

Congress of the United States
Washington, DC 20515

SUPPORT IMPLEMENTATION OF 21ST CENTURY CURES
EATING DISORDERS PROVISIONS

Dear Colleague:

Please join us in urging Secretary of Health and Human Services Alex Azar to continue the important work of implementing Sections of the 21st Century Cures Act that will help millions of Americans with eating disorders.

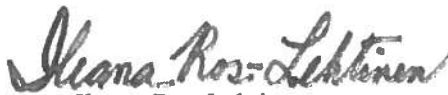
In 2016, the House of Representatives showed overwhelming bipartisan support for the 21st Century Cures Act, including important new protections for individuals with eating disorders and other mental illnesses. The law included provisions that will help doctors identify and diagnose eating disorders earlier, improve access to life-saving treatment, and improve public awareness of eating disorders.

We ask that you join us showing bipartisan support for this landmark law to help Americans with eating disorders find the road to recovery.

Sincerely,



Ted Deutch
MEMBER OF CONGRESS



Ileana Ros-Lehtinen
MEMBER OF CONGRESS

[DRAFT]

April xx, 2018

The Honorable Alex M. Azar II
Secretary
U.S. Department of Health and Human Services
200 Independence Ave, SW
Washington, DC 20201

Dear Secretary Azar,

Thank you for your leadership as the Department of Health and Human Services implements Sections 13005 and 13007 of the bipartisan 21st Century Cures Act (Public Law 114-255), including the release of initial mental health parity FAQs for eating disorders and update of Office of Women's Health (OWH) factsheets for eating disorders. Despite this progress, we have concerns regarding progress

toward early identification and intervention training programs for health professionals under Section 13006 of the law. We urge you to take significant steps to implement this important provision to provide nurses, doctors, and other health professionals the tools they need to help save lives from eating disorders.

Eating disorders are serious mental illnesses that affect over 30 million Americans at some point during their lifetime and have the highest mortality rate out of any psychiatric illness.^[1] These disorders are complex, and are frequently experienced at the same time as other medical and psychological conditions. For example, 50 percent of people with eating disorders have a co-occurring substance use disorder.^[2] In addition, heart disease, kidney failure, esophageal cancer, osteoporosis, seizures, infertility, and many other serious medical conditions can emerge as a direct result of an eating disorder.

Given the severity and economic cost of treating a severe eating disorder, we urge HHS, through both SAMHSA and HRSA, to implement evidence-based trainings and resources to help health professionals identify the early warning signs of eating disorders, fight the stigma associated with mental health disorders, intervene quickly, and refer patients to specialized mental health professionals to help more Americans find the path to recovery. Particularly, we urge HHS to consider utilizing its existing training and intervention models as examples to implement Section 13006, such as HRSA's Intimate Partner Violence (IPV) program and SAMHSA's Screening, Brief Intervention and Referral to Treatment (SBIT) program for substance use disorder. Like substance use disorder and IPV, people with eating disorders often fail to receive appropriate treatment due to improperly trained health care workforce, stigma, and gaps in knowledge related to eating disorders treatment and referral resources. These programs have proven the efficacy of evidence-based training programs that can break down barriers to treatment and recovery. Additionally, we strongly urge HRSA to integrate these eating disorders education and trainings within its Bureau of Health Workforce's Primary Care Training and Enhancement program, as was requested within the Consolidated Appropriations Act, 2018 Explanatory Statement (P.L. 115-141).

We applaud your department's ongoing efforts under Sections 13005 and 13007 and ask that you continue implementation through further mental health parity guidance and changes to the OWH website, and ask that you simultaneously begin work on Section 13006 of the 21st Century Cures Act. By improving the knowledge and skill of our health care workforce we can significantly help those who are at risk before they develop severe eating disorders that require intensive treatment at high costs to our health systems and taxpayers. Thus, we strongly urge you to implement these practices to save lives and reduce the cost to American families across the nation.

Sincerely,

^[1] Hudson, J. I., Hiripi, E., Pope, H. G., & Kessler, R. C. (2007). The Prevalence and Correlates of Eating Disorders in the National Comorbidity Survey Replication. *Biological Psychiatry*, 61(3), 348–358. <http://doi.org/10.1016/j.biopsych.2006.03.040>

^[2] National Center on Addiction and Substance Abuse at Columbia University. (2003). *Food for thought: substance abuse and eating disorders* <http://www.centeronaddiction.org/addiction-research/reports/food-thought-substance-abuse-and-eating-disorders>