



April 5, 2017

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The Honorable Rodney P. Frelinghuysen
Chairman, Committee on Appropriations
U.S. House of Representatives
Washington, DC 20515

The Honorable Tom Cole
Chairman, Subcommittee on Labor, Health
and Human Services, Education, and Related
Agencies
U.S. House of Representatives
Washington, DC 20515

The Honorable Nita M. Lowey
Ranking Member, Committee on
Appropriations
U.S. House of Representatives
Washington, DC 20515

The Honorable Rosa DeLauro
Ranking Member, Subcommittee on Labor,
Health and Human Services, Education, and
Related Agencies
U.S. House of Representatives
Washington, DC 20515

Dear Chairman Frelinghuysen, Ranking Member Lowey, Chairman Cole, and Ranking Member DeLauro:

On behalf of the American Psychiatric Association (APA), the national medical specialty association representing over 37,500 psychiatric physicians nationwide, we urge you to include the funding requests below in the fiscal year 2018 (FY2018) Labor, Health and Human Services, and Education appropriations bill, to sustain and expand access to mental health and substance use disorder services necessary to ensure the overall health of Americans and the nation's economic prosperity.

At a time when millions of Americans face uncertainty to the future of health care, access to mental health and substance use services is critical to ensuring the welfare of those most vulnerable. According to the National Institute of Mental Health, more than 68 million Americans experienced a psychiatric or substance use disorder in the past year. Untreated, these millions of Americans will effectively contribute heavily to the burden of disease on their families, the community, and the country. We recognize that the Committee faces difficult decisions in funding myriad priorities with increasingly limited resources. Through enhanced federal commitment to programs—stimulating the mental health workforce, furthering evidence-based practices, and advancing medical research—we can equip the next generation of mental health professionals to face the increasing health challenges of the 21st century.

Mental Health Reform

Through the passage of H.R. 34, the 21st Century Cures Act, Congress continued its long history of bipartisan support by investing in efforts to curb the nation's opioid epidemic, promote evidence-based treatments, strengthen mental health parity, and bolster the behavioral health workforce—making access to mental health services once again a priority for the nation.

- **We urge you to fund the full authorization of \$50 million in FY 2018 for the mental and behavioral health education and training grants, under section 9021 of H.R. 34, dedicated to interdisciplinary training programs that have demonstrated the ability to train psychiatrists and other specialists to collaborate in care settings.** The Health Resources and Service Administration estimates 4,600 areas across the country are impacted by a mental health professional shortage. Our nation's ability to deliver mental health services is essential for a healthy and thriving population. We must make deliberate investments in team-based care models, creating a high-performing workforce with the capability to meet the demands of a rapidly changing health care environment.
- **We urge you to fund the full authorization of \$10 million in FY 2018, under section 9022 of H.R. 34, to establish a training demonstration program for medical residents and fellows to enhance their skills in addiction prevention and treatment strategies needed in underserved, community-based settings.** The nation is facing a drug overdose epidemic. Fatal drug overdoses have become the leading cause of accidental deaths, increasing by 2.2-fold over the last decade. Undertreated substance use disorders remain a prevalent, harmful public health problem in the United States. In 2015, an estimated 21.7 million individuals needed substance use treatment, many of whom did not receive it. Those living with substance use disorder are victims of the nationwide 90 percent addiction treatment gap. It is vital to invest federal support to strengthen the workforce in underserved and low-income areas lacking access to appropriate treatment.
- **We urge you to fund the full authorization of \$14.7 million in FY 2018 for the mental health awareness training grants, under section 9010 of H.R. 34, to increase early identification and improve nonviolent crisis intervention among individuals who closely interact with adolescents.** In 2015, 3.0 million adolescents (age 12 to 17) were diagnosed with a major depression disorder. Research has shown that early identification, intervention, and treatment of mental disorders make a positive difference in the life of a child or adolescent living with mental illness or substance use disorder. Evidence-based education programs, like the American Psychiatric Association Foundation's program Typical or Troubled, equips teachers, other school personnel, and parents to recognize the warning signs of mental health problems, while simultaneously promoting intervention and treatment at an early phase.
- **We urge you to fund the full authorization of \$12.6 million in FY 2018 for the minority fellowship program, under section 9024 of H.R. 34, to strengthen ethnic diversity in the health care professional addressing the current and projected behavioral health workforce shortages and the need to train providers to address health disparities.** Health disparities across underserved, minority communities have remained persistent, despite improvements in overall health status. A shortage of physicians practicing in these underserved communities is a major contributor. The Minority Fellowship Program helps facilitate the entry of ethnic minority medical students and residents into mental health and/or substance abuse careers and increase the number of health care professionals trained to teach, administer, and provide culturally competent mental health and substance abuse services within underserved, minority communities.

Substance Abuse and Mental Health Services Administration (SAMHSA)

The Substance Abuse and Mental Health Services Administration is a key component to the availability of continuous access to mental health and substance use services, and **we urge you to provide FY 2016 enacted level funding (\$3.7 billion) in FY 2018, to sustain programs with demonstrated advancements in the delivery and financing of prevention, treatment, and recovery services.** SAMHSA helps provide access to treatment and services for the more than 68 million Americans who have experienced a psychiatric or substance use disorder in the past year. The agency supports the families of people with mental and substance use disorders, prevents costly behavioral health conditions, and improves the overall quality of treatment and rehabilitative services.

- **We urge you to provide level funding (\$532.6 million) in FY 2018 for the SAMHSA Community Mental Health Services Block Grant, an important investment in state programs providing comprehensive community mental health services for this vulnerable population.** States have seen a growing demand for community-based mental health services, at a time when budgetary constraints have reduced health care resources. Funds appropriated to SAMHSA's Center for Mental Health Services (CMHS) establishes Community Mental Health Services Block Grants (MHBG) for states to implement evidence-based mental health promotion and prevention and treatment practices for early intervention of individuals with serious mental illness and children with emotional disturbances. The preservation of the Community Mental Health Services Block Grant will equip states with funding to serve more than 13 million adults with serious mental illness and children with serious emotional disturbances through the public mental health system.
- **We urge you to provide FY 2016 enacted level funding for the SAMHSA Center for Substance Abuse Prevention (CSAP) at \$211.148 million and SAMHSA Center for Substance Abuse Treatment (CSAT) at \$333.769 million.** The Center for Substance Abuse Prevention (CSAP) and the Center for Substance Abuse Treatment (CSAT), under SAMHSA, promote community-based substance abuse prevention and treatment services. To improve and expand existing services to the states, the Centers support the Substance Abuse Prevention and Treatment Block Grant Program aimed at supporting numerous programs— to increase access to treatment, reduce unmet treatment need, and prevent overdose related deaths. The services supported through the program are not typically covered through private insurance, making the Block Grant Program a crucial component to our nation's delivery system.

National Institute of Mental Health

We urge you to provide FY 2016 level funding of \$1.519 billion for the National Institute of Mental Health, as the lead agency for research on mental illnesses, paving the way for discovery and development of prevention, recovery, and cure for mental illness and substance use disorder. The National Institute of Mental Health (NIMH) is the primary institution responsible for advancements in biomedical, health-related research specific to mental illness. Through basic and clinical research, NIMH transforms the understanding of mental illness and fosters innovative thinking to further discovery of the brain and behavior.

National Institute on Drug Abuse

We urge you to provide FY 2016 level funding of \$1.05 billion for the National Institute on Drug Abuse, as the lead agency for research on substances of abuse. The National Institute on Drug Abuse (NIDA) is the primary institution in the nation responsible for funding research on the causes, treatment, and prevention of addictions to substances such as opiates, that pose a serious public health crisis in this country. Given

the substantial comorbidity between substance use and mental illness, adequate funding for NIDA is also crucial for understanding and addressing the complex relationships between these disorders.

National Institute of Alcohol Abuse and Alcoholism

We urge you to provide FY 2016 level funding of \$467 million for the National Institute on Alcohol Abuse and Alcoholism (NIAAA). NIAAA is the lead agency for research on the risks factors for and recovery from these highly prevalent conditions. Alcohol abuse and addiction are also frequently gateways to additional mental and substance use disorders, making it imperative to adequately fund basic and clinical research in this critical area.

BRAIN Initiative

We urge you to fund the full authorization of \$86 million in FY 2018, under H.R. 34, to the BRAIN Initiative providing support as researchers uncover the mysteries of brain disorders. The Brain Research through Advancing Innovative Neurotechnologies (BRAIN) Initiative prioritizes neuroscience, medical research and developing innovative technologies dedicated to treating psychiatric or neurological disorders. Since its inception in 2013, the Initiative continues to make great strides towards uncovering the molecular mechanisms of brain function and breakthroughs to treat those afflicted with Alzheimer's, autism, schizophrenia, and depression. APA strongly supports the Initiatives investment in treatment development and its collaborative projects pioneering new research to find cures.

Agency for Healthcare Research and Quality

We urge you to provide \$364 million in budget authority in FY 2018, consistent with FY 2015 discretionary spending. The Agency functions as a reputable data-driven source of information, a vital benefit to all whom can apply it in improving the quality, safety, and efficiency of health care. For psychiatry, this is particularly important in providing patients, families, and health professionals with a comprehensive knowledge of current cost-effective treatments. Mental disorders are themselves associated with significant costs, and frequently co-occur with multiple medical conditions, leading to increased cost of care and potentially poorer outcomes. Research is critical in identifying best practices to reduce costs and ensure medical progress into better care. AHRQ is the singular federal agency to support research examining real-world settings, resulting in data demonstrating clinical practices for individuals with mental comorbidity and chronic illness, the impact of atypical antipsychotic use on elderly health care, and federal initiatives to lower medical errors. **APA urges support for adequate funding to sustain AHRQ as a standalone agency within HHS to continue its critical research mission to make health care safer, more affordable, and accessible to all.**

National Health Service Corps

We urge you to fund the authorization of \$380 million; this amount includes \$310 million in enacted mandatory funding, \$20 million in discretionary spending through new budget authority, and \$50 million in new mandatory funding to expand access to treatment to reduce prescription drug abuse and heroin use and expand access to mental health care through the National Health Service Corps. With a field strength of 3,210 mental health clinicians, National Health Service Corps (NHSC) practitioners are providing care to over 10 million patients at 16,000 NHSC-approved health care sites in urban and rural areas. The programs under NHSC have proven to help address the health professionals' workforce shortage and growing maldistribution, while meeting the health care needs of the underserved. APA was pleased that the Medicare Access and CHIP Reauthorization Act, H.R. 2, preserved appropriations to NHSC at its FY2015

funding level through FY2017. The National Health Service Corps urgently needs discretionary funding to be able continue its operations.

Under bipartisan leadership, Congress has worked to sustain funding for many mental health, substance use, and criminal justice programs aiding the millions of Americans living with a serious mental illness and substance use disorders, their families, psychiatrists, and other mental health professionals. We acknowledge the current budget climate is extraordinarily challenging and that Congress has a responsibility to carefully consider the nation's spending priorities. We thank you for the Committee's past leadership in investing in health care, particularly for individuals living with a mental illness or substance use disorder; and we urge continued support for robust systems of care, innovative programs, and a high-performing workforce ready to meet the pressing health challenges of the 21st century. APA is committed to working with you to continue funding essential to maintaining the gains that have been achieved and ensuring mental health is a priority.

Sincerely,

A handwritten signature in black ink that reads "Saul Levin, M.D., M.P.A." The signature is written in a cursive style.

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

Cc: Members, House Appropriations Committee and Labor-HHS-Education Appropriations Subcommittee