



February 15, 2017

The Honorable Mark R. Warner  
U.S. Senator  
475 Russell Senate Office Building  
Washington, DC 20510

Dear Senator Warner,

We want to begin by acknowledging the tremendous bi-partisan support for mental health that has emerged during the past several years, culminating in the passage of significant mental health systems improvements in the 21<sup>st</sup> Century Cures Act.

We believe that these mental health provisions, coupled with the broad parity provisions – including support for pre-existing condition coverage and inclusion of behavioral health services as essential benefits – that are also now law, laid an important foundation for the improvement of mental health and substance use services in America.

However – as the scores of Congressional sponsors and supporters of mental health legislation have said – there is still much more work to do for both front-end and back-end services. We are writing to share both our willingness to assist your office as you consider initiatives affecting behavioral health that are yet to come, and some of our initial thoughts about these.

**Regarding Mental Health Systems Improvements: We favor freedom and fortitude.**

As we build on the solid foundation of the 21<sup>st</sup> Century Cures Act, we favor:

- Saving billions of dollars by ending the unnecessary and wasteful incarceration of nonviolent offenders with mental illnesses and substance use disorders;
- Expanding the use of certified peer specialists on both clinical care and social support teams as well as in reintegration and diversion practices in criminal justice, because this will save dollars, expand the workforce, improve deep-end health services integration, and promote recovery;
- Appropriating the dollars for new innovative and evidence-based programs that are authorized in the Act; and
- Prevention, screening, early identification, and early intervention services, including those that help integrate health and educational services for children – to promote success in school, reduce suspension and expulsion, and create successful pathways to adulthood – and help integrate health, housing, and employment supports for adults – to promote productivity and reduce dependence on government programs.

**Affordable Care Act: We favor revisions and repairs.**

As the private health care financing and insurance systems are changed, we favor:

- Maintaining behavioral health benefits at parity with other benefits, and recognizing that mental health is essential to the overall health and well-being of individuals; Maintaining guaranteed, continuous, and affordable insurance coverage for people with pre-existing and chronic conditions;
- Closing the existing gap in coverage for those living below poverty in non-Medicaid expansion states, because this adversely affects people with serious behavioral health conditions;
- Maintaining the established right of each state to set consumer protection and regulatory standards that exceed those established by the federal government; and
- Conforming 42 CFR Pt. 2 to HIPAA, thereby putting the individual in control of all his/her own health data because 42 CFR Pt. 2 is an expensive impediment to health and behavioral health integration – because you can't treat a whole person with half a record.

**Medicaid: We favor fair funding and flexibility.**

No matter what the structure for Medicaid is in the future, we favor:

- Not shifting costs to the states understanding that Medicaid, the single largest payer for mental health services, is the backbone of the public mental health system on which seniors and people with disabilities heavily rely;
- Protecting expansions in states that have expanded Medicaid;
- Permitting states to expand Medicaid if they wish; and
- Increasing flexibility within the Medicaid program to cover earlier interventions and non-medical services, such as supported housing and supported employment.

Mental Health America and its affiliates represent both the voices of people with lived experiences of mental illnesses and those who care for, and provide services, to them. Our organization was founded in 1909 and – among our many accomplishments – is responsible for bringing mental health out into the open by giving voice to the concerns of both individuals and families, establishing child guidance centers, creating the concept of creating community behavioral health centers, and naming May as Mental Health Month. Every mental health advocacy organization in existence today traces its roots to the work of our founder, Clifford W. Beers.

We are animated by the evidence that our behavioral health system is most effective when it promotes prevention for all, early identification and intervention for those at risk, integrated care, services and supports for those who need them, with recovery as the goal. Historically, behavioral illnesses are the only conditions we have waited until Stage 4 to treat, and then often inappropriately through incarceration. We believe that to change the trajectories of lives, we must be willing also to intervene before Stage 4, just as we do with every other chronic health condition.

Thank you for your attention to this letter. We look forward to working with you and your staff – both in Washington and back home – in the coming months.

Sincerely,



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President and CEO, Mental Health America

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