

Mental Health Liaison Group

January 13, 2011

The Honorable John A. Boehner
Speaker
United States House of Representatives
Washington, DC 20515

The Honorable Nancy Pelosi
Democratic Leader
United States House of Representatives
Washington, DC 20515

Dear Speaker Boehner and Leader Pelosi:

The undersigned members of the Mental Health Liaison Group are writing to express our opposition to H.R. 2 that would repeal the Patient Protection and Affordable Care Act and the health reform parts of the Health Care and Education Affordability Reconciliation Act of 2010. Our coalition hailed the Congressional effort to pass these laws, which offer needed improvements to health care access, quality and services for millions of Americans with mental disorders. We ask you to protect the mental and behavioral health needs of our nation as the health reform law is implemented.

As you may know, mental disorders are the leading cause of disability in the United States for people ages 15 to 44. Tragically, adults with serious mental illnesses served in public mental health systems typically die 25 years earlier than the general population because of a high rate of preventable co-occurring physical illnesses, such as diabetes or heart disease. Suicide is the third leading cause of death among 15-24 year old young people. These troubling statistics remind us of the importance of the following provisions included in the Patient Protection and Affordable Care Act that will help millions of children and adults with mental disorders. Some of these notable improvements to the health care system are already in effect, and others are on the near horizon.

- Health insurance market reforms that would prohibit pre-existing conditions exclusions and annual or lifetime limits, provide guaranteed issue and renewal requirements, and allow dependent young adults to remain on parental coverage to age 26;
- Essential plan benefits that include mandatory mental health, substance use, rehabilitation, habilitation, prescription drug and preventive services;
- Mental health and substance use parity requirement for exchange plans;
- Within the private health care system, a grant program integrating mental health into primary care with the establishment of interprofessional, interdisciplinary health teams to support primary care practices;
- Medicaid eligibility extension to individuals up to 133% of the federal poverty level, including childless single adults;

National organizations representing consumers, family members, advocates, professionals and providers
c/o Peter Newbould, American Psychological Association Practice Organization, 750 First Street, NE, Washington, DC 20002
Laurel Stine, J.D., Bazelon Center for Mental Health Law, 1101 15th Street, NW, #1212, Washington, DC 20005

- Chronic care coordination fostered through a Medicaid state plan option allowing beneficiaries with one or more chronic conditions (including mental health disorders) to designate a health home, and permitting the designation of a community mental health center as an eligible health home;
- Children's Health Insurance Program maintenance through 2019, with states continuing to provide services or offering a procedure to provide for coverage through the exchange;
- Long-term services coverage through the new Community Living Assistance Services and Supports national insurance program and Community First Choice Medicaid Option to help individuals with disabilities receive essential care at home or in the community;
- Workforce development through mental and behavioral health education and training grants, loan repayment for child mental health professionals, and support for geriatric education and training;
- Prevention and wellness services through community transformation grants and enhanced services for special populations, including people with disabilities; ensuring that the Substance Abuse and Mental Health Services Administration is consulted on the development of strategies pertaining to behavioral health and directing the Clinical Preventive Services Task Force to consider best practices presented by scientific societies in the development of clinical preventive recommendations;
- Strengthening Medicare through an extension through 2010 restoring reimbursement cuts for psychotherapy services within the outpatient mental health benefit and requiring Part D plans to provide full coverage of six classes of clinically sensitive medications, including anti-depressants, anti-psychotics and anti-convulsants;
- Establishment of a National Center for Excellence in Depression, among other important provisions.

We appreciate your consideration of our views and look forward to working with you on these issues in the 112th Congress.

Sincerely,

Alliance for Children and Families
American Academy of Child and Adolescent Psychiatry
American Art Therapy Association
American Association for Geriatric Psychiatry
American Association for Psychosocial Rehabilitation *
American Association of Pastoral Counselors
American Association on Health and Disability *
American Counseling Association
American Dance Therapy Association

American Foundation for Suicide Prevention/SPAN USA
American Group Psychotherapy Association
American Mental Health Counselors Association
American Nurses Association
American Psychiatric Association
American Psychiatric Nurses Association
American Psychological Association
Anxiety Disorders Association of America
Association for the Advancement of Psychology
Association for Ambulatory Behavioral Healthcare
Bazelon Center for Mental Health Law
Center for Clinical Social Work
Center for Integrated Behavioral Health Policy *
Children and Adults with Attention-Deficit/Hyperactivity Disorder
Child Welfare League of America *
Clinical Social Work Association
Clinical Social Work Guild 49, OPEIU
Corporation for Supportive Housing *
Depression and Bipolar Support Alliance
Eating Disorders Coalition for Research, Policy & Action
Mental Health America
NAADAC, the Association for Addiction Professionals
National Alliance on Mental Illness
National Association for Children's Behavioral Health
National Association for Rural Mental Health
National Association of Anorexia Nervosa and Associated Disorders -- ANAD
National Association of County Behavioral Health and Developmental Disability Directors
National Association of Mental Health Planning & Advisory Councils
National Association of Social Workers
National Association of State Mental Health Program Directors
National Coalition for Mental Health Recovery
National Council for Community Behavioral Healthcare
National Council on Problem Gambling *
National Disability Rights Network
National Federation of Families for Children's Mental Health
National Foundation for Mental Health *
School Social Work Association of America
Therapeutic Communities of America
United Neighborhood Centers of America *
U.S. Psychiatric Rehabilitation Association
Witness Justice

**Not a MHLG Member*