

June 2, 2022

The Honorable Frank Pallone  
Chairman  
House Energy and Commerce Committee  
2125 Rayburn House Office Building  
Washington, D.C. 20015

The Honorable Cathy McMorris Rodgers  
Ranking Member  
House Energy and Commerce Committee  
2322 Rayburn House Office Building  
Washington, D.C. 20015

Dear Chairman Pallone and Ranking Member McMorris Rodgers,

On behalf of The ERISA Industry Committee (ERIC), thank you for your leadership in introducing and advancing the *Restoring Hope for Mental Health and Well-being Act* (H.R. 7666) that would reauthorize Substance Abuse and Mental Health Services Administration and Health Resources and Services Administration programs to address the national mental health and substance use disorder crises. We appreciate your leadership in recognizing the importance of these programs and addressing American workers' and children's mental and behavioral health needs.

ERIC is a national nonprofit organization exclusively representing the largest employers in the United States in their capacity as sponsors of employee benefit plans for their nationwide workforces. With member companies that are leaders in every economic sector, ERIC is the voice of large employer plan sponsors on federal, state, and local public policies impacting their ability to sponsor benefit plans and to lawfully operate under ERISA's protection from a patchwork of different and conflicting state and local laws, in addition to federal law.

ERIC's large employer member companies, seeing a rise in mental health and substance use disorder cases during the COVID-19 pandemic, worked quickly to expand access to mental and behavioral health services for employees and their beneficiaries. Your legislation coincides with many of the policies proposed in our report "[Prioritizing Employee Mental Health: Solutions for Congress](#)." We are greatly supportive of the specific measures in your legislation that would:

- **Integrate multiple health care disciplines through collaboration to provide patients with higher quality care.** We appreciate the legislation including the *Collaborate in an Orderly and Cohesive Manner Act* (H.R. 5218), as it will ease a transition for coordinated care between interdisciplinary teams and promote new programs within health care settings that focus on evidenced-based integrated behavioral health methods. It will also allow grants to eligible entities to initiate full integration and collaboration in clinical practices, and require reports evaluating the progress of patient outcomes and access.

- **Establish a Behavioral Health Crisis Coordinating Office to recommend best practices and offer support for health care providers assisting patients in a mental health crisis.** Patients increasingly rely on primary care providers, who oversee their “medical homes,” to provide mental health care, including the prescribing of various medications. Patients also rely on other health care professionals, especially in remote and rural areas. Training and guidance put forth by the Office will improve the coordination of care and empower health care professionals that are not mental health professionals to treat patients in their time of need better.
- **Research and evaluate evidence-based programs within the National Mental Health and Substance Use Policy Laboratory.** The bill can help the Policy Lab to evaluate current models that will benefit from further development and scaling to improve care for employees, retirees, and families. The additional funding appropriated to the Policy Lab will allow the Interdepartmental Serious Mental Illness Coordinating Committee to offer recommendations on how best to care for adults with a serious mental illness or children with a serious emotional disturbance.
- **Evaluate data collection and public reporting on mental health and substance abuse grants and programs.** Plan sponsors work to ensure that beneficiaries have access to high quality care. This includes building networks that eschew dangerous, ineffective providers and facilities with mental health and substance use disorder programs. The legislation you introduced would require grant program recipients for outpatient mental health treatment to evaluate their programs’ cost savings, public health outcomes, and participant satisfaction. This data transparency will ensure that these are quality programs that appropriately use grant dollars – and will inform plan sponsors and patients in making good decisions about providers and sites of care.
- **Establish a Center of Excellence for Eating Disorders.** Centers of Excellence (COE) programs are successful efforts utilized in employer-sponsored coverage to encourage better outcomes and have the potential to transform care, advance the U.S. health care system beyond outmoded fee-for-service models, and encourage provider competition based on quality and improved outcomes. The center will provide training and technical assistance for primary care and behavioral health providers, but it also includes non-clinical community support workers, which will encourage care collaboration. Employers have long requested government assistance in promulgating comparative effectiveness and best practices information regarding eating disorder treatments, and establishing a COE program will serve to meet this critical objective.
- **Updates Policies Regarding Opioid Treatment Programs.** The legislation eliminates the requirement that an opioid treatment program only admits an individual for treatment if the individual has been addicted to opioids for at least one year. The removal of this policy will promote patients’ timely access to care so they can receive treatment before the condition becomes more acute.
- **Increase education funding for provider mental and behavioral health programs.** The bill will help to address the nation’s mental and behavioral health provider shortage by incentivizing more health care workers to train in mental and behavioral health disciplines, and extending funding of current programs prioritizing mental and behavioral health.

As the *Restoring Hope for Mental Health and Well-being Act* progresses through the legislative process, we hope to work with you to add even more solutions outlined in our report that would benefit American workers and their families. We urge you to advance policies to:

- Improve patients' mental health
- Promote access
- Drive value
- Save money for taxpayers and the federal government

We have been proud to work with committee members on policies such as:

- Interstate licensure for providers
- Expanded access to telehealth
- Care coordination

These policies would truly transform the health care system – and we hope to see some of these solutions included in a final bill before reaching conference with the Senate.

ERIC and our large employer member companies appreciate greatly that your bill focuses on helping patients. Employers support many innovative solutions in the behavioral and mental health space, and we applaud you for focusing on areas of consensus, rather than pursuing partisan and unproductive proposals designed to cast blame and aspersions, rather than improve care for patients.

ERIC is proud to support your legislation, as we believe it will increase access to mental health providers and programs, improve mental and behavioral health care, and have a meaningful impact on patients' lives. We look forward to supporting your efforts on this significant issue, and working to pass this bill into law.

Sincerely,



James P. Gelfand  
Executive Vice President  
Public Affairs