



## **GAO Report on Health and Human Services Leadership Misleading, Incomplete**

February 11, 2015 (Washington, DC) -- In 2014, Representative Tim Murphy (PA-18) engaged the GAO to enumerate the programs the Administration funds to assist persons with severe mental illness, to determine the degree to which these programs are coordinated, and to assess the evaluations done on the programs. The GAO identified over a hundred federal programs, but comes to misleading conclusions in its report.

**Coordination.** The [GAO report](#) states that "HHS is charged with leading the federal government's public health efforts related to mental health, and the Substance Abuse and Mental Health Services Administration is required to promote coordination of programs relating to mental illness throughout the federal government. In the past, HHS led the Federal Executive Steering Committee for Mental Health, with members from across the federal government. However, the steering committee has not met since 2009."

In fact, Congress, not the administration, is responsible for the lapse. In 2009, Congress failed to pass the legislation required to authorize the continued operation of such an interagency coordinating committee.

The GAO report has other glaring omissions. If the report's authors had examined SAMHSA more closely, they would have found that many of its programs involve close interagency collaboration with DOJ, HUD, CMS, DOL, and the VA, in the areas of homelessness, recovery, supported employment, suicide prevention, and child/adult traumatic stress; as well as in enforcement of the *Olmstead* community integration mandate.

**Evaluation.** The GAO reports that "agencies completed few evaluations of the programs specifically targeting individuals with serious mental illness..." The report focuses narrowly on completed program evaluations only and discounts other forms of ongoing performance measure and monitoring activities, which are consistently required of all grantees. We agree that program evaluation is important. Yet as the report acknowledges it is *very costly*, especially relative to the small budgets of many of the programs analyzed in the GAO report. We encourage Congress to allocate the funding for increased program evaluation.

**Omission of CMS.** The GAO's analysis was limited to programs which amount to just 5% of total Federal mental health expenditures, while failing to comment on the much more heavily funded programs of Medicaid and Medicare, which amounted to \$40 billion in FY 2012. It is estimated that 50% of the treatment for persons with severe mental illness is supplied by CMS programs. This omission of CMS is not explained in the GAO's report, and, according to HHS in its letter of non-concurrence, this flawed methodology "**compromises the validity of the report's findings.**"

There is certainly always room for improvement in Federal government programs, but this report provides an extremely limited view of what is happening in this country regarding Federal mental health expenditures.

In conclusion, it appears that the GAO report was more intent on finding shortcomings at SAMHSA than genuinely evaluating the degree to which the federal government provides recovery-based treatment and supports for persons with severe mental illness.