THE BEHAVIORAL HEALTH IT ACT (H.R. 2957)
COORDINATING CARE, LOWERING COSTS

The Behavioral Health Information Technology Act (H.R. 2957) would extend financial incentives for the meaningful use of electronic health records to specified mental health and addiction treatment providers and facilities. This bipartisan legislation corrects an oversight in the 2009 HITECH Act that excluded these key providers of mental health and substance use treatment services from much needed funding to enhance quality of care. Specifically, this bill would:

- Extend Medicare and Medicaid reimbursement for meaningful use of electronic health records (EHRs) to psychologists and mental health professionals who provide clinical care at psychiatric hospitals, mental health treatment facilities, and substance abuse treatment facilities.
- Make mental health and addiction treatment providers eligible for HITECH Act technical assistance, which will enhance health information technology (IT) infrastructure, facilitate medical staff training, and improve the exchange of health information between mental health providers and other healthcare providers.

Why do we need the Behavioral Health IT Act? Individuals with mental health and substance use conditions are in dire need of care coordination. A recent study from the Substance Abuse and Mental Health Services Administration points to strikingly high prevalence of cancer, heart disease, diabetes, and asthma among Americans served by the public mental health and addiction treatment system. Health IT is the bedrock of any effort to coordinate and integrate care for this population. Yet, mental health and addiction treatment providers face significant financial challenges when trying to adopt comprehensive EHR systems, and fewer than 30% have successfully implemented full or partial EHR systems.

If mental health and addiction treatment providers cannot adopt health IT at a rate comparable to primary care facilities, hospitals, and physicians’ offices, it will soon become impossible to coordinate clinical care. The federal government’s efforts to reduce health spending through Medicaid health homes and Medicare accountable care organizations, and state efforts to enroll dually eligible individuals in integrated managed care settings, will be compromised if behavioral health providers remain excluded from the HITECH Act.

Integrating mental health and addiction treatment providers into EHR networks will save $1.7 billion over 10 years by reducing adverse drug-to-drug interactions and averting emergency room visits and hospital admissions. A January 2013 Johns Hopkins University study found that hospital readmission rates for people with mental illnesses fell by 39% when other mental health professionals, like psychologists, were given electronic access to inpatient psychiatric records. Among its strategies to promote meaningful use of health IT, the Office of the National Coordinator’s Health IT Strategic Plan includes support for health IT adoption in behavioral health settings, noting that, “the ability to integrate mental health data into the primary care and related safety net systems is essential for coordinating care.”
Please cosponsor the Behavioral Health IT Act (H.R. 2957)

Behavioral Health IT Act Co-sponsors (11)

House Co-sponsors:

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