#MENTALHEALTHREFORM

H.R. 2646

A Mental Health Crisis
We have a mental health crisis in this country. America’s suicide rate is the highest it has been in 30 years. Every year, over 40,000 people die by suicide. Every day, millions of Americans go without the mental health services and supports they need. Families are struggling to find care for their loved ones and countless individuals are experiencing homelessness, incarceration and disability instead of lives of fulfillment and recovery.

A Step Toward Mental Health Reform
Congress has worked across the aisle and in collaboration with the mental health community to find promising solutions to improve our nation’s mental health care. H.R. 2646, the Helping Families in Mental Health Crisis Act of 2016, represents a bipartisan first step toward mental health reform.

How H.R. 2646 Helps
H.R. 2646 strengthens community crisis response.
- Provides grants for specialized training for law enforcement, corrections officers and first responders.
- Provides grants to enhance crisis response services, to develop psychiatric inpatient and residential bed tracking and to support Assertive Community Treatment (ACT) programs.

H.R. 2646 supports the mental health workforce.
- Adds pediatric mental health professionals to the National Health Service Corps loan repayment program.
- Promotes cultural competency by creating a Minority Fellowship Program and provides Training grants for peer professionals, including recovery coaches and peer support specialists.

H.R. 2646 helps support integration of health and mental health care.
- Permits Medicaid billing of health, mental health and substance use services provided the same day in the same facility (known as same-day billing).
- Provides grants for tele-mental health consultation to pediatric primary care.

H.R. 2646 encourages early intervention.
- Continues the “set-aside” of 5% of state mental health block grant funds for evidence-based programs that address early serious mental illness, such as First Episode Psychosis (FEP).

H.R. 2646 combats suicide.
- Extends the Garrett Lee Smith Memorial Act suicide prevention services to all ages and promotes awareness of mental health conditions and services on college campuses.
H.R. 2646 promotes evidence-based and promising practices.
- Provides grants to evaluate promising models and to expand evidence-based programs.
- Creates an Interdepartmental Serious Mental Illness Coordinating Committee to improve outcomes, including reducing incarceration, reducing homelessness and increasing employment.

H.R. 2646 increases reporting on mental health parity.
- Requires federal agencies to improve compliance with the mental health parity law, report on parity investigations, issue a study and create a plan to improve parity enforcement.

H.R. 2646 Compromises on Complex Issues

Assisted Outpatient Treatment (AOT)
- Extends existing AOT grant program, but eliminates the previous financial incentive to adopt AOT laws.

Health Insurance Portability and Accountability Act (HIPAA)
- Includes a “Sense of Congress” section that articulates an opinion about privacy and information-sharing, but does not change the HIPAA law.
- Requires final regulations within 1 year to clarify circumstances in which a health care provider may share protected health information and to develop training on appropriate information-sharing.

Institutions for Mental Diseases (IMD) Exclusion
- Permits states to provide payments to Medicaid managed care organizations (MCOs) for adults ages 22-64 who are in psychiatric hospitals and acute behavioral health residential facilities for short-term stays of no more than 15 days per month (puts the new Medicaid managed care rule into statute).

Protection and Advocacy for Individuals with Mental Illness (PAIMI) programs
Note: Previous bill restrictions limiting the scope of PAIMI work were removed.
- Requires an independent grievance procedure for complaints against PAIMI programs (the current grievance process is not required to be independent).
- Prohibits use of federal funds to lobby (already current law).

Substance Abuse and Mental Health Services Administration (SAMHSA)
Note: SAMHSA representatives indicate that they are comfortable with these provisions.
- Creates a new Assistant Secretary for Mental Health and Substance Use that will elevate the position of SAMHSA. Preference will be given to doctors or psychologists with doctorate degrees.
- Permits the appointment of a Deputy Assistant Secretary (which may be the current SAMHSA Administrator).

Moving Mental Health Reform Forward
To move mental health reform forward, the U.S. House must pass H.R. 2646 and the U.S. Senate must pass a similar bill, S. 2680, the Mental Health Reform Act of 2016. Keep the pressure up. Let your members of Congress or their staff know that you want mental health reform legislation passed and signed into law.

Keep Informed