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United States Senate

COMMITTEE ON FINANCE

WASHINGTON, DC 20510-6200

JOSHUA SHEINKMAN, STAFF DIRECTOR
GREGG RICHARD, REPUBLICAN STAFF DIRECTOR

August 5, 2021

Dear Senate Finance Committee Members:

Far too often, Americans face barriers to obtaining timely, high-quality mental health care services. More people today need access to care, and providers are stretched to capacity. Too many individuals across the country - including children - are not able to access care when they need it or in the most appropriate settings, leading to overwhelmed hospital emergency departments. One in three Americans lives in an area with a severe shortage of mental health professionals. In recent months, the Finance Committee has come together on a bipartisan basis to examine the factors contributing to these gaps in care.

On May 12, the Health Subcommittee of the Senate Finance Committee held a hearing entitled "The COVID-19 Pandemic and Beyond: Improving Mental Health and Addiction Services in Our Communities." On June 15, the full Finance Committee held a hearing entitled "Mental Health Care in America: Addressing Root Causes and Identifying Policy Solutions."

During both hearings, witnesses shared insights on our nation's mental health and substance use disorder challenges and potential policy solutions. Prior to the pandemic, less than half of adults with mental illness and just 40 percent of children with depression received treatment. The pandemic has only worsened these alarming trends:

- Four in ten adults reported symptoms of anxiety and/or depression in February 2021, compared to one in ten prior to the pandemic.
- The number of Americans over age 55 reporting serious psychological distress doubled early in the pandemic - and tripled for Hispanic and low-income adults.
- Overdose deaths jumped 30 percent in 2020 according to provisional Centers for Disease Control and Prevention data.
- Pediatric emergency department visits for mental health emergencies rose 24 percent for children ages 5 to 11 and 31 percent for children ages 12 to 17 between 2019 and 2020.

The impact of mental health and substance use disorders on Medicare, Medicaid, the Children's Health Insurance Program (CHIP), the Affordable Care Act (ACA) marketplaces, and those they serve, is significant. One in four Medicare beneficiaries (18 million) has received a mental health diagnosis, at a cost of \$67 billion annually (16 percent of total U.S. behavioral health spending). Medicaid accounts for a quarter of total U.S. behavioral health spending, covering 9.1 million adults and 3.2 million children with behavioral health needs. Furthermore, many Americans receive mental health coverage through the individual marketplaces. As a result, programs within the Finance Committee's jurisdiction will be key to any comprehensive strategy to tackle our nation's mental health crisis and have the ability to lead innovative reforms.

First, based on these insights, Chairman Wyden and Ranking Member Crapo invite all interested Committee Members to contribute to a bipartisan Finance Committee effort on addressing barriers to mental health care. We will review current law, evaluate policy options, and develop bipartisan legislative solutions that will be considered by the full Committee. The goal is to develop a bipartisan legislative package that can be introduced and marked up this year.

The Chairman and Ranking Member will begin with recommendations from Committee Members to improve access to care for the millions of Americans with mental health and substance use disorders. We request that all interested Members submit their best policy ideas on methods for improving behavioral health care for Medicare, Medicaid, CHIP, and ACA marketplace beneficiaries.

Specifically, the Committee welcomes input on evidence-based policies to improve behavioral health including, but not limited to, the following areas:

1. Workforce – Explore options to address the behavioral health workforce shortage (both physician and non-physician), increase health professional diversity, and bolster Medicare, Medicaid, and CHIP participation among behavioral health providers.
2. Integration, Coordination, and Access – Support care integration and coordination efforts, including through payment policies, and ensure that historically underserved communities have equitable access to culturally and linguistically appropriate care.
3. Parity – Improve oversight, data reporting, and enforcement of mental health parity laws; and address potential parity shortcomings in the Medicare, Medicaid, CHIP programs, as well as ACA marketplaces.
4. Telehealth – Expand access to telehealth services while maintaining safeguards for beneficiaries and taxpayer dollars.

The Committee is also interested in enhancing mental health crisis care and addressing access gaps facing certain high-need groups (such as those with serious mental illness, individuals experiencing homelessness, and individuals known to or part of the child welfare system,), as well as bolstering pediatric mental health care and strengthening prevention and treatment options for substance use disorders.

In order to be considered, proposals must be submitted **before August 31, 2021**, within the Committee's jurisdiction, and specific to Medicare, Medicaid, CHIP, the ACA marketplaces and/or human services. Any submitted recommendation should be evidence-informed and include relevant accompanying data or research. Proposals should be reasonably expected to have a direct impact on behavioral health care access, quality, and/or value. Please submit proposals to Kimberly Lattimore (kimberly_lattimore@finance.senate.gov) and Gable Brady (gable_brady@finance.senate.gov).

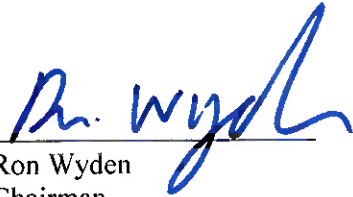
Second, to further guide and inform this effort, a separate request for public- and private-sector stakeholder input will be announced this month. In parallel, the Chairman and Ranking Member encourage all Members to conduct town halls, roundtables, and other discussions in their respective states in order to gather additional real-world and community-level input on this effort.

Drafting policies designed to improve access to behavioral health care, enhance care quality, and combat disparities, while controlling costs, is an enormous task that will be balanced with the importance of

acting with urgency. The Chairman and Ranking Member are committed to working with you to confront this challenge. As the Committee begins to consider policy solutions, Member and stakeholder input will prove crucial.

The Senate Finance Committee Chair and Ranking Member look forward to robust Member input and engagement on this critical issue.

Sincerely,



Ron Wyden
Chairman
Committee on Finance



Mike Crapo
Ranking Member
Committee on Finance