

## US House of Representative Approves Slate of Mental Health, Substance Use-Related Bills

On May 12<sup>th</sup>, the U.S. House of Representatives passed a slate of mental health and substance use-related bills. Each bill listed below was considered and approved by the House Energy and Commerce Committee in the 116<sup>th</sup> Congress. These bills now head to the Senate for consideration by the appropriate committees of jurisdiction. There is no set timetable for movement.

- [H.R. 2862](#) — **Campaign to Prevent Suicide Act** would direct HHS, in coordination with CDC and SAMHSA, to carry out a national suicide prevention media campaign to advertise suicide prevention resources including the 9-8-8 mental health hotline number.
- [H.R. 2981](#) — **Suicide Prevention Lifeline Improvement Act** would increase the authorized funding level for the National Suicide Prevention Lifeline program to \$50 million annually through fiscal year 2024 *to increase the number and financial stability of Lifeline call centers across the nation*. In FY2021, this line item was funded at \$24 million. The bill would also create a pilot program to study various technologies and platforms for suicide prevention.
- [H.R. 2955](#) — **Suicide Prevention Act** would create two new grant programs. The first, a \$20 million annual grant program for the expansion of surveillance of self-harm among state, local, tribal, and territorial public health departments. The second, a \$30 million annual grant program for emergency departments to provide self-harm and suicide prevention services. The grants would support screening patients for self-harm and suicide, providing patients short-term self-harm and suicide prevention services, *referring patients to health care facilities to receive long-term self-harm and suicide prevention services*.
- [H.R. 586](#) — **Suicide Training and Awareness Nationally Delivered for Universal Prevention (STANDUP) Act** would require State and Tribal educational agencies that receive mental health grants through Project AWARE to establish and implement a school-based student suicide awareness and prevention training policy.
- [H.R. 721](#) — **Mental Health Services for Students Act** would provide statutory authority for Project AWARE – including mental health awareness trainings like Mental Health First Aid - increasing authorized grant funding to \$130 million annually for four years for school-based mental health services, including preventative screening for social, emotional, mental, and behavioral issues.
- [H.R. 433](#) — **Family Support Services for Addiction Act** would authorize \$5 million per year for five years for a new grant program through the Substance Abuse and Mental Health Services Administration (SAMHSA) to support family community organizations serving individuals with substance use disorder (SUD). *National Council members providing substance use supports are eligible for this new grant program*.



- **[H.R. 1475](#)** — **Pursuing Equity in Mental Health Act** would authorize a \$20 million annual grant program to support the provision of culturally competent behavioral health services in communities with high percentages of racial and ethnic minority groups, support research into behavioral health disparities, and reauthorize the Minority Fellowship Program for students of color entering the behavioral health workforce at \$25 million annually. It would also mandate a study on the effects of smartphone and social media use on adolescents. *National Council members providing services to a high proportion of individuals from racial and ethnic minority groups are eligible for this new grant program.*
- **[H.R. 1324](#)** — **Effective Suicide Screening and Assessment in the Emergency Department Act** would create a \$20 million annual grant program for emergency departments to improve the identification, assessment, and treatment of patients who are at risk for suicide by developing policies and procedures for identifying and assessing individuals who are at risk of suicide enhancing the coordination of care for such individuals after discharge.
- **[H.R. 1205](#)** — **Improving Mental Health Access from the Emergency Department Act** would authorize a \$15 million annual program through SAMHSA to award grants to implement innovative approaches to securing appropriate follow-on care for individuals who are treated in for an acute mental health episode. Funds could also be used to *expand coordination with regional service providers, increase the supply of inpatient psychiatric beds, provide tele-psychiatric support, and other appropriate activities.*
- **[H.R. 1480](#)** — **Helping Emergency Responders Overcome (HERO) Act** would create a data system at CDC to capture public safety officer suicide incidences and study successful interventions, *authorize grants for peer support behavioral health and wellness programs within fire departments and emergency medical service agencies,* and require the development of best practices for addressing post-traumatic stress disorder (PTSD) in public safety officers and educational materials.
- **[H.R. 1260](#)** — **Bipartisan Solution to Cyclical Violence Act** would authorize a \$10 million annual grant program at HHS to support trauma centers with violence intervention and violence prevention. Eligible entities include state-designated trauma centers or *nonprofit entities that operate violence intervention or violence prevention programs.*
- **[H.R. 768](#)** — **Block, Report, And Suspend Suspicious Shipments Act** would require pharmaceutical manufacturers and distributors to exercise due diligence on orders for controlled substances, decline to fill the order or series of orders, and notify the Drug Enforcement Agency of each suspicious order or series or orders and the indicators that led to the belief that filling such orders would be a violation.