

The Positive Aging Act of 2011, S 525

Background and Bill Summary

The Positive Aging Act is designed to make mental health services for older adults an integral part of primary care services in community settings and to extend them to other settings where older adults reside and receive services. The evidence-based services under this legislation will be provided by interdisciplinary teams of mental health professionals working in collaboration with other providers of health and social services.

Specifically, the Positive Aging Act would provide essential mental health services for older adults by authorizing the Substance Abuse and Mental Health Services Administration (SAMHSA) to:

- Support demonstration projects to integrate mental health services in primary care settings;
- Support grants for community-based mental health treatment outreach teams;
- Designate a Deputy Director for Older Adult Mental Health Services in the Center for Mental Health Services;
- Include representatives of older Americans or their families and geriatric mental health professionals on the Advisory Council for the Center for Mental Health Services;
- Include targeting substance abuse in older adults in projects of national significance; and
- Require state plans under Community Mental Health Services Block Grants to include descriptions of the states' outreach to and services for older individuals.

Status

S 525, the Positive Aging Act of 2011, was introduced in the United States Senate on March 9, 2011. After introduction, the bill was referred to the Senate Committee on Health, Education, Labor, and Pensions

The bill currently has [1 Cosponsor](#).

Rationale/Talking Points

- The Positive Aging Act takes an important step toward improving access to quality mental and behavioral health care for older adults by integrating mental health services in primary care and community settings where older adults reside and receive services.
- An estimated 20 percent of community-based older adults in the U.S. have a mental health problem. These disorders can have a significant impact on both physical and mental health, often leading to increases in disease, disability, and mortality.

- In fact, men age 85 and older currently have the highest rates of suicide in our country and depression is the foremost risk factor. Evidence suggests that up to 75 percent of older adults who die by suicide have visited a primary care professional within 30 days of their death.
- Although effective treatments exist, the mental health needs of many older Americans go unrecognized and untreated because of poorly integrated systems of care to address the physical and mental health needs of seniors.
- By supporting collaboration between interdisciplinary teams of mental health professionals and other providers of health and social services, this legislation promotes an integrated approach to addressing the health and well being of our nation's growing older adult population.
- The bill has been endorsed by a broad coalition of mental health and senior citizens' organizations and has been a longstanding priority for the American Psychological Association.