May 29, 2007

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

The Honorable Pete V. Domenici United States Senate Washington, D.C. 20510 The Honorable Gordon Smith United States Senate Washington, D.C. 20510

The Honorable Edward M. Kennedy United States Senate 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