

June 10, 2025

The Honorable Bill Cassidy, M.D.
Chairman
Senate Health, Education, Labor & Pensions
Committee
428 Senate Dirksen Office Building
Washington, DC 20510

The Honorable Bernard Sanders
Ranking Member
Senate Health, Education, Labor & Pensions
Committee
428 Senate Dirksen Office Building
Washington, DC 20510

Dear Chairman Cassidy and Ranking Member Sanders:

The Mental Health Liaison Group (MHLG), a coalition of national organizations representing people with mental health conditions and substance use disorders, family members, mental health and addiction providers, advocates and other stakeholders is committed to strengthening Americans' access to mental health and substance use disorder care. We are incredibly disheartened by the proposal from the U.S. Department of Health and Human Services (HHS) to eliminate the Substance Abuse and Mental Health Services Administration (SAMHSA) as we know it, as well as drastically reduce spending or eliminate critical SAMHSA programs. Such a move would have devastating consequences for the 84.5 million Americans with a mental health and/or a substance use disorder, many of whom rely on SAMHSA's programs, research, oversight, and leadership to address critical mental health and substance use disorder needs.

Since SAMHSA was established by Congress more than two decades ago, the agency has built an infrastructure to coordinate and lead public health efforts to advance the behavioral health of the nation. SAMHSA and most of its programs and activities are authorized under Title V of the Public Health Service Act (PHSA), of which the Health, Education, Labor & Pensions (HELP) Committee has sole jurisdiction. Yet, contrary to the statute, the HHS FY 2026 Budget in Brief proposes to eliminate SAMHSA and move some of its functions to a new Administration for a Healthy America (AHA). If this becomes reality, there will no longer be a federal agency whose specific purpose, function, and expertise is to address mental health and substance use disorders. Given the current opioid public health emergency, and our nation's ongoing mental health crisis, we are confused and troubled by this proposal. SAMHSA's work is lifesaving, helping ensure communities have access to mental health and substance use treatment services – along with suicide prevention strategies – with enough providers to deliver the care that every American deserves.

SAMHSA's effectiveness is due to its position as a federal agency with its specific focus on supporting community-based mental health and substance abuse treatment and prevention services. Through the development of education, training, toolkits and resources; administering grants; and providing technical assistance informed by specialized expertise and data, SAMHSA is able to identify trends, implement efficiencies informed by current needs, and support states in providing community-based services for mental health conditions and substance use disorders.

Additionally, the proposed HHS budget would eliminate scores of mental health programs, including some that your committee explicitly established in the landmark *Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment (SUPPORT) for Patients and Communities Act of 2018*. Programs slated for elimination include Comprehensive Opioid Recovery Centers and the Youth Prevention and Recovery Initiative. These are just two examples of programs that your committee authorized in 2018 and voted to reauthorize on a bipartisan basis last year, in addition to other concerning eliminations within the Programs of Regional and National Significance and those related to combatting overdose-related deaths. These proposed eliminations come at the same time that HHS extended the public health emergency declaration for our nation's opioid crisis – targeting the same programs aimed at addressing this crisis.

As leading voices working on mental health and substance use disorders, we believe it is paramount that the federal government retain a standalone agency explicitly focused on mental health and substance use disorders. In 2016, this committee recognized the importance of SAMHSA and the public health threats of mental health and addiction by elevating the leader of the agency from an Administrator to an Assistant Secretary of Mental Health and Substance Use, directly reporting to the Secretary. Within another agency, SAMHSA – and a focus on mental illness and addiction – will not have the same direct impact on HHS proposals and will not be elevated as a resource and partner for other components of HHS. SAMHSA has partnered with HRSA on workforce, CDC on the impact of infectious diseases on people with mental illness, NIH on early psychosis programs and CMS on health homes and demonstration programs in behavioral health. As with previous federal agency reorganizations, any efforts to change or reorganize SAMHSA should be directed by the Committee.

Through your leadership of the Committee, our nation has made thoughtful progress to address our mental health and substance use crisis. We urge you to continue your bipartisan focus on proven programs that address severe, chronic, and, far too often, life-threatening mental illnesses that impact our families, friends, and neighbors in every corner of our nation. Please ensure that any changes to SAMHSA programs do not disrupt, delay, or reverse our nation's great progress and commitment to addressing our mental health, suicide, and substance use crises.

Sincerely,

American Association for Marriage and Family Therapy
American Association for Psychoanalysis in Clinical Social Work
American Association of Child and Adolescent Psychiatry
American Association of Psychiatric Pharmacists
American Association on Health and Disability
American Foundation for Suicide Prevention
American Mental Health Counselors Association
American Occupational Therapy Association
American Psychiatric Association

American Psychiatric Nurses Association
American Psychoanalytic Association
American Psychological Association Services
Anxiety and Depression Association of America
Association for Ambulatory Behavioral Healthcare (AABH)
Bazelon Center for Mental Health Law
Center for Law and Social Policy (CLASP)
Children and Adults with Attention-Deficit/Hyperactivity Disorder
Clinical Social Work Association
Committee for Children
Depression and Bipolar Support Alliance (DBSA)
Fountain House
Global Alliance for Behavioral Health & Social Justice
Huntington's Disease Society of America
Inseparable
International OCD Foundation
International Society of Psychiatric-Mental Health Nurses
Legal Action Center
Maternal Mental Health Leadership Alliance
Mental Health America
National Alliance on Mental Illness (NAMI)
National Association of Pediatric Nurse Practitioners
National Board for Certified Counselors
National Council for Mental Wellbeing
National Eating Disorders Association
National Federation of Families
National Health Law Program
National League for Nursing
National Register of Health Service Psychologists
National Women's Shelter Network, Inc.
Network of Jewish Human Service Agencies
Psychotherapy Action Network (PsiAN)
SMART Recovery
The National Alliance to Advance Adolescent Health
The National Association for Rural Mental Health
The National Association of County Behavioral Health and Developmental Disability Directors (NACBHDD)
The Trevor Project
Tourette Association of America
Trust for America's Health

CC :

The Honorable John Thune, Senate Majority Leader

The Honorable Chuck Schumer, Senate Minority Leader

The Honorable Susan Collins, Chair, Senate Appropriations Committee

The Honorable Patty Murray, Ranking Member, Senate Appropriations Committee