



August 24, 2021

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The Honorable Nancy Pelosi
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S-222, U.S. Capitol
Washington, DC 20515

The Honorable Kevin McCarthy
Minority Leader
U.S. House of Representatives
S-204, U.S. Capitol
Washington, DC 20515

Dear Speaker Pelosi and Minority Leader McCarthy:

On behalf of the American Psychiatric Association (APA), the national medical specialty association representing over 37,400 psychiatric physicians, I want to thank you for your hard work over the past year and a half to enact multiple COVID-19 pandemic relief packages. APA applauds the steps Congress has taken to invest in mental health and substance use disorder (MH/SUD) care and other essential measures to address the health and economic impact of the COVID-19 crisis. However, given chronic underfunding and the need to improve access to care, there is still more work to be done to help patients with MH/SUD conditions.

APA was pleased to see the Energy and Commerce Committee pass a handful of APA-supported MH/SUD-related bills through committee earlier this month. These APA-supported bills, pertaining to social determinants of health, maternal mortality and severe maternal morbidity, substance use disorders/drug policy and Medicaid are detailed below. Given the exacerbation of MH/SUD conditions during the COVID-19 pandemic, it is urgent that the House move these bills to the floor for passage expeditiously to ensure that Americans receive access to vital MH/SUD treatment.

Social Determinants of Health

The disproportionate impact of the COVID-19 pandemic on racial and ethnic communities and vulnerable populations has highlighted the necessity of addressing health inequities. Social determinants of health are among the most significant contributors to negative health outcomes and overall health equity. As such, APA was pleased to see the Committee examine several bills that address social determinants of health. APA is pleased to support **H.R. 2503, the “Social Determinants Accelerator Act of 2021,”** introduced by Reps. Bustos (D-IL), Cole (R-OK), McGovern (D-MA) and Mullin (R-OK), which helps states and communities improve existing programs and authorities to better the overall health of Medicaid beneficiaries. In addition, APA is proud to support **H.R. 4026, the “Social Determinants of Health Data Analysis Act**

of 2021,” introduced by Reps. Burgess (R-TX) and Blunt Rochester (D-DE). This legislation requires the Comptroller General to report to Congress on actions taken by the Secretary of Health and Human Services (HHS) to address social determinants of health. Finally, APA is pleased to support **H.R. 3894, the “Collecting and Analyzing Resources Integral and Necessary for Guidance (CARING) for Social Determinants Act of 2021,”** introduced by Reps. Blunt Rochester (D-DE) and Bilirakis (R-FL), which would require HHS to issue guidance and technical assistance to states on how to further address social determinants of health through Medicaid programs and the Children’s Health Insurance Program.

Maternal Mortality / Severe Maternal Morbidity

Psychiatric issues during pregnancy and after delivery are some of the most difficult obstacles facing new mothers after they return home from the hospital with their newborns. New mothers are at high risk for postpartum psychiatric illnesses with the most concerning being postpartum manic, depressive, and mixed episodes with psychotic features and psychoses not otherwise specified. It is for these reasons that APA is pleased to support Committee-passed **H.R. 925, the “Data to Save Moms Act,”** introduced by Rep. Davids (D-KS). The legislation expands maternal morbidity and mortality data collection among minority populations through increased funding for Maternal Mortality Review Committees and also improves data collection and community engagement to promote further research into the maternal health crisis among individuals from racial and ethnic minority groups. In addition, the APA supports **H.R. 4387, the “Maternal Health Quality Improvement Act of 2021,”** introduced by Reps. Kelly (D-IL), Bucshon (R-IN), Adams (D-NC), Burgess (R-TX), Hayes (D-CT), and Latta (R-OH). This legislation authorizes grant programs to identify, develop or disseminate maternal health quality and outcomes best practices that aim to eliminate preventable maternal mortality and/or severe maternal morbidity, among other things.

Substance Use Disorder / Drug Policy

As psychiatrists, we know that substance use disorders and co-morbid mental and physical illnesses are complex problems that require multidimensional solutions. APA has been supportive of several substance use disorder-related legislation passed by the Energy and Commerce Committee in the past, and is pleased to lend our support to the following bills. The **Drug-Free Communities Pandemic Relief Act**, H.R. 654, introduced by Reps. Joyce (R-OH) and Kilmer (D-WA) would provide flexibility to Drug-Free Communities (DFC) coalitions during the COVID-19 pandemic by temporarily allowing the Office of National Drug Control Policy (ONDCP) the authority to waive the program’s local matching requirements if the grantee is unable to meet them due to the ongoing pandemic. In addition, APA is pleased to support the **Methamphetamine Response Act of 2021**, H.R. 2051, introduced by Reps. Peters (D-CA) and Curtis (R-UT), which would declare methamphetamine an emerging drug threat and require the Office of National Drug Control Policy (ONDCP) to develop, implement and make public a national plan to prevent methamphetamine addiction and overdoses from becoming a crisis. Further, APA is pleased to support the reauthorization of State Opioid Response Grants, H.R. 2379, the **State Opioid Response Grant Authorization Act of 2021, H.R.2379**, as introduced by Reps. Trone (D-MD) and Sherrill (D-NJ). Finally, APA is also pleased to support **H.R. 2364, the Synthetic Opioid Danger Awareness Act**, led by Reps. Kim (D-NJ) and

Pappas (D-NH), legislation that requires the Centers for Disease Control and Prevention (CDC) to implement a public education campaign related to synthetic opioids, including fentanyl and its analogues. The legislation also requires that the National Institute for Occupational Safety and Health produce a training guide and webinar for first responders and other individuals related to exposures to synthetic opioids. Provisions mentioned in the legislation above offer solutions to closing the substance use disorder treatment gap and stopping SUDs before they start. However, in order to fully combat SUDs, we must continue to work on legislation that increases access and literacy, decreasing stigma, coordinates care and encourages everyone to work together to help patients and communities recover from the impact that the opioid crisis has had on our country.

Medicaid

Medicaid funding for Puerto Rico and US territories has been capped since 1968. However, the same caps do not apply to the states. As such, Puerto Rico and other U.S. territories must rely on short term supplemental funding to cover its Medicaid costs. This lack of continuous, long-term funding creates a financially unsustainable budget for Puerto Rico and endangers those who rely on Medicaid for their medical care. To this end, the APA supports **H.R. 4406**, the “**Supporting Medicaid in the U.S. Territories Act**,” introduced by Reps. Soto (D-FL) and Bilirakis (R-FL). The legislation provides five years of enhanced Medicaid funding for Puerto Rico and eight years of enhanced Medicaid funding for the USVI, American Samoa, Guam and the Northern Mariana Islands. The bill also extends current enhanced Federal Medical Assistance Percentage payments for each of the territories and makes certain programmatic improvements to Puerto Rico’s Medicaid program.

Thank you for your leadership in passing mental health and substance use disorder-related legislation. Please let us know how we can aid your efforts to advance these important bills to the House floor after August recess. If you have any questions, please contact Michelle Greenhalgh at mgreenhalgh@psych.org / 202.459.9708.

Sincerely,

A handwritten signature in blue ink that reads "Saul Levin MD, MPA". The signature is written in a cursive style with a horizontal line underneath the name.

Saul Levin, MD, MPA, FRCP-E, FRCPsych
CEO and Medical Director