

**Opening Statement of the Honorable Fred Upton**  
**Subcommittee on Oversight and Investigations**  
**Hearing on “Federal Efforts on Mental Health: Why Greater HHS Leadership is Needed”**  
**February 11, 2015**

*(As Prepared for Delivery)*

Today we continue our examination of federal efforts to combat our nation’s mental health crisis. This hearing is a natural outgrowth of the committee’s investigation into the federal mental health system. Our work began following the heartbreaking December 2012 tragedy in Newtown, Connecticut, and we remain committed to addressing the problems that contributed to that tragedy.

Severe mental illness is, and should be, a top priority for U.S. public health spending. Unfortunately, the \$130 billion a year being spent on mental health surveillance, research, prevention and treatment activities, income support and other social services has not solved the problem. In Southwest Michigan, I’ve met with my local public health officials and local law enforcement and they agree that more needs to be done to grapple with these difficult issues.

Today we gather to discuss how we can better prioritize our taxpayer dollars to address the threat of untreated severe mental illness.

Thanks to the bipartisan efforts of this committee, and the nonpartisan expertise of Government Accountability Office, we now have some answers. GAO reports that there are at least two significant problems facing our federal agencies and their spending that addresses mental health. First, high-level interagency coordination for programs supporting individuals with serious mental illness is lacking, and SAMHSA, which is charged with promoting coordination on these matters across the federal government, seems largely to blame. Second, agency evaluations of programs specifically targeting individuals with serious mental illness are too few in number and often lacking in quality or completeness.

Although the Department of Defense and the Department of Veterans Affairs graciously accepted the GAO recommendation targeting their shortcomings, as identified by this report, HHS has explicitly rejected both of GAO’s recommendations. GAO stands by its recommendations, and we’re going to hear about those recommendations today.

We are looking for answers. In light of the seriousness of the GAO’s findings, we must ask: why do HHS and SAMHSA think that there is no room for improvement in the areas identified by the nonpartisan government watchdog?

The untold suffering of the families and individuals impacted by the programs discussed in this report is simply too great, and the cost to the federal purse is too high, to allow us to continue on our present path. Lives are at stake, and we can and must do better. I thank Chairman Murphy for his dedication to this important matter that hits so close to home for millions of American families.

###