

November 09, 2021

The Honorable Lizzie Fletcher
1429 Longworth House Office Building
Washington, DC 20515

The Honorable Jaime Herrera Beutler
2352 Rayburn House Office Building
Washington, DC 20515

Dear Representatives Fletcher and Herrera Beutler:

On behalf of the undersigned organizations, we would like to thank you for your leadership in introducing H.R.5218. Your legislation will improve access to evidence-based mental health and substance use disorder care that many Americans struggle to find. Our country is in the midst of a growing behavioral health crisis with suicide and overdose deaths at record levels. Many individuals first display symptoms of a mental health condition or substance use disorder in the primary care setting but frequently cannot access the necessary follow-up treatment. Often they have difficulty finding a mental health professional or avoid seeking treatment due to the stigma that still exists around mental health and substance use disorders. The Collaborative Care Model (CoCM) provides a strong building block to address these problems by ensuring that patients can receive expeditious behavioral health treatment within the office of their primary care physician.

The CoCM integrates behavioral health care within the primary care setting and features a primary care physician, a psychiatric consultant, and care manager working together in a coordinated fashion. Importantly, the team members use measurement-based care to ensure that patients are progressing and treatment is adjusted when they are not. The model has over 90 research studies demonstrating its efficacy and is covered by Medicare, most private insurers, and many state Medicaid programs. Additionally, the CoCM has tremendous cost savings potential. For example, cost/benefit analysis demonstrates that this model has a 12:1 benefit to cost ratio for the treatment of depression in adults.¹ Furthermore, the Model greatly increases the number of patients being treated for mental health and substance use disorders when compared to traditional 1:1 treatment. Lastly but no less important, the CoCM has been shown to increase physician and patient satisfaction and reduce stress among primary care physicians.

Despite its strong evidence base and availability of reimbursement, uptake of the Collaborative Care Model by primary care physicians and practices remains low due to the up-front costs associated with implementing the model. Additionally, many primary care physicians and practices may be interested in adopting the model but are unsure of next steps. H.R. 5218 addresses both potential roadblocks by providing grants to primary care practices to cover start-up costs and by establishing technical assistance centers to provide support as practices implement the model. Moreover, the bill promotes research to identify additional evidence-based models of integrated care.

We commend you for introducing this legislation that will expand needed access to high-quality behavioral health care that is proven to be effective. Your leadership is greatly appreciated and vitally

¹ Washington State Institute for Public Policy Benefit-Cost Results for Adult Mental Health. Retrieved from: <https://www.wsipp.wa.gov/BenefitCost?topicId=8>

necessary. We look forward to working with you to advance this important legislation and improve outcomes for our patients.

Sincerely,

2020 Mom

Academy of Consultation-Liaison Psychiatry
American Academy of Addiction Psychiatry
American Academy of Child and Adolescent Psychiatry
American Academy of Family Physicians
American Academy of Pediatrics
American Association for Geriatric Psychiatry
American Association for Psychoanalysis in Clinical Social Work
American Association on Health and Disability
American College of Obstetricians and Gynecologists
American College of Physicians
American Foundation for Suicide Prevention
American Group Psychotherapy Association
American Medical Association
American Osteopathic Association
American Psychiatric Association
American Society of Addiction Medicine
Anxiety and Depression Association of America
Association for Behavioral Health and Wellness
Children and Adults with Attention-Deficit/Hyperactivity Disorder
Clinical Social Work Association
College of Psychiatric and Neurologic Pharmacists (CPNP)
Depression and Bipolar Support Alliance
Global Alliance for Behavioral Health and Social Justice
HR Policy Association and American Health Policy Institute
International OCD Foundation
The Kennedy Forum
Lakeshore Foundation
Massachusetts Association for Mental Health
Maternal Mental Health Leadership Alliance
Meadows Mental Health Policy Institute
National Alliance of Healthcare Purchaser Coalitions
The National Alliance to Advance Adolescent Health
National Association for Children's Behavioral Health
National Association of Social Workers
National Council for Mental Wellbeing
Shatterproof
SMART Recovery
The Trevor Project
Treatment Advocacy Center