

Statement of Leading Mental Health and Substance Use Disorder Organizations

March 17, 2026

House Energy and Commerce Committee, O&I Subcommittee "Protecting Patients and Safeguarding Taxpayer Dollars: The Role of CMS in Combatting Medicare and Medicaid Fraud"

The undersigned national organizations represent people with mental health and substance use disorders, family members, mental health and addiction providers, advocates, and other stakeholders who recognize the importance of efforts to maintain program integrity for Medicaid and all programs funded at taxpayer expense. Claims of fraud, waste, abuse, or improper payments should always be investigated, but broadly undermining the Medicaid program does not address these and only harms Americans, particularly those with mental health and substance use disorders. We urge Congress not to make further cuts to Medicaid, which will harm individuals who depend on lifesaving care.

Our nation is already bracing for the impact of the nearly \$1 trillion of Medicaid cuts resulting from passage of Pub. Law 119-21 (H.R. 1 or OBBBA), which the Congressional Budget Office (CBO) projects will result in [10 million people](#) becoming uninsured, including 7.5 million losing Medicaid coverage. Additional cuts to Medicaid will exacerbate this damage, especially for the [nearly 40%](#) of Medicaid enrollees with mental health (MH) conditions and/or substance use disorder (SUD). In the midst of our ongoing [MH crisis](#) and [opioid overdose public health emergency](#), we need to stop cutting off access to the services and supports people need.

More Medicaid cuts will reduce access to lifesaving services. Congress and the Centers for Medicare and Medicaid Services (CMS) have made laudable progress in helping the most vulnerable people in our country access health care by expanding eligibility, MH/SUD parity protections, and coverage of medications for opioid use disorder in Medicaid. But now, Congress and CMS are targeting numerous states' Medicaid funding under the guise of investigating fraud. This unprecedented approach will not address program integrity: instead it prevents states from delivering the lifesaving care that Medicaid recipients need. This broad and untargeted strategy will harm the very people that Medicaid is intended to help, particularly the community our organizations represent and serve. Further, this strategy is unlikely to save costs, as cutting critical services will result in expensive and avoidable hospitalizations, emergency room stays, nursing facility admissions, and other costly interventions

Rather than protecting people with MH conditions and SUD, these cuts directly target them. When passing Pub. Law 119-21, members of Congress kept repeating they were not going to cut care for people with MH conditions, SUD, and/or disabilities. However, the very services Congress and CMS are targeting are those that people with these conditions rely on to stay healthy and remain in their homes and communities. Our organizations can point to thousands of stories of people with [MH conditions](#) and [SUD](#) whose lives were saved because they had Medicaid, not the least of which because Medicaid has the highest rates of treatment access of quality care for [MH conditions](#) and [opioid use disorder](#) compared to other types of insurance. Congress and CMS cannot purport to be protecting individuals with these conditions while their current actions attack the services they need.

Although deaths of despair in this country have declined somewhat recently, we are still losing more than 200 people a day to drug overdose and nearly 135 people a day to suicide. Access to MH and SUD care couldn't be more important. We urge Congress not to make further cuts to Medicaid under the pretext of combatting fraud and abuse. Instead, we believe CMS should partner with states and stakeholders to continue to improve access to lifesaving MH and SUD care.

If you would like to discuss our comments, please contact Deb Steinberg at dsteinberg@lac.org and Jennifer Snow at jsnow@nami.org.

Sincerely,

American Association on Health and Disability

Bazelon Center for Mental Health Law

Lakeshore Foundation

Legal Action Center (LAC)

National Alliance on Mental Illness (NAMI)

National Association for Rural Mental Health (NARMH)

National Association of County Behavioral Health and Developmental Disability Directors (NACBHDD)

NHMH - No Health without Mental Health

SMART Recovery

The Jed Foundation

Treatment Communities of America