

Improving Mental Health Access From the Emergency Department Act

Introduced by Senators Shelley Moore Capito (R-W.Va.) and Maggie Hassan (D-N.H.)

Millions of Americans are affected by mental health conditions each year. Nearly one in five American adults experience mental illness in a given year, and nearly one in five youth aged 13–18 experiences a severe mental disorder at some point during their life. In times of psychological crisis, many of these individuals turn to local emergency departments for care. Unfortunately, with growing demand due to rising rates of substance abuse and suicide and all too often, a shortage of psychiatric beds, patients can remain in emergency departments for hours, sometimes days, as appropriate mental health care is sought.

As emergency departments across the country face this reality, some are implementing innovative solutions to ensure patients with mental illness receive the care they need and deserve. The *Improving Mental Health Access from the Emergency Department Act* would provide resources for emergency departments to adopt more collaborative and connected care models and deploy new technology to better connect patients with appropriate resources in their communities. The legislation recognizes that needs vary by patient, provider, and community and allows emergency departments to design the solutions that will best work for them.

The *Improving Mental Health Access from the Emergency Department Act* would:

- Authorize a competitive grant program for emergency departments to implement innovative approaches to securing prompt access to appropriate follow-on care for individuals experiencing acute mental health episodes and presenting for care in emergency departments.
- Such innovative approaches could include:
 - Expediting transition to post-emergency care through expanded coordination with regional service providers, assessment, peer navigators, bed availability tracking and management, transfer protocol development, networking infrastructure development, and transportation services.
 - Increasing the supply of inpatient psychiatric beds and alternative care settings such as regional emergency psychiatric units.
 - Expanding approaches to providing psychiatric care in the emergency department, including tele-psychiatric support and other remote psychiatric consultations, peak period crisis clinics, or creating dedicated psychiatric emergency service units.