

**TESTIMONY FOR THE HONORABLE TIM MURPHY
COMMITTEE ON APPROPRIATIONS SUBCOMMITTEE ON LABOR,
HEALTH AND HUMAN SERVICES, EDUCATION, AND RELATED
AGENCIES**

March 1, 2017

Innocence was shattered on a cold day in Connecticut just over four years ago. But out of this darkest of tragedies has risen a glimmer of hope, as the landmark mental health reforms signed into law on December 13, 2016, as part of the 21st Century Cures Act, were spurred by the events of Sandy Hook.

As I wrote in the Pittsburgh Post-Gazette on December 30, 2012, following the Newtown tragedy, “The common factor in many mass tragedies is an underlying mental illness. The lessons for Americans from the horrifying tragedy in Connecticut is that we had better take off our blinders and deal with such illness or we are sure to face the same problem again. It is not only what’s in a person’s hands that makes his act violent, it’s what is in his mind.”

Against this backdrop, in 2013, the Committee on Energy and Commerce, spearheaded by the Subcommittee on Oversight and Investigations which I chair, began a national conversation on serious mental illness, jumpstarting a process that

would result in the enactment of the first comprehensive reforms to our national mental health system in over 50 years, just under four years later.

Our multi-year, bipartisan, bicameral effort revealed a broken system and informed our legislative response to overhaul the antiquated patchwork of ineffective programs. Mental illness is no longer a subject for the shadows, and while more work remains, tremendous strides have been made to help families and individuals in mental health crisis.

At the end of November 2016, as the bill language was being finalized, I made the observation that while we won't solve the mess of our mental health system in one bill – and we didn't get everything we needed – we needed everything we got. It was my pledge to the patients and families in mental health crisis then, as it is now, that I will never stop fighting to deliver treatment before tragedy for those most in need.

And that's why I'm here this morning, to ask that you help to translate the historic promises we made to families in mental health crisis into commitments to action that will improve and indeed save lives. In addition to the improvements it makes to leadership and accountability at the federal level for mental health and substance

use programs, the Helping Families in Mental Health Crisis Reform Act of 2016 reauthorizes a number of existing, crucial programs at the Substance Abuse and Mental Health Services Administration and the Department of Health and Human Services while authorizing anew several others.

These include support for Assisted Outpatient Treatment (AOT) grant programs. Known by different names in different states, such as involuntary outpatient treatment or mandatory outpatient treatment, AOT is court-ordered treatment for individuals with serious mental illness who meet strict legal criteria. Often, they are too ill to recognize their need for medical care. By assuring timely and effective intervention for severe mental illness, AOT restores the capacity to exercise civil liberties and reduces the likelihood of the loss of liberty or life as a result of arrest, incarceration, hospitalization, victimization, suicide and other common outcomes of non-treatment.

While there have been innumerable studies pointing to the effectiveness of AOT in reducing re-arrests, re-hospitalizations and other negative outcomes, studies have also shown how court-ordered treatment in the community reduces taxpayer costs associated with untreated serious mental illness. With that in mind, the legislation

increases and extends an existing authorization for a grant program for AOT at SAMHSA.

Addressing pressing concerns over a shortage of qualified mental health professionals, the Helping Families in Mental Health Crisis Reform Act of 2016 also strengthens the mental and behavioral health work force through education training grants, clarification on eligibility for loan repayment programs, and codification of the Secretary's Minority Fellowship Program. It also acts decisively to strengthen programs supporting mental and substance use disorder care for women, children, and adolescents.

The programs mentioned above are but a few of the commitments to families and individuals in mental health crisis that our colleagues in the House and the Senate supported so overwhelmingly at the end of last year. Let us see these commitments through, fund the programs which have been authorized, and ensure that we can finally make a difference in the lives of thousands of our families, our neighbors, and our friends.