## American Psychiatric Association

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Saul Levin, M.D., M.P.A. CEO and Medical Director Paul T. Burke Executive Director, American Psychiatric Foundat April 3, 2014

The Honorable Fred Upton Chairman Committee on Energy and Commerce U.S. House of Representatives 2125 Rayburn House Office Building Washington, DC 20515

The Honorable Joe Pitts Chairman Energy and Commerce Health Subcommittee U.S. House of Representatives 2125 Rayburn House Office Building Washington, DC 20515 The Honorable Henry A. Waxman Ranking Member Committee on Energy and Commerce U.S. House of Representatives 2322A Rayburn House Office Building Washington, DC 20515

The Honorable Frank Pallone, Jr. Ranking Member Energy and Commerce Health Subcommittee U.S. House of Representatives 2322A Rayburn House Office Building Washington, DC 20515

Dear Representatives Upton, Waxman, Pitts and Pallone:

I write on behalf of the American Psychiatric Association (APA), the medical specialty association representing approximately 35,000 psychiatric physicians and their patients and families, to express appreciation for convening today's important hearing on H.R. 3717, the Helping Families in Mental Health Crisis Act. Over 60 million Americans live with a diagnosable psychiatric or substance use disorder, and 13 million Americans live with a serious or severe psychiatric disorder. Our country is at a historic crossroads in its treatment of individuals with serious mental illnesses and its ability to deal with the personal, economic, and moral consequences of untreated psychiatric disorders.

American Psychiatric Foundation Both comprehensive mental health reform legislation and vigilant federal oversight to ensure that current mental health laws achieve their goals are important first steps to ensuring access to appropriate mental health care for millions of Americans. Access to innovative and integrated treatment must be increased in all appropriate venues of care, including community settings, psychiatric hospitals, and general medical institutions. Criminal justice reforms that encourage diversion from jails and prisons into safe, sensible environments for treatment must be continued and improved. Research into the causes and potential treatments of psychiatric conditions must be supported. Prevention and mitigation of the severity of mental illnesses must be promoted. An acute psychiatric workforce shortage must be addressed. Federal government mental health resources within the Department of Health and Human Services and beyond must be better coordinated, and more psychiatric expertise is needed. Finally, the promise of Congress' most significant bipartisan mental health reform in decades, the Mental Health Parity and Addiction Equity Act, must be kept.

The Helping Families in Mental Health Crisis Act seeks to achieve many of these goals, and it is clear that the legislation under review by your committee today contains an overall



emphasis on the provision of evidence-based psychiatric and substance use services and research supports. In the wake of the Newtown shooting tragedy, both parties in both chambers have recognized a need for a thorough response to the tragedy of untreated mental illness. It is APA's hope that lawmakers in both parties, in collaboration with the mental health advocacy community, can move forward with bipartisan comprehensive mental health legislation that significantly and positively reforms our broken public health delivery system. Today's hearing is a serious step towards that end.

Recent progress has been made to improve access to treatment for individuals suffering from mental illness that both exemplifies the bipartisan nature of the nation's core mental health delivery challenges and inspires optimism for enactment of comprehensive reform. Legislation that temporarily delays cuts to Medicare physician reimbursement also included two important provisions that would support community mental health services and assist states with programs aimed at preventing hospitalization for individuals with severe and persistent mental illness. While APA was disappointed that the underlying legislation did not permanently address the flawed Medicare Sustainable Growth Rate formula, we were pleased to see inclusion of grant program for assisted outpatient treatment and funding for community behavioral health centers. APA is hopeful that bipartisan efforts, such as this, will continue in order to address the many remaining challenges persons with mental illness experience.

Thank you again for holding this important hearing. The leadership and members of APA look forward to working with you to better our patients' access to needed psychiatric services.

Sincerely,

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Saul M. Levin, M.D., M.P.A. CEO and Medical Director

cc: The Honorable Tim Murphy