



National Association of State Mental Health Program Directors

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May 21, 2014

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Robert W. Glover, Ph.D.
Executive Director
NASMHPD

The Honorable Ron Barber
1029 Longworth House Office Bldg.
Washington, D.C. 20515

RE: HR 4574 - Strengthening Mental Health in Our Communities Act

Dear Representative Barber:

On behalf of the National Association of State Mental Health Program Directors (NASMHPD), I want to thank you and your co-sponsors for introducing the Strengthening Mental Health in Our Communities Act (HR 4574), one of the most comprehensive Congressional packages of behavioral health reforms in the behavioral health care community's memory. NASMHPD represents the state executives responsible for administering America's public mental health delivery system caring for 7.1 million people annually in all 50 states, 4 territories and the District of Columbia.

The economic crisis that began in 2008 forced states to cut more than \$4.35 billion from public mental health systems. This level of cuts is a startling dollar figure that provides additional context to the mental health crisis situation America faces.

Your far reaching legislation contains a number of key proposals we support for expanding the service capacity of state mental health agencies while proposing important federal reforms designed to provide or increase access to appropriate behavioral health care services.

NASMHPD is particularly pleased that your comprehensive legislation proposes the statutory re-authorization of the Community Mental Health Block Grant for the first time in nearly 15 years. This vital program is a principal vehicle for financial support of evidenced-based, comprehensive services for low income and uninsured persons living with serious mental illnesses. Consistent with the vision behind the creation of the Block Grant in the early 1980s, State Mental Health Agencies employ federal appropriations under the program to fund flexible services such as peer support, supported employment, first episode psychosis programs, and other interventions designed to sustain persons with severe mental illnesses in the community. Most of these services are ones that complement and enhance Medicaid services, not duplicate them. The need for the Mental Health Block Grant has increased as a result of the aforementioned funding cuts that states were forced to adopt between FY 2008 and FY 2012.

The Strengthening Mental Health in Our Communities Act also seeks to reauthorize a wide array of important SAMHSA programs, including the National Suicide Prevention Lifeline [1-800-273-TALK], which is heavily used by veterans and military families, and the Garrett Lee Smith Memorial Act suicide prevention initiatives.

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In calendar year 2013 the National Suicide Prevention Lifeline answered **1,130,192** calls. We note that your legislation also is aligned with NASMHPD's deep commitment to trauma-informed care in proposing an extension of funding authority for the National Child Traumatic Stress Initiative (NCTSI) and Grants for Adult Trauma Screening and Brief Intervention (GATSBI). It is hard to imagine a more important, useful focus in this work than addressing trauma.

Thank for your leadership on behavioral health issues and for this opportunity to provide our thoughts on The Strengthening Mental Health in Our Communities Act. We look forward to a continued strong working relationship with you and your office. If you should have questions about NASMHPD's position on this legislation, please contact NASMHPD's Director of Policy and Health Care Reform, Stuart Gordon at stuart.gordon@nasmhpd.org or by telephone at 703-739-9333.

Sincerely,

A handwritten signature in black ink, appearing to read "Robert W. Glover". The signature is fluid and cursive, with a long horizontal stroke at the end.

Robert W. Glover, Ph.D.
Executive Director