May 29, 2007

The Honorable John F. Kerry  The Honorable Gordon Smith
United States Senate  United States Senate
Washington, D.C. 20510  Washington, D.C. 20510

The Honorable Pete V. Domenici  The Honorable Edward M. Kennedy
United States Senate  United States Senate
Washington, D.C. 20510  Washington, D.C. 20510

Dear Senators Kerry, Smith, Domenici, and Kennedy:

The undersigned organizations commend you for introducing the “Children’s Mental Health Parity Act” (S. 1337) to require equitable coverage of mental health services in the State Children’s Health Insurance Program (SCHIP). For many children, mental health care is a key component of the array of services needed for healthy childhood development.

Mental disorders affect about one in five American children and five to nine percent experience serious emotional disturbances that severely impair their functioning, according to the Surgeon General’s comprehensive report on mental health. Moreover, low-income children enrolled in Medicaid and SCHIP have the highest rates of mental health problems.

Sadly, over two-thirds of children struggling with mental health disorders do not receive mental health care. The President’s New Freedom Commission on Mental Health found that without early and effective identification and interventions, childhood mental disorders can lead to a downward spiral of school failure, poor employment opportunities, and poverty in adulthood. Untreated mental illness may also increase a child’s risk of coming into contact with the juvenile justice system, and children with mental disorders are at a much higher risk for suicide.

Unfortunately, many state SCHIP plans impose unjustified limits on mental health services, compounding the widespread lack of access to needed mental health care. These limits, including caps on coverage of inpatient days and outpatient visits, are not based on the medical needs of children enrolled in SCHIP or on practitioners’ best practice guidelines. They are far too restrictive for ensuring access to adequate care for children with mental disorders. In fact, research has shown that children with complex mental health needs have access to full coverage for needed services in not more than 40 percent of states due to the limited benefit package in their state’s SCHIP plan.

Your bill, the “Children’s Mental Health Parity Act”, would prohibit these discriminatory limits on mental health care in SCHIP plans by directing that any financial requirements or treatment limitations that apply to mental health or substance abuse services must be no more restrictive than the financial requirements or treatment limits that apply to other medical services. Your bill
would also eliminate a harmful provision in current law that authorizes states to lower the amount of mental health coverage they provide to children in SCHIP down to 75 percent of the coverage provided in the benchmark plans listed in the statute as models for states to use in developing their SCHIP plans.

We greatly appreciate your efforts to address this important issue and applaud your leadership in introducing S. 1337.

Sincerely,

Alliance for Children and Families
American Academy of Child and Adolescent Psychiatry
American Academy of Nursing
American Association for Geriatric Psychiatry
American Association for Marriage and Family Therapy
American Association of Pastoral Counselors
American Counseling Association
American Group Psychotherapy Association
American Humane Association
American Medical Student Association
American Mental Health Counselors Association
American Network of Community Options and Resources
American Nurses Association
American Psychiatric Association
American Psychoanalytic Association
American Psychological Association
American Psychotherapy Association
American Public Health Association
Anxiety Disorders Association of America
Association for Ambulatory Behavioral Healthcare
Association for the Advancement of Psychology
Association of Maternal and Child Health Programs
Bazelon Center for Mental Health Law
Child Welfare League of America
Children and Adults with Attention-Deficit/Hyperactivity Disorder (CHADD)
Clinical Social Work Association
Clinical Social Work Guild 49, OPEIU
Consumers Union
Council for Children with Behavioral Disorders
Depression and Bipolar Support Alliance
Easter Seals
Eating Disorders Coalition for Research, Policy & Action
FamiliesUSA
Fight Crime: Invest in Kids
Jewish Council for Public Affairs
Lutheran Services in America
Mental Health America
National Advocacy Center of the Sisters of the Good Shepherd
National Alliance on Mental Illness (NAMI)
National Association for Children’s Behavioral Health
National Association of Anorexia Nervosa and Associated Disorders
National Association of County and City Health Officials
National Association of County Behavioral Health and Developmental Disability Directors
National Association of Mental Health Planning & Advisory Councils
National Association of Psychiatric Health Systems
National Association of School Psychologists
National Association of Social Workers
National Council for Community Behavioral Healthcare
National Disability Rights Network
National Health Law Program
NETWORK: A National Catholic Social Justice Lobby
North American Council on Adoptable Children
School Social Work Association of America
Suicide Prevention Action Network USA (SPAN USA)
The Arc of the United States
The Children’s Health Fund
The Rebecca Project for Human Rights
The Union for Reform Judaism
Tourette Syndrome Association
United Cerebral Palsy
United Jewish Communities