

## Congress of the United States

## House of Representatives Washington, DC 20515

June 29, 2020

The Honorable Anna G. Eshoo Committee on Energy & Commerce Chair, Subcommittee on Health The Honorable Mike Burgess Committee on Energy & Commerce Ranking Member, Subcommittee on Health

Dear Chair Eshoo and Ranking Member Burgess:

Thank you for convening this subcommittee hearing, *High Anxiety and Stress: Legislation to Improve Mental Health During Crisis*, and thank you for including, as part of the discussion, my legislation, H.R. 4428, the *Greater Mental Health Access Act*. I submit this correspondence in support of that legislation and for inclusion in the record.

Ensuring access to quality health care services has been a top legislative priority since I was elected in 2018. As many learned from my floor speech a year ago, my life partner, Kerry Acker, died by suicide in the early morning of May 25, 2019. In the year since his death, I have received an outpouring of support from people throughout my community in Pennsylvania and beyond. That support and our work in the 116<sup>th</sup> Congress have helped me grieve and find purpose in that grief. I know others are not so lucky.

According to CDC data, suicide rates in the United States have risen by 28% in fewer than twenty years—data that is likely underreported and worsening as a result of this COVID-19 pandemic.<sup>1</sup> Studies show that family members' risk of attempting suicide increases by 65% after a family member dies by suicide.<sup>2</sup> This is known as the "suicide contagion."<sup>3</sup>

My bill seeks to reduce the episodes of suicide contagion by improving access to mental health services. The Greater Mental Health Access Act would establish a special enrollment period for family members of an individual who has died by suicide, regardless of whether the decedent was a part of the health insurance plan and regardless of whether the death occurred during the open

<sup>&</sup>lt;sup>1</sup> See U.S. Centers for Disease Control and Prevention, <a href="https://www.cdc.gov/vitalsigns/suicide/">https://www.cdc.gov/vitalsigns/suicide/</a> (June 7, 2018).

<sup>&</sup>lt;sup>2</sup> See Alexandra L. Pitman, Bereavement by Suicide as a Risk Factor for Suicide Attempt: A Cross-Sectional National UK-wide Study of 3432 Young Bereaved Adults, BMJ Journals (Jan. 26, 2016).

<sup>&</sup>lt;sup>3</sup> See U.S. Department of Health and Human Services, <a href="https://www.hhs.gov/answers/mental-health-and-substance-abuse/what-does-suicide-contagion-abuse/what-does-abu

 $<sup>\</sup>underline{mean/index.html\#:\sim:text=Suicide\%20contagion\%20is\%20the\%20exposure\%20to\%20suicide\%20or,indirect\%20exposure\%20to\%20suicidal\%20behavior\%20has\%20been\%20shown (Feb. 25, 2019).}$ 

enrollment period. It would also create a competitive grant program through which services and support are provided to surviving family members.

Families are hurting in communities throughout the United States. I share their hurt. Those families should not have to wait for an arbitrary period to obtain better coverage and access to the mental health services they need, and I thank the Subcommittee on Health for holding this hearing and considering my bill. I look forward to working alongside all of you to improve the lives of thousands of Americans.

Sincerely,

Susan Wild

Member of Congress

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