

AMERICAN ACADEMY OF CHILD & ADOLESCENT PSYCHIATRY

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Honorable Tim Murphy
2332 Rayburn House Office Building
Washington, DC, 20515

Honorable Eddie Bernice Johnson
2467 Rayburn House Office Building
Washington, DC, 20515

June 9, 2015

Dear Chairman Murphy and Congresswoman Johnson:

On behalf of the nearly 9,000 physician members of the American Association of Child and Adolescent Psychiatry (AACAP), I write in strong support of the significantly strengthened H.R. 2646, the "Helping Families in Mental Health Crisis Act of 2015." Your vision for comprehensive mental health reform is very clear, and the needs are urgent. Together, we must act quickly to bring new focus and efficiency to government programs and advance policy refinements that will deliver scarce resources to those most in need of mental health services.

To that end, we reaffirm our commitment to achieving your proposed creation of the position of Assistant Secretary for Mental Health and Substance Abuse Disorders within the Department of Health and Human Services. We are greatly heartened that he or she will focus on many new and important programmatic duties, including "increased access to child and adolescent psychiatry services in order to provide early intervention for prevention and mitigation of mental illness."

We also note with great approval that other revamped grant programs in the bill would focus spending on serious mental illness (SMI) and serious emotional disturbance (SED), with an added emphasis to "collaborate with other child-serving systems such as child welfare, education, juvenile justice, and primary care systems." Mental health services for children and adolescents will receive vital new support through your bill.

AACAP is also extremely grateful for the bill's language in Section 207 WORKFORCE DEVELOPMENT at subsection (d) that will sensibly extend the National Health Service Corps loan relief program to child and adolescent psychiatry trainees and their training programs. Through your strong efforts, we will begin to alleviate the extreme shortage of child and adolescent psychiatrists. Thank you for the special privilege of allowing our staff to work with both of you in the drafting of this key provision.

We also particularly applaud the proposed Section 202 INNOVATION GRANTS, whereby

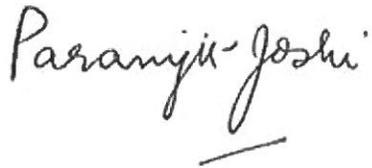
not less than 1/3 of the grant money would flow to screening, diagnosis, treatment or services to those under 18 years of age. Similarly, under Section 203 DEMONSTRATION GRANTS, not less than half of the money would flow to those under 26 years of age, with added eligibility for screening, diagnosis, intervention, and treatment.

These sections are then followed by Section 204 EARLY CHILDHOOD INTERVENTION AND TREATMENT, whereby the proposed National Mental Health Policy Laboratory would focus on "eligible child," ages 0 to 12. Together, these key sections are highly congruent with AACAP policy and would ensure important new resources to those most in need of treatment and services, especially the most vulnerable and needful of our children.

We note with added approval that venerable and highly successful programs such as Garrett Lee Smith Suicide Prevention Program and the National Child Traumatic Stress Network are reauthorized under your bill. In addition, the bill appropriately demands greater accountability and enforcement of mental health parity laws.

We remain extremely gratified to be able to provide our expert counsel on child and adolescent psychiatry and deeply value the confidence you have placed in AACAP as a trusted partner in moving this new bill forward.

Sincerely,

A handwritten signature in cursive script that reads "Paramjit T. Joshi". The signature is written in black ink and is positioned above a short horizontal line.

Paramjit T. Joshi, MD
President