



APPROPRIATIONS RECOMMENDATIONS

FOR FISCAL YEAR 2023

The Mental Health Liaison Group (MHLG) is a coalition of national organizations from across the entire behavioral health community that represent individuals living with mental health and substance use conditions, family members, mental health and substance use providers, advocates and other stakeholders committed to strengthening Americans' access to mental health and substance use prevention, treatment and recovery care. As trusted leaders in the field, our 100+ member organizations are dedicated to elevating the national conversation around mental health and substance use and expanding care for people in need.

What follows are appropriations recommendations for mental health and substance use policies and programs, all of which are supported by the majority of the Mental Health Liaison Group's full voting members.

For many years, our nation has faced a worsening mental health and substance use crisis as far too many Americans face a critical lack of access to lifesaving treatment and care. Growing demands on a strained workforce, financial barriers and stigma related to treatment have contributed to this epidemic. The COVID-19 pandemic has greatly exacerbated this crisis, resulting in a dramatic increase in the number of individuals experiencing symptoms of anxiety, depression and suicidal ideation, as well as significant growth in substance use, including opioid misuse.

The MHLG commends Congress for devoting substantial funds in recent years for mental health and substance use treatment. However, significant additional federal funding is critical to address the ongoing mental health and substance use crisis in our country. We welcome the opportunity to work with you to address – in a serious and profound way – the mental health and substance use challenges faced by the American people.

ENDORISING ORGANIZATIONS

2020 Mom
American Academy of Pediatrics
American Association for Marriage and Family Therapy
American Association for Psychoanalysis in Clinical Social Work
American Dance Therapy Association
American Foundation for Suicide Prevention
American Group Psychotherapy Association
American Mental Health Counselors Association
American Nurses Association
American Occupational Therapy Association
American Psychiatric Association
American Psychological Association
Centerstone*
Children and Adults with Attention-Deficit/Hyperactivity Disorder
Clinical Social Work Association
Confederation of Independent Psychoanalytic Societies
Depression and Bipolar Support Alliance
Eating Disorders Coalition for Research, Policy & Action
Girls Inc.*
Global Alliance for Behavioral Health & Social Justice
International OCD Foundation
International Society of Psychiatric Mental Health Nurses*
The Jed Foundation*
The Jewish Federations of North America
The Kennedy Forum
Maternal Mental Health Leadership Alliance
Mental Health America
NAMI, National Alliance on Mental Illness
The National Alliance to Advance Adolescent Health*
National Association for Children's Behavioral Health
National Association for Rural Mental Health
National Association of County Behavioral Health and Developmental Disability Directors
National Association of Pediatric Nurse Practitioners*
National Association of Peer Supporters (N.A.P.S.)*
National Association of Social Workers
National Association of State Mental Health Program Directors
National Board for Certified Counselors
National Council for Mental Wellbeing
National Eating Disorders Association
National Federation of Families
National Health Care for the Homeless Council*
National League for Nursing
Network of Jewish Human Service Agencies*
Psychotherapy Action Network*
REDC Consortium
RI International
Sandy Hook Promise
SMART Recovery
Treatment Communities of America
The Trevor Project
Trust for America's Health
Wounded Warrior Project*

**Denotes Affiliate Membership*

SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION (SAMHSA)

(Dollars in millions)

Community Mental Health Services Block Grant (MHBG)

FY 2022 Enacted	FY 2023 MHLG Request
\$857.571	\$1,653.0 (+\$795.429 vs FY22)
<p>The MHBG awards funding to states to supplement existing mental health services and/or to fund new activities. MHLG seeks an additional \$795 million to augment funding received during the COVID-19 pandemic that will help states address ongoing mental health needs resulting from the pandemic’s impact on mental health. In particular, MHLG seeks an increase from the current five percent set aside to a ten percent set aside (equivalent to \$165.3 million) for crisis services to support state implementation of the components of the Crisis Now model to bolster a comprehensive crisis system. The set-aside would aid development of a full 988 crisis continuum of care in states that includes mobile crisis teams and crisis stabilization facilities. Additionally, MHLG seeks a new ten percent set aside (equivalent to \$165.3 million) for prevention and early intervention, similar to the Substance Abuse Prevention and Treatment Block Grant set-aside. This would include growing school-based and community initiatives to address mental health before a person is deemed SED/SMI, which is the current statutory language for using block grant funds.</p>	

Development and Implementation of a 988 and Crisis Continuum of Care

In July 2022, 988 will become the nationwide number to access trained crisis counselors via the National Suicide Prevention Lifeline network. To support state implementation of SAMHSA’s National Guidelines for Behavioral Health Crisis Care, a model for crisis services includes someone to talk to, someone to respond and somewhere to go, federal, state and local leaders need to invest in this system to ensure that every person who calls 988 gets the help they need. This includes answering 988 calls to connect people to community resources, expanding mobile crisis teams to provide an alternative to law enforcement response to crises and supporting crisis receiving and stabilization facilities. Below are MHLG recommendations to support successful implementation of a 988 system:

988 and Behavioral Health Crisis Services

Program Title	FY 2022 Enacted	FY 2023 MHLG Request
National Suicide Prevention Lifeline	\$101.621	\$139.691 (+38.07 vs FY22) [†]
<p>The National Suicide Prevention Lifeline (Lifeline) was established by Congress to effectively reach and serve all persons who could be at risk for suicide through a national network of crisis call centers. In July 2022, the easily accessible 988 crisis hotline number will be routed through the Lifeline as a resource for suicide prevention and mental health crisis support. The Lifeline provides nationalized services, including the national call backup network, the chat and text network, and the Spanish subnetwork. Twenty percent of calls are currently directed to the call backup network and 100% of chats and texts flow into the chat and text network. SAMHSA reported to Congress in December 2021 that call, text and chat volume were projected to increase from 3.65 million contacts (estimate) in 2021 to a projected 7.6 million contacts in the full year following 988 implementation (through July 2023). MHLG urges Congress to adequately respond to this surge in demand by appropriately resourcing the national Lifeline network operations, including the nationalized services. In addition, MHLG requests \$29.691 million under the Lifeline program to be directed to the provision of LGBTQ specialized services within the Lifeline program.</p>		
Funding for Local/Regional 988/Lifeline Crisis Call Centers	--	\$560.0 (+\$560.0 vs FY22) [†]
<p>There is an increasing need to ensure call centers answering 988 calls are equipped to meet the projected growth in Lifeline contacts. This funding would expand the capacity of local and regional crisis call centers with a goal to answer 90% of all incoming contacts, including calls, chats, and texts, in their region. Local call center capacity must grow to meet the nearly doubling of demand that is projected in the first full year following 988 implementation (through July 2023), which will better link those in need with local and robust behavioral health crisis care services and support increased follow-up services. The funding assumption is based 6,840,000 contacts answered locally at the average of \$82 cost per contact.</p>		
Behavioral Health Crisis and 988 Coordinating Office	\$5.0	\$10.0 (+\$5.0 vs FY22)
<p>To connect all of these efforts, MHLG requests \$10 million for the Office of the Assistant Secretary for Mental Health and Substance Use to coordinate a crisis care system encompassing nationwide standards and data analysis to expand the capacity of and access to local crisis call centers, mobile crisis care, crisis stabilization, and psychiatric emergency services.</p>		
988 Public Awareness Campaign	--	\$200.0 (+\$200.0 vs FY22)
<p>In a December 2021 report to Congress, SAMHSA identified a recommendation to “launch a large-scale public awareness and communications campaign” to execute on the goal of strengthening and expanding the Lifeline capabilities. The report to Congress notes, “Similar past campaigns have costed between \$125 million and \$225 million.” MHLG requests robust funding to ensure 988 awareness efforts can be implemented during FY 2023 that includes targeted messaging for marginalized and high-risk populations, engagement with key partners, audience research, and content and strategy development.</p>		

[†]The funding needs of the Lifeline network are contingent upon local and regional Lifeline crisis centers being fully resourced. Any reduction in funding for local and regional Lifeline crisis centers would prevent these centers from meeting the 90% answer rate goal and require a proportional increase in the Lifeline network operations to ensure the backup networks have sufficient capacity to answer the contacts not answered by the local centers.

Mental Health Crisis Response Partnership Program

FY 2022 Enacted	FY 2023 MHLG Request
\$10.0	\$100.0 (+\$90.0 vs FY22)
<p>Mobile crisis teams are critical to provide an in-person response to a person in crisis when more assistance is needed than can be provided by a 988 crisis call counselor. Currently, only a small portion of communities have mobile crisis teams, made up of health care and behavioral health care professionals, available. MHLG requests an increase to the newly established Mental Health Crisis Response Partnership Pilot Program to help communities create mobile crisis response teams that divert people in mental health crisis from law enforcement to behavioral health teams.</p>	

Certified Community Behavioral Health Clinics (CCBHC) Expansion Grants

FY 2022 Enacted	FY 2023 MHLG Request
\$315.0	\$561.0 (+\$246.0 vs FY22)
<p>Since launching in 2017, CCBHCs have dramatically improved access to a comprehensive range of mental health and substance use disorder (SUD) services to vulnerable individuals, including but not limited to 24/7 crisis services. Throughout the pandemic, CCBHCs have been on the front lines ensuring millions of Americans continue to receive medically necessary mental health and SUD services. CCBHCs are a successful, integrated, and modern way of delivering 21st century mental health and substance use care to patients, including crisis services as part of the new 988 crisis system. The FY 2023 allocation will allow for both the continued reach of the grant program to more states while allowing previous grantees to reapply and continue their successful work in communities across the country.</p>	

Substance Use Priorities

Substance Abuse Prevention and Treatment Block Grant (SAPT)

FY 2022 Enacted	FY 2023 MHLG Request
\$1,908.079	\$3,008 (+\$1,099.921 vs FY22)
<p>The SAPT block grant distributes funds to eligible states and territories to plan, carry out and evaluate substance use disorder prevention, treatment, and recovery support services for individuals, families, and communities impacted by substance use disorder. In 2015, SAPT accounted for approximately 32 percent of total state substance use agency funding and 23 percent of total state substance use prevention and public health funding. Outcome measures from the most recent year for which data is available show that the SAPT has been successful in expanding treatment capacity by supporting approximately two million admissions to treatment programs receiving public funding.</p>	

State Opioid Response Grants (SOR)

FY 2022 Enacted	FY 2023 MHLG Request
\$1,500.0	\$2,000.0 (+\$500.0 vs FY22)
<p>The State Opioid Response Grant (SOR) program supports evidence-based prevention, treatment and recovery support services to address stimulant misuse and use disorders. MHLG requests additional increases in FY 2023 to address the opioid crisis by increasing access to medication-assisted treatment, reducing unmet treatment needs across the country and reducing opioid overdose-related deaths.</p>	

PARITY ENFORCEMENT INITIATIVES

(Dollars in millions)

Program Title	Agency	FY2022 Enacted	FY2023 MHLG Request
Employee Benefits Security Administration	Department of Labor	--	\$27.5 (+\$27.5 vs FY22)
Centers for Medicare & Medicaid Services for grants to states	Department of Health and Human Services	--	\$125.0 (+\$125.0 vs FY22)
<p>These requests would fund continued enforcement of parity requirements in Medicaid and CHIP programs, the ACA Marketplace, and most health care coverage programs subject to the Mental Health Parity and Addiction Equity Act of 2008. Despite agency efforts to work with states to implement parity over recent years, there remain issues with parity compliance and transparency across health care coverage programs. The MHLG requests additional appropriations to ensure the effective implementation and monitoring of insurance parity.</p>			

NATIONAL INSTITUTES OF HEALTH (NIH)

(Dollars in millions)

National Institute of Mental Health (NIMH)

FY 2022 Enacted	FY 2023 MHLG Request
\$2,140.976	\$2,248.025 (+107.049 vs FY22)
<p>Scientific advances have led to astounding discoveries about the brain and treatment for mental health and substance use disorders. Continued investments in research will aid in developing rapid, effective treatments for behavioral health disorders and facilitate early identification and intervention. MHLG requests that NIMH receive a five percent increase comparable to other Institutes within NIH.</p>	

HEALTH RESOURCES AND SERVICES ADMINISTRATION (HRSA)

(Dollars in millions)

Behavioral Health Workforce Education and Training (BHWET) Program

FY 2022 Enacted	FY 2023 MHLG Request
\$123.0	\$225.8 (+\$102.8 vs FY22)
<p>BHWET expands mental and behavioral health services for underserved populations by supporting pre-degree clinical internships and field placements for doctoral-level psychology students, master's-level social workers, school social workers, professional and school counselors, psychiatric-mental health nurse practitioners, occupational therapists, behavioral pediatrics, peer support specialists, training programs in psychiatry, substance use disorder prevention, and marriage and family therapists.</p>	

Pediatric Mental Health Care Access (PMHCA) Program

FY 2022 Enacted	FY 2023 MHLG Request
\$11.0	\$14.0 (+\$3.0 vs FY22)
<p>The Pediatric Mental Health Care Access (PMHCA) Program supports state programs that help pediatric primary care providers (PCPs) fill the role of therapists and psychiatrists. Pediatric PCPs have played a critical part in screening and diagnosing children's mental health conditions; however, many PCPs do not feel they have sufficient training to fully meet their patients' mental health needs. These programs provide PCPs with rapid clinical psychiatric consultations, education, in-depth training, or referrals for further mental health services for the patient when necessary. By integrating mental health with primary care, PMHCA has significantly increased the number of children that are able to receive mental health services.</p>	

School-Based Health Centers

FY 2022 Enacted	FY 2023 MHLG Request
\$30.0	\$300.0 (+\$270.0 vs FY22)
<p>School-based health centers (SBHCs) provide comprehensive and integrated health, mental health care, and social services. This increase would allow for specific funding aimed at enhancing mental health services. Behavioral health services were the number one source of care sought by SBHC patients prior to the pandemic and the need has dramatically increased in the wake of COVID-19. Throughout the pandemic, SBHCs have utilized various methods of maintaining these crucial services through telehealth (including audio only), community health workers, peer to peer support networks, etc. MHLG urges Congress to recognize the critical role that SBHCs play in providing access to behavioral and mental health services.</p>	

Screening and Treatment for Maternal Depression and Related Behavioral Disorders Program (MDRBD)

FY 2022 Enacted	FY 2023 MHLG Request
\$6.5	\$11.5 (+\$5.0 vs FY22)
<p>The MDRBD Program supports state programs that help primary care providers (PCPs) to screen and treat pregnant and postpartum patients for mental health conditions, which are the most common complication of pregnancy and childbirth. These programs include education/training for providers and staff; real-time psychiatric consultation; and resources and referrals. In FY20, MDRBD programs trained 1,245 providers and screened 24,518 women for depression, 14,978 women for anxiety, and 12,928 for substance use disorders.</p>	

CENTERS FOR DISEASE CONTROL AND PREVENTION (CDC)

(Dollars in millions)

Mental Health and Substance Use Disorder Research and Programs

Program Title	FY 2022 Enacted	FY 2023 MHLG Request
Suicide Prevention Activities	\$20.0	\$40.0 (+\$20.0 vs FY22)
Eating Disorders Awareness Program	--	\$3.0 (+\$3.0 vs FY22)
Adverse Childhood Experiences	\$7.0	\$15.0 (+\$8.0 vs FY22)
Adolescent Mental Health Coordinating Center	--	\$25.0 (+\$25.0 vs FY22)
Firearm Injury and Mortality Prevention Research	\$12.5	\$35.0 (+\$22.5 vs FY22)
Healthy Schools Program	\$15.4	\$50.0 (+\$34.6 vs FY22)
<p>The increased funding requests made by the MHLG above reflect the need for further research and surveillance efforts and to test and implement innovative prevention and recovery strategies. New funding requests for the Eating Disorders Awareness Program and Adolescent Mental Health Coordinating Center were both mentioned in the FY 22 spending agreement but not appropriated. The Eating Disorders Awareness Program would fund an awareness campaign through the Division of Nutrition, Physical Activity and Obesity to provide education and implementation of proper prevention strategies. The Adolescent Mental Health Coordinating Center would leverage existing CDC activities dedicated to adolescent mental health to develop and implement national goals and a national strategy to improve adolescent mental wellbeing and advance equity.</p>		

Department of Education

(Dollars in millions)

Program Title	FY 2022 Enacted	FY 2023 MHLG Request
Mental Health Services Professional Demonstration Grants	\$55.0	\$500.0 (+\$445.0 vs FY22)
School-Based Mental Health Services Grants	\$56.0	\$500.0 (+\$444.0 vs FY22)
<p>The extent of the youth mental health crisis is staggering. With about 13,800 school districts serving over 55 million students, \$1 billion is needed to support needed mental health professionals and services in schools. Schools are the second most common place where children and youth receive mental health care, far outpacing primary care. Schools reduce many barriers to accessing mental health treatment and allow for an efficient public health approach that allows for early and effective interventions.</p>		

The Mental Health Liaison Group requests **\$10.7 billion for SAMHSA for FY 2023** (+\$4.2 billion over FY 22 enacted) to reflect the rising needs of Americans living with mental illness and substance use disorders in the wake of the COVID-19 pandemic. These programs are vital to the intervention, treatment and recovery supports necessary for Americans living with mental health and substance use conditions.

We ask that you continue supporting such line items with this nominal increase in FY 2023.

ADDITIONAL FY 2023 LABOR-HHS-EDUCATION APPROPRIATIONS RECOMMENDATIONS

(Dollars in millions)

Program	FY 2022 Enacted	FY 2023 MHLG Request
Substance Abuse and Mental Health Services Administration		
PATH Homelessness Program (Center for Mental Health Services)	\$64.635	\$70.0 (+\$5.365 to FY22)
Protection and Advocacy for Individuals with Mental Illness (PAIMI) (Center for Mental Health Services)	\$38.0	\$40.0 (+\$2.0 vs FY22)
Project AWARE State Grants (Center for Mental Health Services)	\$120.001	\$244.0 (+\$123.999 vs FY22)
Mental Health Awareness Training Grants (Center for Mental Health Services)	\$24.963	\$64.0 (+\$39.037 vs FY22)
National Child Traumatic Stress Initiative (Center for Mental Health Services)	\$81.887	\$150.0 (+\$68.113 vs FY22)
Primary and Behavioral Health Integration (PBHCI) Technical Assistance (Center for Mental Health Services)	\$1.99	\$3.0 (+1.01 vs FY22)
Primary and Behavioral Health Integration (PBHCI) Grants (Center for Mental Health Services)	\$52.877	\$103.0 (+\$50.123 vs FY22)
Assertive Community Treatment for Individuals with Serious Mental Illness (Center for Mental Health Services)	\$9.0	\$25.0 (+\$16.0 vs FY22)
Healthy Transitions (Center for Mental Health Services)	\$29.451	\$50.0 (+\$20.549 vs FY22)
Practice Improvement and Training Programs (Science and Service)	\$7.828	\$9.8 (+\$1.972 vs FY22)
Minority Fellowship Program (Health Surveillance and Program Support)	\$16.169	\$25.0 (+\$8.831 vs FY22)
Health Resources and Services Administration		
Graduate Psychology Education (GPE) Program	\$20.0	\$30 (+\$10.0 vs FY22)
Maternal Mental Health Hotline	\$4.0	\$7.0 (+\$3.0 vs FY22)
Primary Care Training and Enhancement Grant Program: Eating Disorders Screening, Brief Intervention, and Referral Training	\$49.9	\$50.9 (+\$1.0 vs FY22)
School Mental Health Care Access Program	--	\$5.0 (+\$5.0 vs FY22)

FY 2023 COMMERCE-JUSTICE-SCIENCE RECOMMENDATIONS

(Dollars in millions)

Program	FY 2022 Enacted	FY 2023 MHLG Request
Department of Justice		
Crisis Stabilization and Community Reentry Grant Program	\$10.00	\$10.0 (level to FY22)
STOP School Violence Act	\$135.0	\$140.00 (+\$5.0 vs FY22)
Mentally Ill Offender Treatment and Crime Reduction Act	\$40.0	\$50.0 (+\$10.0 vs FY22)
Improving Suicide Prevention Resources for States' Extreme Risk Protection Orders	--	\$21.0 (+\$21.0 vs FY22)

Endorsing Organizations: American Academy of Pediatrics, American Association for Marriage and Family Therapy, American Association for Psychoanalysis in Clinical Social Work, American Dance Therapy Association, American Foundation for Suicide Prevention, American Group Psychotherapy Association, American Mental Health Counselors Association, American Occupational Therapy Association, American Psychiatric Association, American Psychological Association, Children and Adults with Attention-Deficit/Hyperactivity Disorder, Clinical Social Work Association, Confederation of Independent Psychoanalytic Societies, Depression and Bipolar Support Alliance, Eating Disorders Coalition for Research, Policy & Action, Global Alliance for Behavioral Health & Social Justice, International OCD Foundation, International Society of Psychiatric Mental Health Nurses*, The Kennedy Forum, Maternal Mental Health Leadership Alliance, Mental Health America, NAMI--National Alliance on Mental Illness, The National Alliance to Advance Adolescent Health*, National Association for Children's Behavioral Health, National Association for Rural Mental Health, National Association of County Behavioral Health and Developmental Disability Directors, National Association of Pediatric Nurse Practitioners*, National Association of Peer Supporters (N.A.P.S.)*, National Association of Social Workers, National Association of State Mental Health Program Directors, National Council for Mental Wellbeing, National Eating Disorders Association, National Federation of Families, National League for Nursing, Network of Jewish Human Service Agencies*, Psychotherapy Action Network*, REDC Consortium, RI International, Sandy Hook Promise, SMART Recovery, Treatment Communities of America, Trust for America's Health, and Wounded Warrior Project*.

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FY 2023 MILITARY CONSTRUCTION-VETERANS AFFAIRS RECOMMENDATIONS

(Dollars in millions)

Program	FY 2022 Enacted	FY 2023 MHLG Request
Department of Veterans Affairs		
Veterans' Crisis Line	\$255.9	\$255.9 (level to FY22)
Staff Sergeant Parker Gordon Fox Suicide Prevention Grant Program	\$55.6	\$55.7 (+\$0.01 vs FY22)
Health Professional Scholarship Program	\$20.3	\$39.8 (+\$19.5 vs FY22)
Education Debt Reduction Program	\$145.0	\$160.0 (+\$15.0 vs FY22)
Employee Incentive Scholarship Program	\$2.9	\$3.6 (+\$0.7 vs FY22)

Endorsing Organizations: American Academy of Pediatrics, American Association for Marriage and Family Therapy, American Association for Psychoanalysis in Clinical Social Work, American Dance Therapy Association, American Foundation for Suicide Prevention, American Group Psychotherapy Association, American Mental Health Counselors Association, American Occupational Therapy Association, American Psychiatric Association, American Psychological Association, Clinical Social Work Association, Confederation of Independent Psychoanalytic Societies, Depression and Bipolar Support Alliance, Eating Disorders Coalition for Research, Policy & Action, Global Alliance for Behavioral Health & Social Justice, International OCD Foundation, International Society of Psychiatric Mental Health Nurses*, The Kennedy Forum, Maternal Mental Health Leadership Alliance, Mental Health America, NAMI—National Alliance on Mental Illness, The National Alliance to Advance Adolescent Health*, National Association for Children's Behavioral Health, National Association for Rural Mental Health, National Association of County Behavioral Health and Developmental Disability Directors, National Association of Pediatric Nurse Practitioners*, National Association of Peer Supporters (N.A.P.S.)*, National Association of Social Workers, National Association of State Mental Health Program Directors, National Council for Mental Wellbeing, National Eating Disorders Association, National Federation of Families, National League for Nursing, Network of Jewish Human Service Agencies*, Psychotherapy Action Network*, REDC Consortium, RI International, Sandy Hook Promise, SMART Recovery, Treatment Communities of America, Trust for America's Health, and Wounded Warrior Project*.

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