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OP-ED: Overhaul of mental health care long overdue

By: Rep. Tim Murphy
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Over the last year, as chairman of the House Energy and Commerce Subcommittee on Oversight and Investigations, I embarked on a detailed review of the nation's mental-health system. With my 30-plus years' experience as a clinical psychologist, I was profoundly shocked to learn just how archaic and ineffective federal mental-health policy is in our country.

Easily two million patients with serious and persistent mental illness, many of whom lack insight into their schizophrenia or bipolar disorder, go without medical treatment. Why? Because the federal government has never approached serious mental illness as a health-care issue. This laissez-faire approach to brain illness has directly resulted in growing rates of homelessness and incarceration for the mentally ill over the last 20 years. Sadly, it has also led to numerous tragedies, including 38,000 annual suicides.

The result of my comprehensive review is legislation I introduced last month titled the Helping Families in Mental Health Crisis Act. This bipartisan legislation marks the most significant overhaul of the nation's mental-health system since President John F. Kennedy established community mental-health centers 51 years ago. It refocuses programs and resources on psychiatric care for patients and families most in need of services but who are currently the least likely to get it. My bill increases treatment options, integrates mental and physical care, and reduces barriers and the stigma associated with mental illness.

During my investigation, one barrier repeatedly showed up for families trying to help a loved one with a serious mental illness: Families and caregivers often are unable to share vital information with a physician about a loved one's medical history because of the consistent misinterpretation of the privacy rule under the Health Insurance Portability and Accountability Act (HIPAA).

My legislation strengthens HIPAA by empowering parents to talk about and receive information about a mentally ill loved one, which will allow physicians to make an accurate diagnosis.

Clarifying HIPAA rules is only the beginning of changing the paradigm so those with serious mental illness are treated with dignity and compassion. The legislation also encourages states such as Pennsylvania to adopt "assisted outpatient treatment" (AOT) laws, which ensure that mental-health providers target care and resources to the subset of seriously mentally ill who have repeat visits to the hospital emergency room. New York state's AOT statute, known as "Kendra's

Law," has reduced incarceration, emergency-room visits, homelessness, and substance abuse by about 70 percent among the mentally ill.

The current approach to mental health can best be described by its deficits: too little integration with primary or physical care; too few psychiatric hospital beds; too few psychiatrists, psychologists, and clinical social workers, especially ones who are trained and specialize in treating the seriously mentally ill.

The Helping Families in Mental Health Crisis Act promotes integration of mental health with the rest of the medical system. It also expands the number of pediatricians and primary-care doctors trained in behavioral health so children and young adults get immediate attention.

The inability to find qualified medical help deepens the severity of damage to the human brain, making recovery all the more difficult. Currently, patients wait on average two years after the first signs of psychosis before seeing a doctor. A breakthrough treatment project at the National Institute of Mental Health and the University of Pennsylvania, called Recovery After Initial Schizophrenia Episode, or RAISE, has shown tremendous results by treating the patient earlier with wrap-around services and low-dose medication.

Unfortunately, successful medical models such as RAISE are not getting out into the broader community. The Helping Families in Mental Crisis Act places a new emphasis on evidence-based models of care by establishing an assistant secretary for mental-health and substance-use disorders, who must have clinical and research experience in treating mental illness. This individual will ensure federal tax dollars are spent on effective programs and treatments. The legislation also authorizes the Brain Research through Advancing Innovative Neurotechnologies (BRAIN) Initiative, which was first called for by President Obama. The initiative will revolutionize our understanding of the human brain by producing a new dynamic picture of it that, for the first time, shows how individual cells and complex neural circuits interact in both time and space.

For far too long, those who need help have been getting it the least, and where there is no help, there is no hope. We can, must, and will take mental illness out of the shadows of ignorance, despair, and neglect and into that bright light of hope. It starts with the Helping Families in Mental Health Crisis Act.

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