

# Congress of the United States

## Washington, DC 20515

May 21, 2021

The Honorable Xavier Becerra  
Secretary  
U.S. Department of Health & Human Services  
Hubert H. Humphrey Building  
200 Independence Ave, S.W.  
Washington, DC 20201

Dear Secretary Becerra:

We write you to urge the Department of Health & Human Services to include mental health and substance use care providers in the public health workforce allotment provided under Section 2501 of the recently enacted American Rescue Plan Act. This historic expansion needs to fully integrate behavioral health providers, otherwise we will undercut our Nation's recovery and continue the long-standing and stigmatizing separation of mental health from physical health.

Section 2501 appropriates \$7.66 billion “to carry out activities related to establishing, expanding, and sustaining a public health workforce....” and positions include “case investigators, contract tracers, social support specialists, community health workers, public health nurses, disease intervention specialists, epidemiologists, program managers, laboratory personnel, informaticians, communication and policy experts, and any other positions as may be required to prevent, prepare for, and respond to COVID-19.” Behavioral health providers, including peer support specialists and clinicians, would clearly fulfill this latter requirement.

The effects of COVID-19 have been well documented by the Centers for Disease Control and Prevention and further shows the immediate need for this action. The prevalence of behavioral health problems doubled from about 20 percent to 40 percent in 2020, however, the capacity of the behavioral health system did not change. Prior to the public health emergency, the system served about 50 percent of those in need, but that percentage has since declined to about 25 percent. Further, these services are not distributed uniformly. An estimated 85 percent of counties have inadequate or no behavioral health services, 63 percent do not have a psychiatrist, and 40 percent do not have Medication Assisted Treatment waived provider.

It is estimated that funding from Section 2501 can support around 100,000 new positions. We strongly recommend that one-third of these new public health positions be devoted to behavioral health. This number would permit each small county to add five behavioral health providers, each mid-sized county to add 10 providers, and each large county to add 20 providers. County

public health workers should also receive basic training for the screening of common mental health and substance use disorders, which would allow them to identify struggling Americans and refer them to services.

Placing behavioral health positions in local health departments would also produce further benefits. Integration would finally recognize that mental health and public health are inseparable, enhance our capacity to address the negative social and physical determinants of health that cause trauma and behavioral health problems, as well as deploy more effective upstream prevention strategies. COVID-19 has greatly increased depression, anxiety, and substance use, which factor into job performance, community health, and family well-being. Economic recovery will be contingent upon addressing behavioral health conditions in the entire population.

Thank you for your prompt consideration of this serious matter. We look forward to working with you to address the ongoing mental health crisis.

Sincerely,



Grace F. Napolitano  
Member of Congress



Marcy Kaptur  
Member of Congress



Barbara Lee  
Member of Congress

Raúl M. Grijalva  
Member of Congress

Judy Chu  
Member of Congress

Albio Sires  
Member of Congress

Brian Fitzpatrick  
Member of Congress

Sheila Jackson Lee  
Member of Congress

Diana DeGette  
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Paul Tonko  
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Alan Lowenthal  
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Derek Kilmer  
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Bill Foster  
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Susie Lee  
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Ann McLane Kuster  
Member of Congress

Tom O'Halleran  
Member of Congress

Jerrold Nadler  
Member of Congress

Bonnie Watson Coleman  
Member of Congress