



**Helping Families in Mental Health Crisis Act of 2015—**

<http://docs.house.gov/meetings/IF/IF14/20150616/103615/BILLS-1142646ih.pdf>

**H.R. 2646: Helping Families in Mental Health Crisis Act of 2015—**

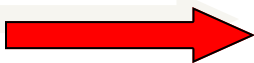
<https://www.govtrack.us/congress/bills/114/hr2646>

*Issue 41*

*focus*

### What is the Focus?

The *Focus* newsletter highlights important issues in mental health, providing timely information on a range of topics, including work-force development, supported education, organizational development and sustainability, peer-to-peer services, youth transition and system transformation. Have a suggestion for a topic? Let us know!



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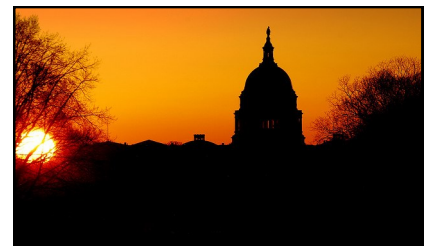
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## The Helping Families in Mental Health Crisis Act of 2015

**E**arlier this month, Rep. Tim Murphy (R-PA) reintroduced a bill intended to re-shape the nation's mental health system of care, the "Helping Families in Mental Health Crisis Act of 2015."

Two years ago, Rep. Murphy submitted a similar bill with the same name that failed to make it through the House after a period of vigorous public debate. The new version of this piece of legislation is similar to the 2013 version in many ways. The bill includes the following provisions:

- proposes major changes to how the Substance Abuse and Mental Health Services Administration (SAMHSA) operates by creating a new level of cabinet-level oversight by an Assistant Secretary for Mental Health and Substance Use Disorders
- requires all funded programs to be "evidence-based practices"
- bars SAMHSA from hosting or sponsoring any conference that the agency does not administer without giving Congress 90 day notice
- offers incentives connected to the use of AOT (Assisted Outpatient Treatment)



- limits the authority of Protection and Advocacy agencies to assist people with mental health needs to cases of abuse and neglect only
- makes revisions to HIPAA laws to afford family members more access to medical information
- creates a 30-day length of stay exception to the Medicaid IMD (Institutions for Mental Disease) exclusion that currently prevents facilities with 16 or more beds for people with mental health needs from receiving Medicaid funding

### An Initial Hearing

The first step in the legislative process for this bill came on June 16, when it received its first hearing before the Health Subcommittee of the House Energy and Commerce Committee. The full video and transcript of that hearing is available online at <https://energycommerce.house.gov/hearing/examining-hr-2646-helping-families-mental-health-crisis-act>.

In addition to the bill's sponsor, several witnesses shared their thoughts and opinions on the bill's approach. **Sen. Creigh Deeds (D-VA)**, whose son took his own life in 2014, focused on the barriers he feels HIPAA created for him as a parent. Long-time mental health advocate, **Former Rep. Patrick Kennedy**, called for better integration of care across systems, and enforcement of existing parity laws as he advocated for an ambitious, comprehensive reform effort. **Dr. Jeffrey A. Lieberman of the Columbia University College of Physicians and Surgeons** pointed to stigma and system fragmentation, while calling for support for additional biomedical research as essential to any legislation. **Mental Health America President and**



**CEO Paul Gionfriddo** emphasized the need to focus on early intervention, prevention and integration. **Steve Coe, Chief Executive Officer of Community Access**, discussed the importance of including effective community supports such as housing, recovery-based crisis alternatives and peer support in any federal efforts. **Mary Jean Billingsley**, a parent, spoke on behalf of the **National Disability Rights Network**, and explained how the Protection and Advocacy system had enabled her son to secure his rights and obtain services. Finally, **Harvey Rosenthal, Executive Director of New York Association of Psychiatric Rehabilitation Services** spoke to the essential role of recovery and wellness, and warned that efforts to expand AOT,

limit the role of Protection and Advocacy, and alter HIPAA could produce unintended negative outcomes by alienating those the system aims to serve. ([The full written testimony of all participants is available online here.](#))

Beyond this initial hearing, several mental health organizations have also made their own public statements on the bill's provisions. In a [press release](#), the **National Coalition for Mental Health Recovery** was critical of the bill for undermining recovery and community inclusion and threatening the development of peer support. [In its statement, the Bazelon Center](#) said that the "bill continues to promote institutional and coercive approaches to inpatient and outpatient treatment instead of investment in effective community-based mental health services." [On its blog, NAMI](#) noted that the bill has "has many positive aspects" while recognizing that it is "unlikely that all NAMI supporters will agree with all provisions or all changes that have been made to the bill."

## What Happens Next?

Following the initial hearing, it seems likely that an intense public debate similar to the one that occurred in 2013 will ensue. The Helping Families in Mental Health Crisis Act is a complex bill that will impact thousands of people with mental health needs, as well as advocacy organizations, peer workers, Protection and Advocacy programs, providers, and local, state and federal government agencies. The bill touches on many issues and will therefore attract the attention of many stakeholders. **With so much at stake, many voices will be fighting to be heard, and many people will be looking to get a seat at the table.**

In this moment, with the future of the nation's mental health strategy, as well as the shape and nature of its behavioral health workforce, being publicly examined, **it's important that those with lived experience, peer professionals and others invested in recovery remain engaged.** A good first step would be to find out what's in the bill by reviewing it yourself. (The full text is at <http://docs.house.gov/meetings/IF/IF14/20150616/103615/BILLS-1142646ih.pdf>.) With so many invested in this debate, there will be a wide array of opinions on the various provisions, so observers should be able to gather information from multiple sources. Get connected with organizations and news outlets that can keep you updated on the process, and offer analysis of how the bill's provisions will play out in the real world. There are also sites that track legislation, like [GovTrack](#), that can be useful for staying up to date. The CAFÉ TA Center will also continue to share news and updates as the process evolves.

Most importantly, **remember that your opinion and experience counts.** Don't hesitate to let the bill's sponsors, members of the [Health Subcommittee of the House Energy and Commerce Committee](#), and your own Representatives and Senators know what you think. You can find your Representative at <http://www.house.gov/representatives/find/> and your Senator at <http://www.senate.gov/senators/contact/>. **Let your voice be heard!**



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