<u>Mental Health Liaison Group</u>

November 8, 2004

The Honorable Arlen Specter Chairman, Senate Labor, Health and Human Services and Education Appropriations Subcommittee 184 Dirksen Senate Office Building Washington, DC 20510

The Honorable Ralph Regula Chairman, House Labor, Health and Human Services and Education Appropriations Subcommittee 2358 Rayburn House Office Building Washington, DC 20515

Dear Chairmen Specter and Regula:

As you resolve the differences between the House and Senate versions of the FY 2005 Labor, Health and Human Services Appropriations bill (H.R. 5006/S. 2810), the undersigned members of the Mental Health Liaison Group (MHLG), a coalition representing the broad, diverse mental health community that serves men, women and children, and their families, recognize the arduous task ahead of you in completing this bill, yet we respectfully urge you to maintain the highest-approved funding increases for mental health programs.

Overall, the MHLG supports the Senate bill because S. 2810 would provide more funding for mental health programs at SAMHSA and NIH than the House bill. In particular, the Senate would provide \$935 million for the Center for Mental Health Services at SAMHSA, versus \$891 million in the House bill, and a 4 percent increase for NIH, including the National Institutes of Mental Health, Drug Abuse, and Alcoholism and Alcohol Abuse, versus a 2.7 percent increase contained in the House bill. While only the Senate bill would fund the newly proposed State Incentive Grants (SIG) at the Administration's request, both the House and Senate bills would restore proposed funding cuts to the elderly and jail diversion programs and support the preservation of proposed funding increases in children's mental health, homelessness and mental health block grant programs.

Therefore, the MHLG supports the following proposed Senate funding levels:

- <u>\$44 million</u> (or the Administration's request) for a key initiative in the President's mental health budget, the proposed new State Incentive Grants (SIG) for comprehensive state mental health planning, which aims to advance the goals of the President's New Freedom Commission on Mental Health.
- <u>\$10 million</u> for services in permanent supportive housing targeted to individuals and families experiencing chronic homelessness.
- <u>4 percent</u> increase for the NIH, including the National Institutes of Mental Health (to \$1,437 million), Drug Abuse (to \$1,026 million), and Alcoholism and Alcohol Abuse (to \$445 million).

At the same time, the MHLG supports the following proposed House funding level:

• <u>\$1.4 million</u> increase over last year for the Protection and Advocacy program (to \$36 million).

And, the MHLG supports the following jointly proposed Senate and House funding levels:

• <u>\$5.5 million</u> increase (or the Administration's request) over last year for the Projects for Assistance in Transition from Homelessness (PATH) program (to \$55.3 million).

- <u>\$3.6 million</u> increase (or the Administration's request) over last year for the Children's Mental Health Services program (to \$106 million).
- <u>\$1.4 million</u> (or the Administration's request) over last year for the Mental Health Block Grant (to \$436.1 million).
- <u>\$5 million</u> total for programs targeted to Older Adults and <u>\$7 million</u> total for Jail Diversion, restoring proposed cuts to both of these programs.
- <u>\$2 million</u> total (or the Administration's request) for the Consumer Technical Assistance Centers.

By building on the higher funding levels for the mental health programs outlined above, the transformation of the mental health system can begin in earnest. As you recall, President Bush's New Freedom Commission on Mental Health, the first such commission in over 25 years, found that **our nation's failure to make mental health a priority is a national tragedy.** The report calls for transforming our fragmented public mental health services into a system focused on early intervention and recovery. In order for transformation to truly take place, we must invest in communities all across the nation, from Pennsylvania to Nevada and from Iowa to Louisiana, that are grappling with the crisis of unmet mental health needs

As an illustration of the overwhelming need for mental health services, nearly 2,000 youth are incarcerated *every day* simply because community mental health services are unavailable, according to a recent House Government Affairs report. The lack of community services comes at a great cost. Juvenile detention facilities spend an estimated \$100 million each year to house youth who are simply waiting for community mental health services. Therefore, an investment in providing mental health services in the community is both cost-effective and helps to limit the interaction of young people with juvenile justice/corrections system.

In order to meet the tremendous challenges that mental illness poses as the *leading* cause of disability and premature mortality in the United States, including more than 67 percent of adults and nearly 80 percent of children who need mental health services that do <u>not</u> receive treatment, we urge you to protect and build on the funding increases for key mental health programs. The cost of not providing meaningful increases would be devastating for an already burdened mental health system.

In addition to the need for funding increases for existing mental health programs at SAMHSA and NIH, we urge your special attention to the funding needs of several programs initiated over the last year that will advance the goals of the President's Commission. Furthermore, MHLG urges your support for the following new programs in the FY 2005 appropriations cycle: \$15 million for the Garrett Lee Smith Memorial Act; and \$50 million for the Mentally III Offender Treatment and Crime Reduction Act – also communicated to the House and Senate Appropriations Committees by the Campaign for Mental Health Reform, which was launched in the wake of the release of the Commission's final report.

Thank you for your attention to this important matter.

Sincerely,

Alliance for Children and Families American Academy of Child and Adolescent Psychiatry American Association for Geriatric Psychiatry American Association of Children's Residential Centers (AACRC) American Association of Pastoral Counselors American Association of Practicing Psychiatrists American Counseling Association American Group Psychotherapy Association American Mental Health Counselors Association American Occupational Therapy Association American Orthopsychiatric Association American Psychiatric Association American Psychiatric Nurses Association American Psychoanalytic Association American Psychological Association American Psychotherapy Association Anxiety Disorders Association of America Association for Ambulatory Behavioral Healthcare Association for the Advancement of Psychology Bazelon Center for Mental Health Law Children & Adults with Attention-Deficit/Hyperactivity Disorder (CHADD) Child Welfare League of America **Clinical Social Work Federation** Clinical Social Work Guild 49 Depression and Bipolar Support Alliance Federation of Families for Children's Mental Health International Society of Psychiatric-Mental Health Nurses National Alliance for the Mentally Ill National Association of County Behavioral Health Directors National Association of Mental Health Planning and Advisory Councils (NAMHPAC) National Association of Protection and Advocacy Systems National Association of Psychiatric Health Systems National Association of School Psychologists National Association of Social Workers National Association of State Mental Health Program Directors National Association for Children's Behavioral Health National Council for Community Behavioral Healthcare National Mental Health Association Suicide Prevention Action Network USA (SPAN USA) Tourette Syndrome Association Volunteers of America

cc: The Honorable Tom Harkin, Ranking Member, Senate Labor, Health and Human Services and Education Appropriations Subcommittee The Honorable David Obey, Ranking Member, House Labor, Health and Human Services and Education Appropriations Subcommittee