

ONE HUNDRED THIRTEENTH CONGRESS
Congress of the United States
House of Representatives

COMMITTEE ON ENERGY AND COMMERCE

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WASHINGTON, DC 20515-6115

Majority (202) 225-2927
Minority (202) 225-3641

May 8, 2013

The Honorable Pamela S. Hyde
Administrator
Substance Abuse and Mental Health Services Administration
1 Choke Cherry Road
Rockville, MD 20857

Dear Administrator Hyde:

Pursuant to Rules X and XI of the U.S. House of Representatives, the Committee on Energy and Commerce is engaged in an ongoing examination of mental health programs and resources with the aim of better understanding what can be done to prevent tragedies like the Newtown, CT elementary school shooting. Specifically, the Committee seeks to determine whether Federal dollars devoted to mental health are reaching those individuals with the most serious mental illnesses and helping them to obtain the most effective care, including proven, evidence-based treatments.

The Subcommittee on Oversight and Investigations hosted a bipartisan public forum on March 5, 2013, "After Newtown: A National Conversation on Violence and Severe Mental Illness." The forum brought together some of the nation's top mental health experts in the Federal government and private practice, leading advocates, and parents to engage in an open, bipartisan dialogue on the state of the mental health system and treatment options for persons with serious mental illness (SMI), particularly those individuals who are at heightened risk of violence to self and/or others. While recognizing that the vast majority of Americans with a mental illness are nonviolent, the Subcommittee heard from panelists how effective care continues to elude many of the estimated 11.4 million American adults suffering from a SMI¹ like schizophrenia, bipolar disorder or major depression, placing their own lives, and sometime those around them, at risk. As the National Institute for Mental Health (NIMH) Director, Dr. Thomas Insel, said before the Subcommittee on March 5, 2013, treatment can reduce the risk of violent behavior 15-fold in persons with SMI.

The Committee seeks to ensure that the more than \$140 billion annually spent on mental health services are appropriately targeted. In this regard, one area of interest is SAMHSA's prioritization of approximately \$1 billion annually in program-level funding for mental health through SAMHSA's Center for Mental Health Services, and particularly its discretionary grant programs.

¹ NIMH's definition of SMI can be found here: http://www.nimh.nih.gov/statistics/SMI_AASR.shtml.

In order to help the Committee better understand the role of SAMHSA's grant programs in confronting the challenges posed by SMI, we ask that you contact Committee staff to set up briefing by not later than May 20, and that you provide written responses to the following questions and requests for information no later than May 22, 2013:

1. How much does SAMHSA spend annually on mental health programs to support individuals with SMI versus all other conditions? Please identify all programs supporting individuals with SMI, including programs supporting treatment for these individuals.
2. What portion of SAMHSA's annual budget is spent on administrative costs, and what portion goes toward support of prevention and treatment activities?
 - a. Of the amounts spent on administrative costs, what portion of SAMHSA's annual budget is spent on internal staff development and training? Please identify the types of staff development and training programs offered.
3. How does SAMHSA's formula and discretionary grant spending support its mission and long-term strategic goals?
4. What are SAMHSA's formula and discretionary grant eligibility or acceptance criteria, and how are they linked to improved mental health outcomes for those with SMI such as schizophrenia, bipolar disorder, and major depression?
 - a. What role do evidence-based criteria play in the SAMHSA formula and discretionary grant approval processes? Please provide a list of these criteria.
 - b. What procedures are in place to ensure that all applications are subject to rigorous peer review prior to acceptance?
 - c. Who are the reviewers? What is their training? How are they selected?
 - d. Why, starting in Fiscal Year (FY) 2013, must all SAMHSA grant applications go through Grants.gov? How will this change the process for grant selection and oversight?
 - e. From 2009 through the present, what recipients of discretionary grants has SAMHSA classified as "high-risk grantees"?² For these recipients, what special award conditions were imposed?
 - f. How many high-risk grantees from 2009 through the present have fully resolved their high-risk designation?
5. What kind of oversight does SAMHSA conduct over its discretionary grantees?

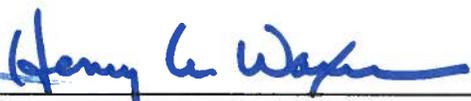
² 45 CFR §§ 92.12 and 74.14.

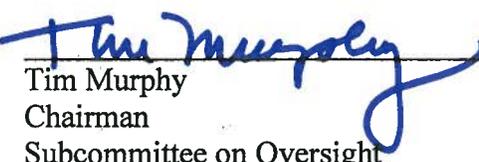
6. How is formula and discretionary grantee performance measured?
7. What kind of oversight does SAMHSA conduct over its formula grantees, including Community Mental Health Services Block Grant recipients?
8. How often is SAMHSA's National Registry of Evidence-based Programs and Practices (NREPP) revised and/or updated?
 - a. Please provide to the Committee all materials shared with approved NREPP reviewers for their two hour training on the procedures and criteria they must use to rate interventions.
 - b. How many interventions, programs, and practices were added to NREPP over the past five years? Have any interventions been removed from NREPP during this same period? If so, please name them.
9. Please provide documentation of any concerns from providers, patients, or parents that have been expressed to SAMHSA officials regarding the HIPAA privacy rule and its application to the treatment of individuals with SMI? What action, if any, has SAMHSA taken to address any such concerns?
10. How many mental health professionals does SAMHSA employ? Of these employees, please detail the relevant mental health degrees these individuals hold (e.g., master's or doctorate in psychology, psychiatry, or other advanced degrees) or mental health training these individuals have received.

If you have any questions regarding this request, please contact Sam Spector with the Committee staff at (202) 225-2927.

Sincerely,


Fred Upton
Chairman


Henry Waxman
Ranking Member


Tim Murphy
Chairman
Subcommittee on Oversight
and Investigations


Diana DeGette
Ranking Member
Subcommittee on Oversight
and Investigations