# Summary of Mental Health Programs in 21<sup>st</sup> Century Cures Act Signed by President Obama on 12/13/16

The bill combines provisions from a House-passed "Helping Families in Mental Health Crisis Act," H.R. 2646, and the Mental Health Reform Act, S. 2680, which the Senate didn't consider.

The bill addresses a multitude of mental health programs and issues. In general, the bill does the following:

- Enhances delivery of mental health services
- Addresses mental health and substance abuse treatment parity
- Clarifies when treatment providers may release information to caregivers and family members under HIPAA
- Enhances pediatric mental health treatment, including creating a grant program to establish "pediatric mental health teams"
- Reauthorizes numerous mental health programs
- Creates due process protections before a veteran may be declared mentally incompetent
- Addresses the needs of individuals with mental illness involved in the criminal justice system

Below is a summary of the provisions relating to mental health and substance abuse issues:

## **Medicaid Coverage and Service Delivery**

HHS would have to establish a telephone hotline and website that families could use to find mental health or substance abuse treatment services.

### **Mental Health Parity**

Under federal law, health plan cost-sharing requirements for mental health and substance abuse treatment -- such as copayments -- generally can't be more restrictive than those for medical and surgical care.

The measure would require the HHS inspector general to issue guidance within 12 months of enactment to improve compliance with mental health and substance abuse treatment parity requirements. The guidance would have to provide examples of compliance and noncompliance and recommendations on how to avoid violations. The guidance also would have to be free of protected health information that could be used to identify a patient.

## **Mental Health Authorizations**

The measure would reauthorize SAMHSA's <u>Substance Abuse Prevention and Treatment Block</u> <u>Grant</u> at an annual level of \$1.86 billion for fiscal 2018 through 2022. States applying for a grant would have to submit a plan that would describe the need for prevention and treatment activities

in the state and the number of individuals in treatment. Certain grant reporting requirements could be waived by HHS if there is a declared public emergency.

The agreement would reauthorize and modify the Community Mental Health Services Block Grant Program managed by SAMHSA at an annual level of \$532.6 million for fiscal 2018 through 2022. The changes to the program would require states submit a plan identifying a single state agency responsible for administering mental health services and using a community-based care system. Grant recipients would have to reserve 10 percent of funding to meet the needs of individuals with early mental illness.

The measure would authorize funding to address a variety of needs of "regional and national" significance. Amounts would be authorized for fiscal 2018 through 2022 including.

- -- \$333.8 million for substance abuse treatment programs.
- -- \$211.1 million for substance abuse prevention.

Other programs that would be authorized from fiscal 2018 through 2022 under the legislation include:

- -- \$12.7 million for a minority fellowship program to increase the knowledge of mental health and substance use disorders and treatment for minority populations.
- -- \$4.3 million for jail diversion program grants.

### **HHS Administrative Changes**

The legislation would create a new HHS "assistant secretary for mental health and substance use." The position would be appointed by the secretary and subject to Senate confirmation. The duties of the SAMHSA administrator would be transferred to the new position.

A chief medical officer position would be created within SAMHSA to assist the new assistant secretary with promoting evidence-based and promising practices.

The Center for Behavioral Health Statistics would also be codified under the agreement.

### **Mental Health Workforce**

HHS would establish a demonstration program to support medical resident training to integrate mental health and substance abuse treatment and prevention with primary care.

The measure would authorize \$50 million annually for the demonstration programs for fiscal 2018 through 2022.

## Law Enforcement and Mental Health

The measure would allow grants provided through the Edward Byrne Memorial Justice Assistance Program, Community Oriented Policing Services Program and the Fire Prevention and Control Act to be used for training for law enforcement and first responders to recognize individuals with mental illness, de-escalation and crisis intervention teams or related activities. States would also be able to use federal funds to conduct behavioral risk and needs assessments for individuals in the criminal justice system.

The measure would also reauthorize the Mentally III Offender Treatment and Crime Reduction Act at an annual level of \$50 million from fiscal 2017 through 2021.

The agreement would establish a forensic assertive community treatment initiative providing 24-hour recovery services to help individuals with mental illness avoid incarceration. The measure would also expand transitional services to include mental health treatment.

Mental health court grant funding could be used to create court-ordered outpatient mental health treatment programs to provide alternatives to incarceration and inpatient treatment. The measure would also create a pilot federal mental health court in one judicial district to divert low-level offenders with mental illness.

The measure would also:

- -- Require the Justice Department to provide training to the federal uniformed services on identifying individuals with mental illness and responding to their needs.
- -- Allow states to use offender reentry funds to provide housing and mental health services to individuals reentering the community.
- -- Allow drug court funding to be used for targeted intervention involving individuals with a substance use disorder and identified mental illness.
- -- Expand the <u>Secure Our Schools Program</u> to provide for school-based mental health intervention teams.
- -- Expand in-prison reentry programs to cover mental health treatments that would reduce the chance of recidivism when an inmate is released.
- -- Permanently authorize the Justice VALOR initiative, which provides active shooter training to state and local law enforcement.
- -- Require GAO to issue a report on the number of mentally ill offenders in prison and related costs of incarceration.
- -- Direct the Justice Department to issue regulations for data collection related to the instances of mental illness and the commission of violent crime.