Chairman Greg Walden Committee on Energy and Commerce United States House of Representatives 2125 Rayburn House Office Building Washington, DC 20515

Chairman Michael Burgess Committee on Energy and Commerce Health Subcommittee United States House of Representatives 2125 Rayburn House Office Building Washington, DC 20515

April 11, 2018

Ranking Member Frank Pallone Committee on Energy and Commerce United States House of Representatives 2125 Rayburn House Office Building Washington, DC 20515

Ranking Member Gene Green Committee on Energy and Commerce Health Subcommittee United States House of Representatives 2125 Rayburn House Office Building Washington, DC 20515

Dear Chairman Walden, Ranking Member Pallone, Chairman Burgess, and Ranking Member Green,

On behalf of the Behavioral Health Information Technology (BHIT) Coalition, the undersigned organizations would like to thank the members of the U.S. House of Representatives Committee on Energy and Commerce and the Committee on Energy and Commerce Health Subcommittee for their continued dedication to comprehensively address the opioid epidemic. We appreciate the Committee's upcoming hearing on Combating the Opioid Crisis: Improving the Ability of Medicare and Medicaid to Provide Care for Patients on April 11, 2018, and their consideration of HR 3331, to amend title XI of the Social Security Act to promote testing of incentive payments for behavioral health providers for adoption and use of certified electronic health record technology.

Established in 2010, the Behavioral Health Information Technology (BHIT) Coalition is comprised of organizations dedicated to advancing public policy initiatives that tap the full potential of technology in the delivery of coordinated, integrated services and treatment for people with mental health and addiction disorders. The BHIT Coalition members are dedicated to ensuring that all persons in need of mental health and addiction services receive high-quality, coordinated care from their behavioral health and primary care providers utilizing healthcare information technology as a key element in delivering services and care for the "whole person."

The undersigned organizations strongly support HR 3331/S.1732, introduced on a bipartisan basis by Representatives Jenkins (R-KS) and Matsui (D-CA) and Senators Portman (R-OH) and Whitehouse (D-RI), that would authorize a CMMI health IT demonstration program, including providers such as public or private psychiatric hospitals, community mental health centers, accredited residential or outpatient opioid treatment facilities, clinical psychologists, and clinical social workers. **The BHIT Coalition recognizes that we cannot hope to address the opioid crisis successfully without providing electronic health records (EHRs) and**

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supporting health information technology within behavioral health settings, and we would like to thank the Committee for working to address this barrier in the efforts to fight the opioid epidemic.

Sincerely,

American Psychological Association Association for Behavioral Health and Wellness Centerstone The Jewish Federations of North America Mental Health America National Association of Counties The National Association of County Behavioral Health and Developmental Disability Directors National Alliance on Mental Illness National Alliance on Mental Illness National Association of Psychiatric Health Systems The National Association for Rural Mental Health National Association of State Alcohol and Drug Abuse Directors National Association of Social Workers National Council for Behavioral Health Netsmart Technologies

