



AMERICAN
PSYCHOLOGICAL
ASSOCIATION



AMERICAN
PSYCHOLOGICAL
ASSOCIATION
PRACTICE ORGANIZATION

June 14, 2016

The Honorable Fred Upton
Chairman
Energy and Commerce Committee
U.S. House of Representatives
Washington, DC 20515

The Honorable Frank Pallone, Jr.
Ranking Member
Energy and Commerce Committee
U.S. House of Representatives
Washington, DC 20515

Dear Chairman Upton and Ranking Member Pallone:

On behalf of the American Psychological Association (APA) and the American Psychological Association Practice Organization (APAPO), I am writing to express our strong support for the amendment in the nature of a substitute to the Helping Families in Mental Health Crisis Act of 2016 (H.R. 2646), to be considered by your committee tomorrow.

APA is the largest scientific and professional organization representing psychology in the United States. APA's membership includes more than 117,500 researchers, educators, clinicians, consultants, and students. Through its divisions in 54 subfields of psychology and affiliations with 60 state, territorial, and Canadian provincial associations, APA works to advance the creation, communication, and application of psychological knowledge to benefit society and improve people's lives. The APAPO is a companion organization to the APA dedicated to advancing the practice of psychology and promoting the interests of psychologists who practice in diverse settings.

We are grateful for your focus on H.R. 2646, and we urge the committee to report the amended bill favorably to the House of Representatives. The legislation provides for comprehensive, major reforms and improvements of our nation's fragmented mental health care system. These reforms are long overdue, and this important legislation will bring much needed help and assistance to children and adults with mental disorders, their families, and the mental and behavioral health professionals who provide their care.

In addition to other significant reforms and initiatives, the substitute amendment to H.R. 2646 eliminates the Medicaid "same day" billing restriction and scales back the problematic "IMD exclusion," provides for grants to establish and maintain assertive community treatment programs, and improves community-based crisis response systems and inpatient bed registries. The bill reauthorizes the National Child Traumatic Stress Initiative and the Garrett Lee Smith Memorial Act, and explicitly authorizes the National Suicide Prevention Lifeline program.

Importantly, H.R. 2646 also establishes a demonstration grant program supporting the education and clinical training of health service psychology students, interns, and postdoctoral

750 First Street, NE
Washington, DC 20002-4242
(202) 336-5800
(202) 336-6123 TDD

Web: www.apa.org

residents; provides for an assessment of the status of the nation's mental health workforce; and includes support for programs, like the Minority Fellowship Program, that promote the adequacy and effectiveness of that workforce. We believe the legislation could be further improved in the area of workforce development by reauthorizing the Mental and Behavioral Health Education and Training grant programs. The Senate bill (S. 2680) provides this needed authorization, and we urge its inclusion in conference. In addition, we believe the bill would be strengthened by broadening eligibility for child telehealth access grants to include psychologists and other mental health professionals.


We appreciate the improvements incorporated into the substitute amendment in the area of health information privacy under the Health Insurance Portability and Accountability Act (HIPAA). The legislation will clarify the circumstances under which patient information can be shared, and educate patients, psychologists and other health care providers, and family members on updated and expanded HIPAA regulations in this area.

We also applaud the inclusion of provisions in Title VIII of the substitute amendment to strengthen the enforcement of private health insurance parity requirements under the Mental Health Parity and Addiction Equity Act (MHPAEA). Effective enforcement of MHPAEA requirements is essential to achieving the promise of the law, and to ensure individuals with mental and substance use disorders get the care they need.

Individuals living with an undiagnosed or untreated mental disorder often meet with serious adverse outcomes, including homelessness, contact with law enforcement, incarceration, school failure, and suicide. The inability of our mental health system to respond reliably and effectively to the needs of these individuals, whether adults or children, is well-documented and widely-known. Now is the time to act, and we urge the committee to approve H.R. 2646, which takes meaningful, long-overdue steps toward addressing the failings of our current system and improving the lives of individuals with mental and substance use disorders.

Thank you again for your focus on mental health reform and for taking up this important legislation. If you have any questions or need further information, please call or email Doug Walter, J.D., Associate Executive Director, APAPO Government Relations, at (202) 336-5889 or dwalter@apa.org.

Sincerely,

A handwritten signature in black ink, appearing to read "Cynthia D. Belar". The signature is fluid and cursive, with the first name being the most prominent.

Cynthia D. Belar, PhD, ABPP
Interim Chief Executive Officer