

November 10, 2015

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The Honorable Bill Cassidy
U.S. Senate
703 Hart Senate Office Building
Washington, DC 20510

The Honorable Chris Murphy
U.S. Senate
136 Hart Senate Office Building
Washington, DC 20510

Dear Senators Cassidy and Murphy:

The Society of Hospital Medicine (SHM) is pleased to offer its support for S. 1945, *the Mental Health Reform Act of 2015*. This legislation offers a crucial first step in addressing the nation's mental health disparities and encourages meaningful reform of our nation's healthcare system.

SHM represents the nation's more than 48,000 hospitalists who work primarily in acute care hospitals. As such, they are increasingly leading the efforts to coordinate care for "super-utilizer" patients, many of whom also carry a mental health diagnosis and sadly find the ER and hospital as a last resort to seek care. According to a study published in the 2013 *Journal of Emergency Medicine*, 81% of "super-utilizer" patients were coping with at least one psychosocial challenge.ⁱ "Super-utilizer" patients have also demonstrated the consumption of a high share of acute care resources. An AHRQ-sponsored study showed that in 2012, mental health and substance abuse disorders were among the top 10 diagnoses for "super-utilizers" under the age of 65, accounting for 40-50% of hospital readmissions in that age group, with an aggregate cost of 11-13 billion dollars.ⁱⁱ

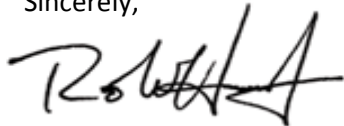
Unfortunately, the scope of this crisis does not appear to be abating. As more mental health facilities are closing, hospitals and emergency rooms are forced to hold patients while they wait to be transferred to more appropriate settings. This process of holding patients, called "psychiatric boarding," can last for days, to the detriment of patients who are unable to receive the psychiatric care that they need, while also diverting hospital resources that could provide care and bed space to other acutely-ill patients.ⁱⁱⁱ

Psychiatric patients often require constant surveillance, which is frequently provided by inadequately trained personnel, such as security guards and nursing aides. This places the patients at greater risk for poor outcomes, and distracts staff members from performing their normal duties elsewhere. Hospitalists face tremendous challenges providing adequate care to these patients, due to a lack of training, difficulties in coordinating care across providers and facilities, and the scarcity of on-site psychiatrists and other specialized mental health personnel. This legislation takes important steps toward addressing the growing problem within our nation's hospitals.

We appreciate the multifaceted and comprehensive approach undertaken in the legislation. Grants to innovate mental health delivery, with an emphasis on utilizing current evidence and telehealth services, and mandating Medicaid coverage for same day psychiatric services are welcome changes to the system. In addition, creating a dedicated office of assistant secretary for mental health and substance abuse issues will bring a clearer focus on the issues plaguing the mental health system, with a dedicated place to begin resolving them. Considering that some patients may be too incapacitated by their psychiatric illness, we also support further clarity and direction regarding when protected health information can be shared with the trusted caregivers of these patients, who would potentially play a critical role in ensuring the proper care of these patients.

This legislation is a pivotal step in the right direction for mental healthcare services and for patients living with mental illnesses. SHM appreciates your leadership and commitment to improving the mental health system. We look forward to working with you on this important issue.

Sincerely,



Robert Harrington, Jr., MD, SFHM
President, Society of Hospital Medicine

ⁱ Castillo, E, Brennan, J, Killeen, J, Chan, T. Department of Emergency Medicine, University of California, San Diego, California. May 2014, Accessed August 10, 2015.

ⁱⁱ Jiang HJ, Weiss AJ, Barrett ML, Sheng M. Characteristics of Hospital Stays for Super-Utilizers by Payer, 2012. HCUP Statistical Brief #190. May 2015. Agency for Healthcare Research and Quality, Rockville, MD. <http://www.hcup-us.ahrq.gov/reports/statbriefs/sb190-Hospital-Stays-Super-Utilizers-Payer-2012.pdf>.

ⁱⁱⁱ *Psychiatric Care in General Hospitals with and Without Psychiatric Units: How Much and for Whom?*. Slide Presentation from the AHRQ 2009 Annual Conference (Text Version). December 2009. Agency for Healthcare Research and Quality, Rockville, MD. <http://archive.ahrq.gov/news/events/conference/2009/vandivort-mark-owens/index.html>.