

The “Helping Families in Mental Health Crisis Act of 2015” Represents Wrong Policy Direction

New bill would counter key values and provisions of the Americans with Disabilities Act

June 16, 2015 (Washington, DC) – The House Energy and Commerce Committee held a hearing today on the Helping Families in Mental Health Crisis Act of 2015 (H.R. 2646), introduced on June 4 by Reps. Tim Murphy (R-PA) and Eddie Bernice Johnson (D-TX). Groups across the disability and civil rights communities were deeply opposed to the 2013 version of the bill, which had numerous controversial provisions that would negatively impact the civil and privacy rights of persons with psychiatric disabilities. The new bill includes few changes to those concerning provisions.

“We couldn’t agree more with Reps. Murphy and Johnson that the nation’s mental health system is broken,” said President and CEO Robert Bernstein. “However, the Americans with Disabilities Act (ADA) and the Supreme Court’s decision in *Olmstead v. LC* have been important drivers of positive change, creating responsive, accessible community-based services that reduce mental health crises resulting in hospitalizations, police involvement or incarceration. H.R. 2646 not only fails to build upon these precedents, but in many ways it takes us in the wrong direction.” Bernstein said.

The bill continues to promote institutional and coercive approaches to inpatient and outpatient treatment instead of investment in effective community-based mental health services. It would also eliminate or drastically cut millions of dollars from important programs overseen by the Substance Abuse and Mental Health Services Administration (SAMHSA).

“We already know what works,” said Jennifer Mathis, Deputy Legal Director. “Proven programs such as supportive housing, Assertive Community Treatment (ACT), peer support, mobile crisis services, and supported employment have extremely successful outcomes, including for people with the most significant mental health needs. The problem is that these services are not widely available to people who need them. This bill would make it even more difficult to take these services to scale, as it would invest mental health dollars elsewhere,” Mathis said.

The bill makes discriminatory changes to the Health Insurance Portability and Accountability Act (HIPAA), reducing the privacy rights of individuals with mental illnesses and discouraging them from seeking treatment.

The bill would also eliminate much of the critical work that the Protection and Advocacy for Individuals with Mental Illness (PAIMI) program does. Protection and Advocacy (P & A) agencies have been responsible for significant improvements in mental health systems across the country. H.R. 2646 would strip them of most of their authority. The bill would prohibit the PAIMI program from providing advocacy and legal representation to help people with mental illness with a host of important issues, including housing, employment, education, community living, Medicaid benefits. Advocacy concerning anything other than abuse and neglect would be barred.

“As we near the 25th anniversary of the ADA, we urge Congress to reaffirm the ADA’s goal of providing people with psychiatric disabilities access to responsive, effective services in the community and to reject any legislation that would undermine that goal, ” said Alison Barkoff, Director of Advocacy.