Opening Statement

I call this hearing of the Finance Subcommittee on Health Care to order.

I'm so pleased to be here, during mental health month, talking about the urgent need to improve behavioral health care services in our communities.

Ranking Member Daines – it is great to have you as my new partner on this Subcommittee, and I know we can do a lot of great work on this issue, and many others.

Mental health month is when we raise awareness, take on stigma, celebrate triumphs, and make sure no one feels alone.

Everyone affected by mental illness or substance use disorders should be able to get the help they need so they can live a healthy and fulfilling life – period.

We can make this a reality!

This issue is personal to so many of us. My own father...

Before the pandemic, nearly 1 in 5 Americans had some form of mental illness, yet fewer than half received

treatment. This lack of support is even worse in our communities of color.

Our overworked and underfunded health care system was already leaving millions of Americans without the treatment they need. The pandemic has made things worse and exposed the weaknesses in the way we pay for behavioral health care in this country.

In January, 41% of American adults reported that they were struggling with anxiety and depression.

That's up from 11% before the pandemic.

And more than 1 in 4 young people have reported having suicidal thoughts.

Meanwhile, overdose deaths have surged during the pandemic.

The CDC reported that more than 87,000 Americans died of drug overdoses during the 12-month period that ended in September – the most deaths in any year since the opioid epidemic began in the 1990s.

And long after the pandemic ebbs, these behavioral health issues will linger.

We need to finally treat health care above the neck the way we treat health care below the neck – the need has never been more urgent.

The good news is that we are making progress.

I've worked with my friend Senator Roy Blunt and many of you to create and expand the Certified Community Behavioral Health Care Clinics program.

Now fully operational in 10 states with startup grants bringing the program to 41 states, we have a structure that allows clinics to truly meet the needs of their communities. This has been a tremendous success, and is the model for the future.

These clinics are required to provide comprehensive services including:

- 24/7/365 mobile crisis team services
- Immediate screening and risk assessment
- Easy access to care they see everyone who walks in the door
- Tailored care for active-duty military and veterans
- Care coordination with primary care providers
- Coordination with law enforcement

The results are stunning. According to HHS numbers included in the Budget request last year, people who received services at CCBHCs:

- Had 63.2% fewer emergency department visits for behavioral health issues
- Spent 60.3% less time in jails
- Saw a 40.7% decrease in homelessness

And today, the National Council for Mental Wellbeing (previously the National Council for Behavioral Health) released a new CCBHC impact report with similarly stunning results:

- More than half of CCBHCs offer same day services, and nearly all of them offer treatment within a week. Compare that to the average wait time of 48 days nationwide and they are serving thousands of new clients.
- CCBHC funding created an average of 41 new jobs per clinic.
- 95% of CCBHCs have engaged in promising new practices in collaboration with law enforcement or criminal justice agencies.

This month, Senator Blunt and I – hopefully joined by all of you on this subcommittee – will be introducing legislation giving every state in the country the option of participating in the full program. It will ensure that

behavioral health care clinics are paid in the same way we pay Federally Qualified Health Centers (FQHCs).

We can get this done and bring quality community-based care to millions of Americans who need it.

Thank you to our fantastic witnesses for being here today. I look forward to hearing from you and know we will have a great bipartisan discussion.

So many of my colleagues are focused on this issue, and whether it is CCBHCs, telehealth, crisis supports, coordination with law enforcement, schools, and many other issues, I look forward to working with you.