

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

COMMITTEE ON ENERGY AND COMMERCE

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June 14, 2013

The Honorable Gene Dodaro
Comptroller General
General Accountability Office
441 G Street, N.W.
Washington, D.C. 20548

Dear Mr. Dodaro:

Recent research shows that about one in four adults suffer from a mental disorder, and that mental disorders are one of the most costly conditions for patients who need care.¹ In 2008, an estimated 9.8 million adults aged 18 and older in the United States had a serious mental illness, and about two million youth aged 12 to 17 had a major depressive episode during the prior year.² Four percent of young adults reported going without mental health care despite self-reported mental health needs.³

The vast majority of Americans with a mental disorder are not violent. However, there is some evidence of a causal role of medication noncompliance among mentally ill men charged with violent crimes.⁴ Dr. Thomas Insel, Director of the National Institute of Mental Health, has said: "The data support the proposition that people with schizophrenia are more likely to be involved in violence either toward others or toward themselves unless they're treated. So there's every reason to treat people with this illness to reduce violence."⁵

The Substance Abuse and Mental Health Services Administration (SAMHSA), an agency within the Department of Health and Human Services (HHS), has a mission to reduce the impact

¹Mental Health: Research Findings: Program Brief. September 2009. Agency for Healthcare Research and Quality, Rockville, MD. <http://www.ahrq.gov/research/findings/factsheets/mental/mentalth/index.html>.

²Substance Abuse and Mental Health Services Administration (SAMHSA). (2009). *Results from the 2008 National Survey on Drug Use and Health: National findings*. (Office of Applied Studies, NSDUH Series H-36, DHHS Publication No. SMA 09-4434). Rockville, MD: SAMHSA.

³Mental Health: Research Findings: Program Brief. September 2009. Agency for Healthcare Research and Quality, Rockville, MD. <http://www.ahrq.gov/research/findings/factsheets/mental/mentalth/index.html>.

⁴E. Fuller Torrey, "Stigma and Violence: Isn't It Time to Connect the Dots?" *Schizophrenia Bulletin*, vol. 37, no. 5, 892-893 (2011).

<http://schizophreniabulletin.oxfordjournals.org/content/early/2011/06/04/schbul.sbr057.full.pdf+html>

⁵Thomas Insel, Interview of Thomas Insel on the Schizophrenia Research Forum (Posted August 9, 2007).

<http://www.schizophreniaforum.org/for/int/Insel/inse.asp>. Accessed June 12, 2013.

of substance abuse and mental illness on America's communities. Other HHS agencies also conduct activities that address mental health needs. For example, the National Institute of Mental Health (part of the National Institutes of Health) funds basic and clinical research to prevent and cure mental illness. The Centers for Disease Control and Prevention seeks to increase awareness of mental illness as an important public health problem and the importance of mental health promotion and mental illness prevention. Other Federal departments, such as the Department of Defense and the Department of Veterans Affairs, also support research and treatment. Given that multiple departments and agencies are involved in addressing mental health needs, it is especially important that those involved in supporting major programs to address mental illness make every effort to ensure that Federal resources are maximized to meet the needs of this population.

We would like the Government Accountability Office (GAO) to provide information on how key Federal departments and agencies, like those discussed above, support programs for individuals with serious mental illness and take steps to ensure their programs meet the needs of this population. This request excludes programs that focus on reimbursement of insured services. Specifically, we seek answers to the following questions:

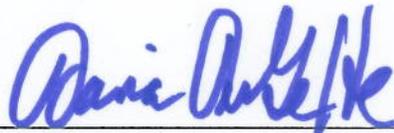
1. How do departments and agencies determine when and how to specifically target programs to individuals with serious mental illness?
2. How do departments and agencies identify gaps in services for individuals with serious mental illness and strategically plan to address such gaps?
3. To what extent do key departments and agencies coordinate efforts to address the needs of individuals living with serious mental illness?
4. What factors do departments and agencies consider in prioritizing which populations will be served and which mental health services will be provided?
5. What steps do departments and agencies take to ensure the use of evidence-based practices in programs that serve individuals with serious mental illness?

If you have any questions regarding this request, please contact Sam Spector with the Majority staff at (202) 225-2927 or Stacia Cardille with the Minority staff at (202) 226-3400.

Sincerely,



Tim Murphy
Chairman
Subcommittee on Oversight and
Investigations



Diana DeGette
Ranking Member
Subcommittee on Oversight and
Investigations