Mental Health Liaison Group

April 10, 2001

Honorable John McCain
U.S. Senate
Washington, DC  20510

Dear Senator McCain:

The undersigned organizations are writing to express our strong support for the Bipartisan Patient Protection Act of 2001 (S. 283), which you have introduced with Senator John Edwards. We commend you for your leadership.

Bipartisan support for this new legislation represents a breakthrough on behalf of patients’ rights. Your bill provides essential protections for all consumers in the private health insurance marketplace. MHLG is particularly pleased that the legislation contains provisions ensuring continuity of care for people with special health care needs and chronic conditions. Among other things, S. 283 assures timely appeals, reforms the utilization review process to require the use of properly trained personnel and guarantees access to emergency and urgent care services (which is of specific concern to adults with severe mental illnesses and children with serious emotional disturbances).

Your bill includes much needed patient protections, strong reforms of the managed care industry and due process protections for providers. S. 283 permits persons who have been injured by negligent decisions of health plans that delay or deny care to hold plans legally accountable. This includes persons with mental injury as well as those with physical injury. We believe that removal of ERISA’s special exemption from legal accountability will be a strong incentive for health plans to deliver clinically necessary care, obviating the need for lawsuits.

S. 283 also includes the requirement that those in closed panel health plans be offered a point of service plan at the time of enrollment, enabling care outside of a network. The bill includes a pro-competitive provision banning health plans from excluding a class of providers based solely on licensure. Medical necessity decisions would be made by clinical peers in a fair and independent appeals process, moving the system away from some of its worst abuses.

Given the history of insurance discrimination against people with mental disorders and the serious problems associated with the delivery of mental health care by HMOs, the Bipartisan Patient Protection Act of 2001 represents a critical step forward.

Sincerely,

Alliance for Children and Families
American Academy of Child and Adolescent Psychiatry
American Association for Geriatric Psychiatry
American Association for Marriage and Family Therapy
American Association for Psychosocial Rehabilitation

National organizations representing consumers, family members, advocates, professionals and providers
c/o Peter Newbould, American Psychological Association, 750 First Street, NE, Washington, DC  20002
American Association of Children’s Residential Centers
American Association of Pastoral Counselors
American Association of Private Practice Psychiatrists
American Board of Examiners in Clinical Social Work
American Counseling Association
American Family Foundation
American Group Psychotherapy Association
American Mental Health Counselors Association
American Nurses Association
American Orthopsychiatric Association
American Psychiatric Association
American Psychiatric Nurses Association
American Psychoanalytic 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
Children and Adults with Attention-Deficit/Hyperactivity Disorder
Child Welfare League of America
Clinical Social Work Federation
Corporation for the Advancement of Psychiatry
Federation of Behavioral, Psychological & Cognitive Sciences
Federation of Families for Children’s Mental Health
International Association of Psychosocial Rehabilitation
MentalHealth AMERICA, Inc.
National Alliance for the Mentally Ill
National Association for Rural Mental Health
National Association of County Behavioral Health Directors
National Association of Protection and Advocacy Systems
National Association of School Psychologists
National Association of Social Workers
National Council for Community Behavioral Healthcare
National Depressive and Manic-Depressive Association
National Mental Health Association
Tourette Syndrome Association
Mental Health Liaison Group

April 10, 2001

Honorable Greg Ganske
U.S. House of Representatives
Washington, DC 20515

Dear Dr. Ganske:

The undersigned organizations are writing to express our strong support for the Bipartisan Patient Protection Act of 2001 (H.R. 526), which you have introduced with Representative John D. Dingell. We commend you for your leadership.

Bipartisan support for this new legislation represents a breakthrough on behalf of patients' rights. Your bill provides essential protections for all consumers in the private health insurance marketplace. MHLG is particularly pleased that the legislation contains provisions ensuring continuity of care for people with special health care needs and chronic conditions. Among other things, H.R. 526 assures timely appeals, reforms the utilization review process to require the use of properly trained personnel and guarantees access to emergency and urgent care services (which is of specific concern to adults with severe mental illnesses and children with serious emotional disturbances).

Your bill includes much needed patient protections, strong reforms of the managed care industry and due process protections for providers. H.R. 526 permits persons who have been injured by negligent decisions of health plans that delay or deny care to hold plans legally accountable. This includes persons with mental injury as well as those with physical injury. We believe that removal of ERISA’s special exemption from legal accountability will be a strong incentive for health plans to deliver clinically necessary care, obviating the need for lawsuits.

H.R. 526 also includes the requirement that those in closed panel health plans be offered a point of service plan at the time of enrollment, enabling care outside of a network. The bill includes a pro-competitive provision banning health plans from excluding a class of providers based solely on licensure. Medical necessity decisions would be made by clinical peers in a fair and independent appeals process, moving the system away from some of its worst abuses.

Given the history of insurance discrimination against people with mental disorders and the serious problems associated with the delivery of mental health care by HMOs, the Bipartisan Patient Protection Act of 2001 represents a critical step forward.

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