

The **UNITED STATES SENATE**
COMMITTEE *on* **FINANCE**
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Wyden Statement at Finance Committee Hearing on Mental Health Care
As Prepared for Delivery

The Finance Committee meets this morning to discuss mental health care in America. This issue ought to bring Democrats and Republicans together, starting with a single, clear lodestar.

Every American must have mental health care when they need it.

The shameful reality is, the United States does not come close to meeting that bar today. Multiple federal laws say that mental health care is supposed to be on a level playing field with physical health care. In practice, however, the system still reflects the dangerous, old stigma against recognizing and treating mental illness, and that's why millions of people are falling through the cracks.

For someone with a mental illness, it can be nearly impossible to find a provider who can meet your needs, or one who accepts insurance – particularly in rural areas or in communities of color. Insurance claims too often get denied or cut off too quickly. Particularly for those experiencing homelessness, the outcome of a mental health crisis is too often incarceration instead of treatment.

Prior to the pandemic, one in five Americans was living with a mental illness. All the evidence suggests the pandemic is adding to the crisis. The proportion of Americans reporting symptoms of anxiety or depression has nearly quadrupled. On Friday, the Centers for Disease Control and Prevention released a new report finding that over the last year, suicide attempts among teenage girls were up by more than 50 percent. Meanwhile, a study the Government Accountability Office conducted at my request found that many provider offices closed or cut staff during the pandemic, resulting in too many patients turned away.

There's a lot for this committee to work on. A few key challenges. First, the country needs a larger mental health workforce. There simply are not enough providers, whether it's psychiatrists or therapists or staff in inpatient facilities. For example, due to a major staffing shortage, the psychiatric hospital in Salem is currently being staffed in part by members of the Oregon National Guard. That's in a state capital, where there are people and resources focused on this issue. Other areas have it worse. More than one in three Americans lives in an area with a severe shortage of mental health professionals.

Second, insurance companies must not cut corners when it comes to mental health coverage. This issue comes up all the time during town hall meetings I hold in Oregon – people describing having their claims denied. In other cases, insurance only covers a portion of the treatment people need. Furthermore, it

doesn't make any sense to leave somebody experiencing a true mental health crisis waiting for a green light from an insurance company before they can get treatment.

Third, this committee must address the racial inequities in mental health care. Black and Latino Americans are roughly half as likely as White Americans to receive treatment for a mental illness. Suicide rates are much higher among Black children. There aren't enough Black, Latino and Native American mental health providers. This is a basic matter of health care equity, and there's a long way to go.

Finally, the Finance Committee ought to build on areas of recent progress. For example, early in the pandemic this committee led the fight to get Medicare to cover mental health services via telehealth. In December the Congress made that permanent. This is going to be a game changer, particularly for seniors who live in rural areas. It would work outside of traditional Medicare too.

Senator Stabenow has long been a champion of mental health care. Today the committee will hear about the success of certified community behavioral health clinics, a program she fought for and created. These clinics are up and running in 40 states, including Oregon. It's an approach that works, and it's meeting big needs. I believe the Congress ought to look at ways to build on its success.

In March the Congress also passed a big down payment for a pioneering new approach on mental health services and law enforcement called the CAHOOTS program. It originally comes from Eugene, Oregon, and it has expanded in bigger cities and rural areas around the state. Under this approach, when there's a 911 call dealing with someone experiencing a mental health crisis, CAHOOTS sends trained health professionals as first responders instead of just police. Health care providers like it, law enforcement likes it. The American Rescue Plan included a billion-dollar down payment to help states build their own programs like CAHOOTS. Now the Congress needs to consider what comes next to build these programs successfully and make sure people are getting the help they need even after the immediate crises end.

It's clear there's a lot of work to be done. Members on both sides have important ideas addressing these issues and more. I want to continue working with members in the weeks ahead because I believe there's a big need and a big opportunity for legislation on mental health.

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