community Access Unlimited – Services for individuals with intellectual/developmental disabilities
• Community Care Behavioral Health Organization – behavioral health managed care organization
• Faegre Drinker Biddle & Reath LLP – Law firm
• Gallagher Benefit Services – Insurance; health and welfare consulting
• Genoa Healthcare – Telepsychiatry provider
• Health Management Associates – Research and consulting firm
• Horizon NJ Health – HMO
• LTC Contracting – Negotiation support
• Mutual of America – Retirement plans
• OPTUM Health/United Health Community Plan – HMO
• PerformCare New Jersey – Children’s System of Care Contract Administrator
• Rutgers School of Social Work – MSW education
• Sobel Co., LLC - Accountants
• Truetox Laboratories LLC – Provider of custom clinical testing
• WellCare Health Plans (recently became part of Centene) – HMO

While not all of the Councils meet on a regular basis, the Health Maintenance Organization (HMO) Council and Life Sciences and Innovation Council (LSIC) convene frequently and have hosted experts on a variety of important topics throughout the year.

Health Maintenance Organization (HMO) Council
This Council consists of the following HMOs, as well as providers and representatives from the Division of Mental Health and Addiction Services (DMHAS), Division of Medical Assistance and Health Services (Medicaid) and New Jersey Association of Health Plans:
• Aetna Better Health of New Jersey
• Amerigroup Corporation
• Community Care Behavioral Health Organization
• Horizon NJ Health
• OPTUM Health/United Health Community Plan
• WellCare Health Plans

Guest presentations were delivered on treating substance use disorders in the geriatric population and the loneliness epidemic; and on the New Jersey Peer Recovery Program, through which Rutgers University Behavioral Health Care provides peer counseling, using the models of wellness and reciprocal peer support, in partnership with Horizon Blue Cross Blue Shield.

Grace Mack, Esq., Co-Chair, Healthcare Department, Wilentz, Goldman & Spitzer, P.A., a healthcare attorney, presented on telehealth regulations for both the HMO Council and the LSIC.

Life Sciences and Innovation Council (LSIC)
Members of the LSIC from pharmaceutical and biotechnology companies are listed below:
• Alkermes, Inc.
• BioNJ
• HealthCare Institute of New Jersey
• Johnson & Johnson Health Care Systems, Inc./Janssen Pharmaceuticals, Inc.
• Otsuka America Pharmaceutical, Inc.
• Perkins Partnership
• Pfizer Inc.
• Pharma-Care, Inc.
• Sunovion Pharmaceuticals, Inc.

Member providers and representatives from DMHAS and Medicaid also participate on this Council. Guest experts presented on drug interactions among cannabis, cannabidiol and prescriptions; treatments in the pipeline, current research and alternatives to opioids for pain management; and tobacco cessation treatment and related research.
During the pandemic, the Information Technology (IT) Project team assisted members with transitioning to telecommuting and providing services through telehealth, including implementation of new hardware with remote support. Equipment is provided either by having it shipped to the homes of IT Project staff, who configure it and send it to agencies; or by having IT Project staff work at the agencies to start the process and then complete configuration remotely.

The IT Project team continued its exceptional help desk services, providing members with a broad range of technical support, including expert consultation, troubleshooting and other services relating to members' computer hardware and software systems. In FY2020, the IT Project implemented a help desk ticketing system and logged 1,163 tickets to date.

The technical assistance the IT Project provides is broad, and includes: configuring networks; enhancing computers and/or investing in software to efficiently handle complicated billing requirements; managing equipment in multiple locations and with staff who are on the road; implementing Microsoft Office 365 (O365), which is free to nonprofits; converting e-mail systems to O365; and much more. An extra value of working with the IT Project is that the team has an understanding of the non-technical challenges providers face, such as operating within a fee-for-service reimbursement system and complying with multiple confidentiality regulations. The IT Project's support resulted in expanded agency use of O365, as well as OneDrive and SharePoint, all of which help increase efficiency and ensure protection of data.

To keep providers ahead of the curve in a quickly evolving healthcare environment, the IT Project team held numerous educational workshops both in person and as webinars.

Examples of topics covered are:
- Microsoft Power BI (a business analytics tool), Layers 1 and 2
- IT Business Continuity Planning for 2020
- How Much Should You Spend on IT?
- Ensuring a Secure and Compliant Office 365 Environment
- COVID-19 and Behavioral Health Providers: HIPAA, Telehealth and Tele-mental Health, CARES Act Amendment to 42 CFR Part 2, and more!

The IT Project moved forward in establishing an electronic health record (EHR) collaborative as part of the Substance Use Disorder Promoting Interoperability Project (SUD PIP). This initiative is funded and overseen by the New Jersey Department of Health and Department of Human Services, and the IT Project is managing the project in collaboration with the New Jersey Innovation Institute (NJII). The SUD PIP supports SUD treatment providers’ implementation of EHRs in their facilities and will improve coordination among providers and the rest of the healthcare system by increasing EHR usage and interoperability, including connection to the New Jersey Health Information Network. The NJHIN provides the infrastructure for electronic sharing of patient health information among healthcare providers, health information exchanges and state health data sources.

The year started off with three Medication Assisted Treatment (MAT) facilities entering into a contract with TenEleven to collaborate and jointly implement the eCR platform, adopting best practices from each other, thus creating a stronger workforce who will be cross trained in the application.

Due to the pandemic, all meetings are now held virtually, and the implementation process is going smoothly. All agencies expect to attest to Milestone 2 of the SUD PIP program in December 2020.
New Jersey Mental Health Institute Provides Crisis Support and Technical Assistance and Training

The New Jersey Mental Health Institute (NJMHI) was established in 2000 to promote quality mental health services through training, technical assistance, research, and policy development. In 2019, NJAMHAA elected new members of the NJMHI Board of Trustees to introduce innovative thinking in exploring new opportunities.

In FY2020, NJMHI completed its 15-year Sri Lanka Mental Health Relief Initiative, which began in 2005, soon after the Southeast Asian tsunami hit Sri Lanka. Working in conjunction with the Neurosurgery Development Foundation, a local, non-governmental Sri Lankan charitable organization, a NJMHI team, including an expert trainer with extensive experience in trauma treatment and a cultural ambassador, traveled to Sri Lanka for two weeks to provide trilingual training to more than 100 local counselors, the medical community, teachers, corporate human resource specialists, religious and local community leaders and volunteers in recognizing the symptoms of post-traumatic stress disorder, anxiety, depression, other mental illnesses and substance use disorders and, when appropriate, referring people to treatment directly. Evaluations were sent out and it was determined that more than 200,000 people had been positively impacted directly or indirectly as a result of the training by the individuals who were trained. In addition, since the team could not return to Sri Lanka to provide additional training due to civil unrest, NJMHI created trilingual educational brochures, which have been shown to be valuable resources. This third and final phase of the Initiative was undertaken with the Sri Lanka Centre for Development Facilitation (SLCDF), a nongovernmental organization in Sri Lanka, which engaged Sister Janet Nethisinghe, President of the Sri Lanka EMDR (Eye Movement and Desensitization and Reprocessing) Association, and a group of professionals to develop the Program for Community Leaders to Enhance their Capacity as Facilitators on Basic Mental Health Needs/Requirements for communities in remote areas that do not have consistent cohorts of clinicians. This three-part training program provided theoretical knowledge and practical skills in individual counseling. The final phase educated participants on social and health issues, including mental illness, in rural communities in Sri Lanka and provided an introduction to counseling and awareness of the process of community counseling. The program also aimed to develop positive self-concepts and healthy peer relationships among attendees and explored the roles and responsibilities of community counselors. According to the SLCDF, 50 families (250 individuals) directly benefited from this Initiative and 1,500 families benefited indirectly.

NJMHI is currently exploring ideas to build on its reputation for providing culturally and linguistically relevant behavioral health services, and evidence-based practices for clinicians working with veterans and children’s providers. Possible projects include developing medical-legal partnerships and collaborating with a New Jersey medical school to establish a Center of Excellence that would focus on addressing social determinants of health.
During the past 25 years, NJAMHAA has strengthened its financial position significantly and simultaneously continued to invest in advocacy, communications and training to help keep its members strong while they contend with increased competition and an ever-changing payment landscape. For the trade association, NJAMHAA’s efforts over these years have resulted in increased excess revenues, stability, investment in programs and expansion of staff and membership. This is a true testament to the value of NJAMHAA as perceived by its members and its ability to creatively develop new sources of revenue. NJAMHAA has achieved this growth and stability despite the nationwide trend of increased competition for declining resources.

At the end of Fiscal Year (FY) 2019, NJAMHAA’s net assets totaled $1,576,911. This represents a 4.7 percent increase over the prior year, and a 1,515 percent increase over 1995, at which time NJAMHAA’s net assets equaled $104,108.

In FY2019, NJAMHAA had net revenues of $70,257 at year end. Its primary revenue sources continued to be membership dues and conferences. In addition to the regular membership dues, there had been increased activity since 1995 in the Integrated Healthcare, Life Sciences and Innovation, and Information Technology (IT) Councils, as well as from new and existing approved vendors and IT support contracts. In FY2019, NJAMHAA’s dues revenues totaled $571,239, an 816 percent increase over the dues revenue of $69,968 in 1995. The strong and stable membership base continues to be a testament to NJAMHAA’s value in the mental healthcare and substance use treatment community.

The IT Project, which is a joint public/private venture of NJAMHAA, the New Jersey Division of Mental Health and Addiction Services (DMHAS) and the IT Project participants, remained stable in its funding from DMHAS, receiving $499,924 and another $236,156 in IT support contract revenue in FY2019.

For FY2019, the unrestricted net asset balance for the New Jersey Mental Health Institute (NJMHI) was $11,392. Temporarily restricted net assets equaled $10,653. During FY2019, the majority of the funds remaining in NJMHI’s Tsunami Mental Health Relief Fund were spent on phase three of the Sri Lanka training program, leaving the Fund with a balance of $653 at the end of June 2019. The remaining temporarily restricted net assets of $10,000 represented a donation by Debra Wentz to be restricted for a reserve fund for NJMHI. This amount was received in 2009 from Eli Lilly and Company, and she chose NJMHI as the charitable organization for her donation.
While FY2020 was certainly a year like no other due to the coronavirus pandemic and the significantly more than usual multitude of changes than those that NJAMHAA members normally contend with, one thing that remains consistent and has been unwavering since NJAMHAA was founded in 1951 is the association’s dedication to supporting all members through its advocacy, communications and training events.

For nearly 70 years, NJAMHAA has established strong relationships with members and relies on members’ insights to inform advocacy and maximize its impact. NJAMHAA has been equally successful in developing productive alliances with other stakeholder groups and representatives of the state and federal governments, which have greatly contributed to the profound impact the association has achieved on legislation, regulations and policies.

Whether a year is “typical” – if such a thing exists – or a year like no other, as FY2020 has been as a result of the pandemic and the death of George Floyd leading to the outcry of equality for Black Americans and social justice, NJAMHAA will always stand strong on behalf of its members and those they serve.
FOLLOW NJAMHAA ON SOCIAL MEDIA!

We keep you informed of current affairs in mental health care and addiction treatment.

We provide updates on trainings, events and resources available.

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