October 19, 2017

The Honorable Debbie Stabenow
731 Hart Senate Office Building
Washington, DC 20510

The Honorable Roy Blunt
260 Russell Senate Office Building
Washington, DC 20510

Dear Senator Stabenow and Senator Blunt:

On behalf of the American College of Emergency Physicians (ACEP) and our 37,000 members, I write to express ACEP’s support for S. 1905, the "Excellence in Mental Health and Addiction Treatment Expansion Act," and to thank you for your continued leadership on this important issue.

For years, state support for mental and behavioral health resources has been on the decline and services for psychiatric patients in the United States are simply inadequate. As a result of this diminishing support, psychiatric patients are more and more often turning to emergency departments for their acute care needs. Unfortunately, it takes three times as long to find an inpatient bed for a psychiatric patient rather than a medical patient after the decision to admit has been made.

These patients remain, or are "boarded," in the emergency department until an inpatient psychiatric bed or a facility that is willing to accept the patient transfer can be found. According to a 2008 ACEP study on psychiatric and substance abuse, almost 80 percent of emergency physicians said psychiatric patients are boarded in their emergency department. Furthermore, 99 percent of emergency physicians reported admitting psychiatric patients every week and 64 percent reported admitting psychiatric patients daily. These psychiatric patients require more physician, nurse and hospital resources than other patients and, thus, diminish our ability to evaluate and treat other medical patients who are awaiting emergency care services.

Your legislation extends the successful pilot programs based on the “Excellence in Mental Health Act” that provide much-needed outpatient services for patients with mental or behavioral health needs, help transition these patients from inpatient to outpatient status more readily, and make inpatient psychiatric beds available on a more timely basis for the patients who are waiting for them in the emergency department. This bill also expands the available funding beyond the eight currently participating states to an additional eleven states, which will help prevent more patients from reaching a crisis point requiring acute emergency department services in the first place. ACEP stands ready to assist you in your effort to enact this important legislation.

Sincerely,

Rebecca B. Parker, MD, FACEP
ACEP President