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**Health - Mental Health
Conference**

**THE CLINTON/GORE ADMINISTRATION CHALLENGES CONGRESS TO PASS
LEGISLATION TO IMPROVE CARE AND SERVICES FOR PEOPLE WITH
MENTAL ILLNESS**

June 7, 1999

At the first-ever White House Conference on Mental Health, The Clinton-Gore Administration called on Congress to enact legislation to ensure quality care and services for Americans with mental illness. The Clinton-Gore Administration challenged Congress to pass a number of important bills to support people with mental illness including; allocating an unprecedented increase in the mental health block grant, passing a strong enforceable patients' bill of rights, and challenging Congress to hold hearings on mental health parity legislation. The proposals include:

Fund an historic increase in the mental health block grant. The Administration called on the Congress to pass the President's FY 2000 budget proposal for a \$70 million increase in the mental health block grant. In addition, the Administration asked Congress to pass a 19 percent increase in funds for the Projects for Assistance in Transition from Homelessness (PATH) program. In an era of surpluses, the Administration also called on states to expand their coverage in this area.

Challenge Congress to hold hearings on mental health parity legislation. The Administration urged the Congress to hold hearings right away on the strengths and weaknesses of the current mental health parity law and to determine the feasibility of congressional legislation that would expand mental health parity for private health plans.

Pass a strong enforceable patients' bill of rights. The Administration also challenged the Congress to pass a strong enforceable patients' bill of rights that assures that consumers, including those with mental health needs, receive critical protections such as access to specialists, the continuity of care protections, and an independent appeals process to address grievances with their health plans.

Pass the Jeffords-Kennedy-Roth-Moynihan legislation to enable people with disabilities return to work. Access to affordable health insurance is the biggest barrier preventing people with disabilities from returning to work. The President and Vice President encouraged Congress to pass this legislation right away, which would help people with disabilities, including mental illnesses, buy into Medicare and Medicaid so they can return to work.

Pass strong comprehensive privacy protections and legislation to eliminate genetic discrimination. The President and Vice President also urged Congress to pass comprehensive legislation to assure medical records privacy so that information, including sensitive information about mental illness, is protected. In addition, as researchers continue to unlock the genetic code, which enhances the potential to expand treatment options, the Administration urged the Congress to pass legislation that prevents employers and health care plans from discriminating against Americans based on their genetic information.

Increase funding for the Individuals with Disabilities Education Act. The Clinton/Gore budget includes a \$50 million increase to support a Primary Education Intervention Program, for early identification and intervention with children ages 5-9 years old who are experiencing significant behavior or reading problems. Research has conclusively shown that early intervention in these areas is strongly associated with elimination or reduction of behavioral and mental health problems in adolescence and adulthood.

Establish a \$1,000 tax credit for workers with disabilities. Under this proposal, workers with significant disabilities would receive an annual \$1,000 tax credit to help cover the formal and informal costs that are associated with and are even prerequisites for employment, such as special transportation and technology needs.

Protect the health benefits of workers' and their families'. This proposal provides more than \$2.5 million for the Pension and Welfare Benefits Administration's capabilities to interpret, investigate and provide customer service to protect American workers' and their families' rights under health laws governing job-based health benefits, which include mental health benefits under the Mental Health Parity Act.

Improve access to assistive technology. This new \$35 million initiative would accelerate the development and adoption of information and communications technologies, which can improve the quality of life for people with disabilities and enhance their ability to participate in the workplace.

Enact Project Employ. Project Employ is a program initiated in 1996 by the President's Committee on Employment of People with Disabilities to expand and enhance employment opportunities for persons with cognitive disabilities. The program promotes the hiring of people with disabilities in jobs that pay higher than minimum wage, include benefits, and promotional opportunities. In the President's FY 2000 budget the President's Committee on Employment of People with Disabilities has budgeted \$200,000 to develop a similar program for persons with psychiatric disability.

Expand funds for clinical and preventive programs. This proposal encourages Congress to grant a 17 percent increase for Indian Health Service (IHS), which will support oriented clinical and preventive services for Native American/Alaskan Native communities, enabling the mental health needs of 31,000 individuals are met.

**THE CLINTON-GORE ADMINISTRATION:
*Improving Mental Health***

"Let me say we must step up our efforts to treat and prevent mental illness. No American should ever be afraid -- ever -- to address this disease."

– President Clinton in his State of the Union Address, January 19, 1999

While trying to eradicate the stigma and discrimination associated with mental illness, the Clinton-Gore Administration is working to improve mental health treatment, enhance prevention and bolster research. The Administration, under the leadership of President Clinton and Vice President Gore, is committed to helping Americans with mental illnesses live healthy, productive lives.

HELPING AMERICANS OVERCOME MENTAL ILLNESS

Supporting Fairness, Requiring Mental Health Parity. The Clinton-Gore Administration advocated for and signed into law the 1996 Mental Health Parity Act (MHPA). In December 1997, the Administration issued regulations to take steps to ending discrimination in health insurance on the basis of mental illness under MHPA. As of January 1998, the law began requiring health plans to provide the same annual and lifetime spending caps for mental health benefits as they do for medical and surgical benefits. The Departments of Labor (DOL), Treasury, and HHS have also established coordination and referral systems at the federal and state levels to coordinate investigations of alleged practices by health insurance issuers and to ensure that workers and their families are not unjustly denied any protections provided under MHPA.

Extending Strong Mental Health Care to Millions of Children through the Children's Health Insurance Program (CHIP). The President fought to ensure that the 1997 Balanced Budget Act included \$24 billion -- the single largest investment in Health Care for children since 1965 -- to provide real health care coverage to millions of uninsured children. This investment guarantees the full range of benefits -- from checkups to surgery -- that children need to grow up strong and healthy. It ensures that a strong mental health benefit is part of this benefit.

Preparing the First Surgeon General's Report on Mental Health. Due out by late 1999, this document will distill the most current science to recommend approaches for promoting mental health, preventing mental illness, and providing state-of-the-art clinical interventions across the life cycle. The report will illustrate the similarities between mental health and physical health and the value of prompt, appropriate treatment.

Developing a National Suicide Prevention Strategy. In October 1998, Surgeon General David Satcher took part in a conference in Reno, Nevada, which laid the foundation for developing a national suicide prevention strategy -- the first time in the United States that clinicians, researchers, survivors and activists had been gathered for this purpose.

Ensuring Medicaid Coverage of Mental Health Services. In October 1998, HCFA issued a state Medicaid director's letter providing guidance to all states regarding the development of Medicaid managed care programs for persons with special needs. This guidance applies to mental health

service systems and further promotes recognition of mental health needs by managed care organizations serving Medicaid populations.

Improving Prevention and Treatment for People with Mental Illnesses. On January 14, 1999, the President's Mental Health Policy Advisor, Mrs. Gore, unveiled the Administration's plan to increase the Mental Health Services Block Grants by an unprecedented \$70 million (or 24 percent), totaling \$359 million for fiscal year 2000. Currently, the Mental Health Services Block Grant provides state and territorial governments with resources to support comprehensive community-based systems of care to serve people with serious mental illness and their families. This additional funding will enable states to target particularly-hard-to-reach adults and children with severe mental illnesses.

Fighting to Pass a Strong, Enforceable Patients' Bill of Rights. President Clinton and Vice President Gore called on the Congress to pass a strong, enforceable Patients' Bill of Rights that assures Americans the quality health care they need. Among its protections, the Administration's bill ensures that consumers cannot be discriminated against because of mental disability as they seek health care services. Leading by example, the President directed all federal agencies to ensure that their employees and beneficiaries have the benefits and rights guaranteed under the President's proposed Patients' Bill of Rights. In addition, HHS currently supports consumers by providing grants to develop programs that advocate for the legal rights of people with mental illness and to investigate incidents of abuse and neglect in facilities that care for such individuals.

Protecting the Medicaid Guarantee. The Clinton-Gore Administration rejected proposals to end the Medicaid guarantee to meaningful health benefits. In 1995, the President vetoed the Republicans' proposal in the 104th Congress to block grant the Medicaid program, preserving coverage for million of persons who receive mental health services under Medicaid. Thanks to President Clinton, the 1997 Balanced Budget Act preserved the federal guarantee of Medicaid coverage for populations who depend on it.

Sponsoring Studies and Providing Mental Health Information. HHS has taken a proactive approach in addressing mental health issues by sponsoring studies to advance mental health science in areas such as Attention Deficit Hyperactivity Disorder (ADHD) and Schizophrenia. In addition, SAMSHA operates the National Mental Health Services Knowledge Exchange Network (KEN) as a user-friendly, "one-stop" gateway to a wide range of information and resources on mental health services for users of mental health services and their families, the general public, policy makers, providers and the news media. KEN can be reached at 1-800-789-2647 or via the Internet at www.mentalhealth.org.

Preventing Discrimination Based on Genetic Information both by Health Plans and Employers. The Administration has urged Congress to pass bipartisan legislation to prohibit health plans from inappropriately using genetic screening information to deny coverage, set premiums or to distribute confidential information. The Clinton-Gore Administration has also supported legislation that ensures that employers do not use genetic information to discriminate against employees.

Supporting Brain Research and Improving Technology. Earlier this year, the Energy

Department gave a \$10 million grant to establish the first of three National Centers for Functional Brain Imaging. Moreover, Department of Energy laboratories have developed a device that gives doctors a "window" into how the human brain actually functions. The device takes snapshots of the brain using a technique called magnetoencephalography and has led to greater insights about how the signals of the brain act or react in individuals with mental illnesses.

EXPANDING EMPLOYMENT OPPORTUNITIES

Expanding Hiring Opportunities for People with Psychiatric Disabilities. In January, Tipper Gore announced that the Office of Personnel Management (OPM) would explore measures to eliminate the stricter standards that are currently applied to federal job applicants who have psychiatric disabilities. On June 4, 1999, President Clinton signed an executive order ensuring that individuals with psychiatric disabilities are given the same hiring opportunities as persons with severe physical disabilities or mental retardation. The civil service rules will be changed to ensure that people with psychiatric disabilities are covered by the same hiring rules and authority used for individuals with other disabilities. The executive order also permits people with psychiatric disabilities the same opportunity to acquire competitive civil service status after two years of successful service. This authority will allow adults with psychiatric disabilities the same opportunity for conversion into the competitive civil service as employees with other disabilities.

Working to Enact the Work Incentives Improvement Act (WIIA). The Work Incentives Improvement Act is an historic, bipartisan bill which removes significant barriers to work for people with disabilities, including psychiatric disabilities. The proposed legislation improves access to health care through Medicaid; extends Medicare coverage for people with disabilities who return to work; and creates a new Medicaid buy-in demonstration to help people with a specific physical or mental impairment that is expected to lead to a severe disability without medical assistance.

Helping People with Mental Illness Return to Work. Initiated in 1995, the Employment Intervention Demonstration Program (EIDP) program has shown that people with serious mental illness not only can work but also can be highly productive, given the right environment and the right support systems. EIDP has been identifying model interventions to help people with severe mental illnesses return to work or enter the workforce for the first time. While not yet complete, the study already has yielded important information about employment for people with serious mental illnesses -- information to help break through the stigma that stands between willing workers and jobs needing to be filled.

ADDRESSING MENTAL HEALTH ISSUES FOR ALL AGES

Meeting Special Needs of Children, Adolescents and Families. The Clinton-Gore Administration helps fund a wide range of programs designed to protect or improve the mental health of our children. Some programs focus on preventive interventions that promote resilience, while other programs reach out to children with serious emotional disturbances to help point them on the road toward a healthier, productive adult future.

- **Promoting Healthy Development.** In response to President Clinton's call to action during the

White House Conference on School Safety, the Administration creating two important grant programs for communities around the country: (1) the Safe Schools/ Healthy Students Program; and (2) the School Action Grant Program. Through the first program, grants totaling more than \$180 million per year will be awarded to school districts in partnership with local mental health and law enforcement authorities to promote healthy childhood development and prevent violence. The second program, launched by SAMHSA's Center for Mental Health Services, complements the first by providing funds to communities to expand school-based programs to the broader community.

- **Starting Early, Starting Smart.** Research has shown increasingly that many young children who grow up in homes where at least one parent suffers from significant mental illness and/or substance abuse demonstrate emotional, behavioral or relationship problems that ultimately hinder their readiness to enter school. HHS' "Starting Early, Starting Smart" initiative, a public-private partnership between SAMHSA and the Casey Family Foundation, seeks to fill this gap by reaching children at their most critical time for mental and physical development.

Meeting the Special Needs of Older Adults. The Clinton-Gore Administration supports a range of services to meet the unique mental health needs of older Americans.

- **Studying and Treating the Mental Health Needs of Seniors.** The Administration supports a number of studies exploring the mental health needs of elderly Americans, including treating depression and reducing the risk of suicide. Older Americans are disproportionately more likely to commit suicide than any other group. NIMH-supported studies have found that major depression was the sole predictor of suicide among the elderly. These and other NIMH findings can lead to enhanced detection and treatment of depression in primary-care settings that reduces the risk of suicide among the elderly.
- **Caring for the Caregivers:** President Clinton and Vice President Gore supported the Administration on Aging (AoA) proposal for the National Family Caregiver Support Program to help families sustain their efforts to care for an older relative afflicted with a chronic illness or disability. The program would establish a multifaceted support system in each state for family caregivers. AoA also continues to provide grants to states to provide home and community-based, long-term care services -- important supplements to the care already provided by family members.

ADDRESSING MENTAL HEALTH ISSUES IN ALL COMMUNITIES

Supporting the National Resource Center on Homelessness and Mental Illness. SAMSHA operates this center which develops and disseminates effective approaches to providing services and housing to homeless people with mental illness. Thanks to these resources, states have been able to improve treatment, housing and support services for adults with severe mental illness, so that they can carry out ordinary day-to-day activities in their communities. In addition, the "Access to Community Care and Effective Services and Supports" (ACCESS) program seeks to integrate fragmented public mental health services by using proven strategies and fostering partnerships among service agencies. ACCESS-evaluated interventions can lower days of homelessness for seriously at-risk individuals by as much as 75 percent over a 12-month period.

Providing Mental Health Services for the Homeless. The Health Care for the Homeless Program provides a comprehensive approach to address the multitude of health problems faced by homeless individuals. These services include referring homeless persons for needed mental health services and providing primary care and substance abuse services at locations accessible to homeless people. In addition, the President has proposed increasing the Projects for Assistance in Transition from Homelessness (PATH) program. PATH provides links to community-based health, education, employment and housing services.

Creating A Continuum of Care for America's Homeless. Under the Clinton-Gore Administration, the Department of Housing and Urban Development's (HUD) Continuum of Care program uses a comprehensive approach to provide emergency, transitional and permanent housing and services to help homeless people become self sufficient. Since 1994, the Continuum of Care has devoted an average of \$882 million each year toward solving homelessness, and in 1998, more than half of the programs supported by homeless funding served people with mental illnesses under the Continuum of Care's Supportive Housing, Safe Havens and Shelter Plus Care programs. According to a 1996 Columbia University study: "The Continuum of Care approach has resulted in significantly more assistance for homeless persons with disabilities (including, but not limited to, severe mental illness, substance abuse problems, HIV/AIDS, and physical disabilities). The numbers of persons with disabilities proposed to be served in programs specifically designed for them increased 843 percent, from 2,816 to 26,565."

Providing Mental Health Services in Medically Underserved Areas. The Community Health Center (CHC) Program provides primary and preventive health care services to people living in rural and urban medically underserved areas throughout the U.S. and its territories. CHCs offer services in 2,500 clinics and serve over 7 million people yearly. In addition, the Clinton-Gore Administration is helping to train and recruit mental health professionals. The National Health Service Corps (NHSC) loan repayment program is available for behavioral and mental health professionals including clinical psychologists, clinical social workers, psychiatric nurse specialists, and marriage and family therapists. Through NHSC, these clinicians are placed in health professional shortage areas to improve access to mental health services for underserved people.

Enhancing Access and Decreasing Stigma Associated with Mental Illness. Under the Clinton-Gore Administration, the DoD developed a pilot program at Tinker Air Force Base in which specialty behavioral healthcare is provided in primary care clinics, thus enhancing access to mental healthcare, decreasing stigma associated with seeking such care, and enhancing prevention efforts.

Helping Veterans Overcome Mental Illness. Under the Clinton Administration, the Veterans Administration (VA) has redoubled its efforts to provide quality mental health services. The VA instituted an accountability system and has increased its services to special populations, including homeless veterans and veterans with PostTraumatic Stress Disorder (PTSD). The VA currently treats over 25,000 homeless veterans per year and outcomes of those treated in residential facilities have improved steadily from 1993-1999 in the areas of housing, employment and clinical status. The VA also treats over 50,000 vets per year in specialized PTSD programs and inpatient PTSD outcomes have improved in recent years.

PROTECTING ALL CITIZENS

Caring for Victims of Violence. SAMHSA has developed a grant program to identify, test and evaluate new, more effective programs to care for female victims of violence and for their children. In addition, the Violence Against Women Office supports a number of state and local efforts that include components to provide mental health services to domestic violence victims and their children and victims of sexual assault. And in fiscal year 1998, the Office for Victims of Crime (OVC), through Victims of Crime Act (VOCA) funding, supported over 4,000 victim assistance agencies throughout the nation.

Enforcing Civil Rights Law and Ensuring Proper Care in Our Public Residential Facilities.

The Clinton Administration has worked hard to ensure proper care in our public residential facilities. The Civil Rights Division Special Litigation Section has ongoing work investigating allegations of inadequate care and treatment in public residential facilities (including mental retardation facilities and adult and juvenile correction facilities) under the Civil Rights of Institutionalized Persons Act. Since 1993, the Division has investigated mental health services and monitored remedial settlements to improve the mental health services in more than 300 facilities in 42 states. The Department of Justice's (DOJ) efforts also include an ongoing Working Group on Mental Health and Crime and a Suicide Prevention Program.

Addressing the Mental Health Needs of Youth. In fiscal year 1999, the Office of Juvenile Justice and Delinquency Prevention (OJJDP) is funding a competitive grant to initiate a research and demonstration effort to substantially increase the quality of mental health services provided to detained and committed youth. In addition, a collaborative initiative between the Deputy Attorney General and OJJDP focuses on the needs of children exposed to violence, including on law enforcement and legislative reform, innovative programs, and raising public awareness.

Working to Improve the Justice System's Response. DOJ has supported studies that examine and analyze police response to emotionally disturbed persons and that study the use of force in the arrest of persons with impaired judgement, including people with mental illness. Other DOJ efforts include: an ongoing Working Group on Mental Health and Crime, a number of projects supported by the Bureau of Justice Assistance to improve the criminal justice system's response, and a Suicide Prevention Program conducted by the National Institute of Corrections' (NIC) Jails Division.