

United States Senate

WASHINGTON, DC 20510

January 17, 2018

The Honorable Dr. Elinore F. McCance-Katz
Assistant Secretary for Mental Health and Substance Use
5600 Fishers Lane
Rockville, MD 20857

Dear Dr. McCance-Katz:

We write today regarding reports that the Substance Abuse and Mental Health Services Administration (SAMHSA) has suspended updates to the National Registry of Evidence-based Programs and Practices (NREPP). NREPP has been an important tool for communities and behavioral health providers - including those on the front lines of the opioid epidemic - helping them find effective, evidence-based interventions related to mental health and substance use disorders.

Recent press reports indicate that SAMHSA has terminated its contract with the company that manages NREPP and that no new programs have been added to the registry since September.¹ As a result, approximately 90 new programs that have been reviewed have not been added to the registry.² We are concerned that freezing NREPP means individuals and communities that may benefit from these new programs will not be able to learn about them or access them, and that the freeze also may hamper the work being done around the country to develop important interventions at a time when we are in the midst of a heroin, fentanyl and opioid epidemic and we need them more than ever.

SAMHSA is currently developing a new entity, the National Mental Health and Substance Use Policy Lab, which was required by the *21st Century Cures Act* to study and promote evidence-based practice. We understand that the Policy Lab is going to “play a central role in shaping SAMHSA’s efforts to bring more science to the evidence-based practices used in the prevention, treatment, and support services being provided by behavioral health practitioners and other clinicians”³; however, it is unclear when the Policy Lab will be ready as a resource and what resources it will include for behavioral health practitioners. Based on your recent comments that “We must not waste time continuing [NREPP],” it is unclear if you plan for SAMHSA to continue operating a national database like NREPP that has been critical to many behavioral

¹ https://www.washingtonpost.com/national/health-science/trump-administration-freezes-database-of-addiction-and-mental-health-programs/2018/01/10/ed421654-f577-11e7-beb6-c8d48830c54d_story.html?utm_term=.d98cd3473923

² Id.

³ <https://www.samhsa.gov/newsroom/press-announcements/201801111145>

health professionals.⁴ We are concerned that behavioral health practitioners will not be able to access data on evidence-based practices if no new registry is available.

The *21st Century Cures Act* required the Policy Lab to begin implementation by January 1, 2018, but there have been no announcements made about how soon the Policy Lab will be prepared to act as a resource for behavioral health practitioners.⁵ A director was recently appointed to the Policy Lab, but the lab does not appear to be fully staffed.⁶ Given that NREPP was discontinued before the Policy Lab was fully implemented, this is especially concerning for behavioral health professionals who rely on up-to-date data from NREPP as a resource for their daily work.

You shared that you have only had a “limited review” of the programs and practices under NREPP⁷ – and so we appreciate you taking the time to further review the program and address some of our questions and concerns. We request the answers to the following questions no later than February 1, 2018:

1. Why did SAMHSA terminate its contract with the company managing NREPP?
2. When did SAMHSA stop updating NREPP with new programs that have been reviewed, and when was the contract terminated with the company managing NREPP? Please explain any gaps between the halting of NREPP updates and the termination of the contract.
3. Does SAMHSA plan to transition NREPP to the National Mental Health and Substance Use Policy Lab?
4. What is SAMHSA’s strategy and timeline to move the NREPP data to the National Mental Health and Substance Use Policy Lab?
5. Behavioral health practitioners no longer have access to an updated resource that they have been relying on for several years. How soon will the Policy Lab be prepared to act as a resource for behavioral health practitioners?
6. What is SAMHSA doing to ensure communities and providers have access to new, evidence-based interventions during this transition?
7. Does the Policy Lab intend to have a different definition of “evidence-based practice” from NREPP? If so, how will the Policy Lab determine what is “evidence-based practice”?
8. Last week you stated that NREPP “did not address the spectrum of needs of those living with serious mental illness and substance use disorders.”⁸ How does the Policy Lab intend to address serious mental illness and the opioid epidemic while continuing to

⁴ <https://www.samhsa.gov/newsroom/press-announcements/201801110330>

⁵ Sec. 7001: <https://www.congress.gov/114/plaws/publ255/PLAW-114publ255.pdf>

⁶ Id.

⁷ <https://www.samhsa.gov/newsroom/press-announcements/201801110330>

⁸ Id.

support children and adults suffering with other mental health issues? How does the Policy Lab intend to address the early identification and prevention of mental health disorders, particularly amongst children?


Thank you in advance for your prompt attention to this matter. If you have any questions, please contact McKenzie Bennett at (202) 224-3324, or mckenzie_bennett@hassan.senate.gov.

Sincerely,


MARGARET WOOD HASSAN
United States Senator


RICHARD BLUMENTHAL
United States Senator


DIANNE FEINSTEIN
United States Senator


ELIZABETH WARREN
United States Senator


JEANNE SHAHEEN
United States Senator