

May 18, 2022

The Honorable Frank Pallone Chairman House Energy & Commerce Committee 2107 Rayburn House Office Building Washington, DC 20515 The Honorable Cathy McMorris Rodgers Ranking Member House Energy & Commerce Committee 1035 Longworth House Office Building Washington, D.C. 20515

Dear Chairman Pallone and Ranking Member Rodgers,

On behalf of the Treatment Advocacy Center, a nonprofit organization dedicated to eliminating barriers to the timely and effective treatment of severe mental illness, I am writing to express our gratitude and support for certain provisions of the bipartisan Restoring Hope for Mental Health and Well-Being Act (HR 7666).

In 2016, through the Helping Families in Mental Health Crisis Act, Treatment Advocacy Center played a leading role in seeking to refocus Substance Abuse and Mental Health Services Administration (SAMHSA) programming on the needs of persons with severe mental illnesses including schizophrenia. Among other things, that legislation – which was ultimately folded into the 21st Century Cures Act -- authorized the Interagency Severe Mental Illness Coordinating Committee (ISMICC) as well as the Assisted Outpatient Treatment (AOT) Grant Program for Individuals with Severe Mental Illnesses. These initiatives are needed because of the staggering disparities that exist today in providing appropriate psychiatric care for our most ill.

An estimated 8.8 million American adults live with diagnoses of schizophrenia or severe bipolar disorder - just over 3% of the US adult population. About half of these individuals are untreated at any given time, most commonly because they lack insight into their condition.

When untreated, these individuals are at high risk for a number of negative circumstances that profoundly impact them and those around them. The outcomes for this patient population are typically extraordinary levels of homelessness, incarceration in county jails and state prisons and "psychiatric boarding" -- people in mental health crisis wait for days or weeks in community hospital emergency departments because of psychiatric bed shortages. Some needing hospital-level care are simply turned away.

HR 7666 reauthorizes both ISMICC and the AOT grant program. Further, the legislation opens the application process for these funds to a larger pool of applicants, which will make this life-saving treatment available to more people. Treatment Advocacy Center is also pleased that the bipartisan measure creates an authorization for a crisis care set-aside within the Mental Health Block Grant.

Thank you for your leadership on these important issues. We look forward to working with you as this important legislation moves forward.

Sincerely,

Lisa Dailev

Executive Director

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