

Opening Statement
Chairman Frank Pallone, Jr.
Committee on Energy and Commerce
Subcommittee on Health
Hearing on “High Anxiety and Stress: Legislation to Improve Mental Health During Crisis”
June 30, 2020

Thank you, Chairwoman Eshoo for convening today’s legislative hearing on 22 bills to improve both quality and access to mental health care in America. This hearing is particularly timely as our nation is simultaneously confronting a global health crisis, a severe economic downturn, and centuries of systemic racism. All three of these crises are understandably triggering distress for millions of people and it is compounded by the fact that many people are isolated from family and friends. It is no wonder that nearly half of Americans are reporting that their mental health has been negatively impacted due to worry and stress in recent months.

Mental health is an essential part of our overall health and wellbeing. Thanks to this Committee’s work, we have made progress to better incorporate comprehensive mental health care into our health care system. We have improved insurance coverage for mental health services through the Mental Health Parity Act of 1996 and the Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act of 2008.

Thanks to the Affordable Care Act (ACA) millions of Americans now have access to comprehensive health insurance plans that include mental health care services. The ACA dramatically improved access to mental health and substance use disorder benefits by requiring individual and small group insurance plans to cover these benefits. As a result, millions of Americans can now access mental health services and substance use disorder treatment without fear of exorbitant out-of-pocket costs that all too often deter people from seeking treatment. The ACA also applied mental health parity requirements to individual market plans.

We continued to build on this progress in 2016 when President Obama signed the 21st Century Cures Act into law. It expanded access to mental health services for children through Medicaid, improved coordination between primary care and behavioral health services, and reauthorized important programs including those focused on suicide prevention.

Taken together, these legislative changes have made a true difference in Americans’ lives, but there is more work that must be done to help people in need.

In 2018, more than 47 million Americans said they suffered from a mental illness over the past year, including more than 11 million who had a serious mental illness. Research estimates that more than 7 million American children have a mental health disorder. Tragically, far too many of these conditions in children go unidentified and untreated, and research has found large disparities in access to mental health services among Black and Latino children.

We also know that people experiencing mental illness are at a higher risk of developing substance use disorder. According to surveys, roughly half of individuals experiencing mental illness will also experience a co-occurring substance use disorder. This underscores the importance of expanding access to both mental health and substance use disorder treatment. This is particularly important as we continue to respond to the opioid epidemic that claims 130 lives every day, as well as emerging epidemics involving cocaine and methamphetamine use.

Unfortunately, suicide has also been on the rise. In 2018, more than 10 million Americans seriously contemplated suicide and 1.4 million people made nonfatal attempts. Suicide is now one of the top ten leading causes of death in the United States and is the second leading cause of death among young people ages 10 to 34.

Today, less than half of those with mental health conditions get treatment with many citing the inability to pay for services as their primary reason for not seeking treatment. Individuals in need of care also often cite stigma and fear of discrimination as reasons for not seeking treatment and many others report difficulty gaining access to providers due to workforce shortages.

All of this speaks to the urgent need for additional action to help those in need. That is why we are considering a variety of policies, including proposals to improve telemental health, mental health parity, mental health services for students and in the emergency room, and suicide prevention programs. Taken together, these proposals are focused on improving our nation's wellbeing.

I want to thank our witnesses for being here today to share their expertise, I look forward to hearing from each of you. Thank you, I yield back.