

The Honorable Alex Azar II
Secretary
U.S. Department of Health and Human Services
200 Independence Avenue, SW, Sixth Floor
Washington, DC 20201

18 December 2020

Re: Access to Covid-19 Vaccine for Mental Health and Addiction Treatment Providers and Consumers

Dear Secretary Azar:

Ensuring access to mental health and addiction treatment and recovery services could not be more urgent or important at this time. A recent report by the Centers for Disease Control and Prevention (CDC) revealed that symptoms of anxiety disorder were approximately three times higher and prevalence of depression about four times higher among adults during the second quarter of 2020 compared with the same time last year.ⁱ Meanwhile, overdoses have spiked during the Covid-19 pandemic with more than 40 states reporting increased opioid-related deaths,ⁱⁱ and an overall 18 percent increase in overdoses between May of 2019 and 2020.ⁱⁱⁱ Suicide rates have continued to increase, up 35% between 1999 and 2018^{iv} with early indications of additional increases in suicides more recently.

The Covid-19 pandemic is having a significant impact on the behavioral health of children and adolescents. According to another recent CDC report, the proportion of children's visits to emergency departments for mental health reasons increased dramatically starting in April 2020 and continuing through October of 2020.^v

Covid-19 is uniquely intertwined with behavioral health conditions. Research has found that substance use disorders constitute a risk factor for Covid-19.^{vi} In addition, recent findings point to increased risk of mental health conditions (anxiety and depression, in particular) among those who contract Covid-19, as well as an increased risk of contracting Covid-19 among those with preexisting mental health conditions that appears not to be a result of the high rates of co-occurring chronic physical health conditions in this group.^{vii}

It is critical that we preserve and even increase access to behavioral healthcare as a key component of the response to Covid-19. Since the onset of the pandemic, mental health and addiction treatment and recovery services providers have been intensely focused on implementing many new practices and protocols to address the increased demand for behavioral healthcare while preventing the spread of the coronavirus. They have developed and implemented new screening and infection control measures as well as greatly expanding their use of telehealth to provide care. Unfortunately, some of the measures, such as smaller group sessions, time between appointments, precautionary units where consumers can stay while awaiting a Covid-19 test, reduce their capacity to provide care.

Furthermore, these providers have faced significant shortages of personal protective equipment (PPE). Unlike general medical settings, behavioral healthcare providers were not accustomed to using PPE to the extent now required and therefore did not have large stores of these supplies to access. Moreover, they generally do not have prioritized access to PPE through well-established supply chains; consequently, they have had to work harder to find these supplies and have struggled with frequent shortages.

In addition, staff availability at mental health and addiction treatment facilities has been reduced for a number of reasons. Addiction treatment programs, for example, have reported reduced capacity because staff are a) concerned about working in contagious environments, b) in quarantine themselves, c) older than 60 years of age and in a high-risk group, or d) live with family members who have compromising physical conditions, among other reasons.

To improve access to care, we urge you to direct the CDC to issue guidance advising states to include mental health and addiction treatment providers, including behavioral healthcare practitioners and staff designated as critical essential workers by the Department of Homeland Security, and recovery support providers as well as patients in inpatient psychiatric and residential treatment and community-based treatment settings among their prioritized groups for receiving the Covid-19 vaccines.

Addiction Professionals of North Carolina
American Association for Marriage and Family Therapy
American Association for Psychoanalysis in Clinical Social Work
American Association of Child and Adolescent Psychiatry
American Psychiatric Association
American Psychological Association
American Society of Addiction Medicine
Anxiety and Depression Association of America
Association for Behavioral Health and Wellness
Behavioral Health Association of Providers
California Consortium of Addiction Programs & Professionals
Center for Law and Social Policy
Centerstone
Central City Concern
Children and Adults with Attention-Deficit/Hyperactivity Disorder
College of Psychiatric and Neurologic Pharmacists
Connecticut Certification Board, Inc.
Council on Alcoholism & Drug Abuse of Northwest Louisiana
Depression and Bipolar Support Alliance
Eating Disorders Coalition
Faces and Voices of Recovery
Global Alliance for Behavioral Health and Social Justice
HIV Alliance
International Certification & Reciprocity Consortium (IC&RC)
International OCD Foundation
Live4Lali
Maternal Mental Health Leadership Alliance
Mental Health America
NAADAC, the Association for Addiction Professionals
National Alliance to Advance Adolescent Health
National Association for Behavioral Healthcare
National Association for Children's Behavioral Health
National Association for Rural Mental Health
National Association of Addiction Treatment Providers
National Association of Clinical Nurse Specialists
National Association of County Behavioral Health & Developmental Disability Directors
National Association of Social Workers
National Association of State Mental Health Program Directors
National Council for Behavioral Health
National Federation of Families
National Register of Health Service Psychologists
Postpartum Support International
Psychotherapy Action Network Advocacy
Residential Eating Disorders Consortium

RI International
The Jed Foundation
The Kennedy Forum
Well Being Trust

ⁱ Czeisler MÉ, Lane RI, Petrosky E, et al, Mental Health, Substance Use, and Suicidal Ideation During the COVID-19 Pandemic — United States". June 24–30, 2020. *Morb Mortal Wkly Rep* 2020;69:1049–1057, available [online](#).

ⁱⁱ American Medical Association, "Issue brief: Reports of increases in opioid-related overdose and other concerns during Covid pandemic", updated Sept. 8, 2020, available [online](#).

ⁱⁱⁱ Centers for Disease Control and Prevention, Provisional Drug Overdose Death Counts, based on data available for analysis on Dec. 6, 2020, available [online](#).

^{iv} Hedegaard H, Curtin SC, Warner M, "Increase in suicide mortality in the United States, 1999–2018", Data Brief No. 362, National Center for Health Statistics, 2020, available [online](#).

^v Leeb RT, Bitsko RH, Radhakrishnan L, et al, Mental health-related emergency department visits among children aged <18 During the Covid-19 pandemic - United States, January 1 - October 17, 2020, *MMWR Morb Mortal Wkly Rep* 2020, Vol. 69, pp. 1675-1680, available [online](#).

^{vi} Wang QQ, Kaelber DC, Xu R, Volkow ND. COVID-19 risk and outcomes in patients with substance use disorders: analyses from electronic health records in the United States. *Molecular Psychiatry*. September 2020, available [online](#).

^{vii} Taquet M, Luciano S, Geddes JR, et al. Bidirectional associations between Covid-19 and psychiatric disorder: retrospective cohort studies of 62, 354 Covid-19 cases in the USA. *Lancet Psychiatry*, published [online](#) Nov. 9, 2020.