Proposed by:

Secretary of Health & Human Services Vita (I-PR)

Cosponsors:

Congressman Bo (D-FL), Secretary of State S4L (R-CA), DHS Secretary Harris (R-MD), Congressman Bob (D-FL), Vice President Hull (D-NY), Secretary of the Interior Waffles (D-RI), Congressman CollinMatthew (D-IN), Congressman Cucag (R-FL), Congressman Jones (I-NC), Environment Secretary Enshtein (R-WA), Congressman Pluribus (D-IN), Attorney General Helvin (R-MO), Congresswoman Emma (I-OR), Congressman Spiral (I), Chief of Staff McKenna (D-CA), Congressman Kristensen (D-MA), Congressman Ogilvie (R-NV), Congressman Jason (D-MA)

Title: An Act to Restore the Mental Healthcare System

<u>Preamble:</u> Whereas 61 million Americans suffer from mental illness every year; whereas deinstitutionalization efforts ignored the needs of 2.2 million patients with chronic mental illness; whereas homelessness and incarceration rates rise as untreated conditions lead to various crimes, including mass shootings; whereas the 1963 Community Mental Health Centers Construction Act, 1965 Social Security Amendments, and 1981 Omnibus Budget Reconciliation Act undercut funding for psychiatric hospitals; whereas 21 states cut their mental health budgets by \$4.35 billion between 2009 and 2011 alone; whereas the failure of more than 650 community health centers to materialize led many in-patients to fall through the cracks. This Act will take steps to reduce the negative effects of deinstitutionalization.

Be it hereby enacted by the Virtual Congress:

Section 1: A new patient advisory agency titled the 'Mental Health Service Administration' shall be established, under the control of the U.S. Department of Health and Human Services.

<u>Subsection 1A:</u> The agency is responsible for setting minimum standards for the safety and efficacy of talk and behavioral treatments, and for providing counsel on access to mental health services in both psychiatric hospitals and community centers.

<u>Subsection 1B:</u> Patients with serious and/or chronic mental illness and patients who do not have family support are hereby granted full access to psychiatric hospitals, and must receive long-term care as requested.

<u>Subsection 1C:</u> Court sentences for the mentally ill shall only consist of care at psychiatric hospitals as needed, if the convicted person's conditions match those detailed in Subsection 1B; if not, they shall be transferred to community centers.

Section 2: A psychiatric hospital with long-term care facilities and psychiatric beds shall be built per 125,000 people if not currently in place, in accordance with state policy.

<u>Subsection 2A:</u> The hospitals shall be placed under state jurisdiction and shall adjust ward sizes to accommodate all patients with the conditions outlined in Subsection 1B, as determined by state health department databases.

<u>Subsection 2B:</u> The rest of the community health centers planned under the 1963 Community Mental Health Centers Construction Act shall be constructed, with provisions for prevention, early treatment, and ongoing care.

<u>Subsection 2C:</u> \$300 million shall be allocated for mental illness drug research investment, subject to FDA review and hereby dispensable in psychiatric hospitals alongside current drugs.

Section 3: States shall no longer receive federal healthcare funding in the form of block grants, but shall be appropriated funds on a case-by-case basis as necessary to maintain psychiatric hospitals.

<u>Subsection 3A:</u> Federal funding for mental treatment under Medicare and Medicaid shall be open for use in psychiatric hospitals.

<u>Subsection 3B:</u> \$4 billion shall be distributed amongst states pursuing integrated care initiatives and hospitals requiring support for mental treatment in emergency facilities.

Section 4: The conditions of "mental illness" shall match those established in the Civil Rights of Institutionalized Persons Act of 1980, the Americans with Disabilities Act of 1990, and the Mental Health Parity and Addiction Equity Act of 2008, with deferral to qualified physicians' judgement in cases of conflicting definition or absence of determination.

Section 5: This bill shall be enforced and updated by the U.S. Department of Health and Human Services.

Section 6: This bill shall be funded by the Senate Appropriations Committee and the Senate Committee on Health, Education, Labor, and Pensions.

Section 7: This bill shall take effect immediately upon passage.