

MENTAL HEALTH ADVOCACY: MUCH ACCOMPLISHED, BUT MUCH LEFT TO DO

Improving the availability and quality of mental and behavioral health services remains one of the most challenging aspects of health policy and advocacy in the United States. While Congress has passed several pieces of legislation over the last 20 years to improve access and coverage for mental health, these services remain out of reach for far too many Americans. Even for those with access to mental and behavioral health, the stigma attached to them keeps many from seeking the help they need. For those who work to improve the system and provide access to everyone who needs mental and behavioral health services, particularly low-income and other vulnerable populations, mental health advocacy — along with raising awareness around the problem — remains a top priority.



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The Catholic health ministry recognizes that supportive and readily available mental health services and substance use disorder treatments are essential facets of holistic, person-centered and effective health care. The first principle in CHA's *Vision for U.S. Health Care* affirms our call to pay special attention to those most likely to

lack access to health care, many of whom are in desperate need of mental health and substance abuse services.¹ This commitment is why we strongly support efforts to increase access to these services and ensure that they become fully integrated into our health care system. CHA has been at the forefront of these efforts for many years, and mental health remains one of the Catholic health ministry's key priorities in our advocacy agenda for the 118th Congress.²

ADVANCING ACCESS TO MENTAL HEALTH CARE

As we move into the middle of the 118th Congress, we can celebrate some important advances in advocacy work and public awareness that have occurred over the past few years. Two bills approved during the last Congress — the Bipartisan Safer Communities Act and the Fiscal Year 2023 Omnibus Appropriations Bill — contained many

important mental and behavioral health provisions that addressed some of Catholic health care's advocacy priorities. The urgency of the global COVID-19 pandemic, combined with the mental health concerns related to gun violence in the U.S., helped push Congress to act and approve these bills.

The Bipartisan Safer Communities Act was approved by the 117th Congress and became law in June 2022. While the main thrust of the bill was an effort to address gun violence, it also contained several provisions related to mental and behavioral health. The law provides resources to increase options for mental telehealth, particularly in Medicaid and the Children's Health Insurance Program (CHIP). Telehealth options were greatly expanded during the pandemic to meet the needs of those who could not seek care in person, and mental telehealth options remain a pivotal aspect in improving care options for those in areas without easy access to mental health professionals. In addition, it provides a way to access care without the stigma often attached to in-person appointments. This legislation also provided funding and resources for school-based mental and behavioral health programs, as mental health for children and adolescents has become a focus of particular concern in public policy.

The Consolidated Appropriations Act of 2023 (or "Omnibus") was passed at the very end of the

last Congress. In addition to reauthorizing vital mental and behavioral health programs, this legislation also addressed several key advocacy priorities for Catholic health providers, including measures to enforce parity between physical and mental health services; reimbursement in the Medicare program for licensed mental health counselors, marriage and family therapists, and for intensive outpatient services often required for mental and behavioral health treatment programs; investments to increase the mental and behavioral health workforce; and extending telehealth flexibilities through the end of 2024.

Many of the provisions in the omnibus had been outlined in work groups formed by the Senate Finance Committee in 2022 to offer legislative suggestions to improve mental health services based on information gathered from stakeholders. Catholic mental health providers participated in the process of gathering information for the Finance Committee and played a key role in advancing the committee's mental health agenda throughout the year.

BREAKING STIGMAS, RAISING AWARENESS

Reducing the stigma associated with mental and behavioral health services and raising awareness of their benefits is as much a part of our advocacy efforts as seeking legislative solutions to improve access and care. Great strides have also been made in this area over the past few years, including the introduction of the 988 mental health hotline. This free service — which consolidated various state and local help hotlines into one number available nationwide — officially launched more than a year ago. The 988 service has already been credited with helping to raise awareness of the availability of mental health and drug treatment programs and services, as well as increasing outreach to those in need of suicide prevention. Funding for the 988 initiative and for local mobile mental health crisis units was included in the legislation passed last year, and these programs are helping to move the response to mental health and substance use disorder crises away from law enforcement and into clinical outreach and settings.

Even as we celebrate these accomplishments and all the tremendous work done by mental and behavioral health providers working in Catholic health care, we acknowledge how much more remains to be done in this area. For providers, the lack of capacity and workforce to treat all those needing mental and behavioral health services remains the greatest challenge.³ While legislative solutions to increase capacity and workforce have been long discussed, they invariably involve ensuring adequate reimbursement across the payment mix of programs and well-funded outreach and programs to attract new mental health professionals.

In short, these proposed solutions would require funding at a time when many in Congress and elsewhere are demanding cuts in government spending. But in addition to our mission to help and heal everyone regardless of cost, providers working in Catholic health care also know that shortchanging investments in this care is a penny-wise and pound-foolish strategy that inevitably leads to more significant monetary and human costs down the road. We will continue to advocate the Catholic health ministry's mental and behavioral health priorities regardless of the obstacles ahead because the price of leaving them undone is far too great.

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NOTES

1. "More than 4 in 10 U.S. Adults Who Needed Substance Use and Mental Health Care Did Not Get Treatment," National Council for Mental Wellbeing, <https://www.thenationalcouncil.org/news/more-than-4-in-10-us-adults-who-needed-substance-use-and-mental-health-care-did-not-get-treatment/>.
2. "Advocacy Agenda 2023-2024 (118th Congress)," Catholic Health Association, <https://www.chausa.org/advocacy/advocacy-agenda>.
3. "New Study: Behavioral Health Workforce Shortage Will Negatively Impact Society," National Council for Mental Wellbeing, <https://www.thenationalcouncil.org/news/help-wanted/>.

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