October 18, 2021

The Honorable Susan Collins
United State Senate
413 Dirksen Senate Office Building
Washington, D.C. 20510

The Honorable Tina Smith
United States Senate
720 Hart Senate Office Building
Washington, D.C. 20510

The Honorable Paul Tonko
United States House of Representatives
2369 Rayburn House Office Building
Washington, D.C. 20515

The Honorable Bill Huizenga
United States House of Representatives
2232 Rayburn House Office Building
Washington, D.C. 20515

Dear Senators Collins and Smith and Representatives Tonko and Huizenga:

The Mental Health Liaison Group (MHLG)—a coalition of national organizations representing consumers, family members, mental health and addiction providers, advocates and other stakeholders committed to strengthening Americans’ access to mental health and addiction care—is writing to express our strong support for the Medicare Mental Health Inpatient Equity Act. This critical legislation eliminates the discrimination against mental illnesses that continues to exist in the Medicare program as Medicare beneficiaries are limited to 190 days of inpatient psychiatric hospital care during their lifetime. This lifetime limit does not apply to psychiatric units in general hospitals and there is no such lifetime limit for any other Medicare specialty inpatient hospital service.

Through passage of landmark legislation, the Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act of 2008, Congress put coverage for mental health and substance use disorders on par with other medical disorders. Also, that year, Congress enacted legislation to equalize the Medicare outpatient coinsurance for mental and physical health. Despite this progress, discrimination against Medicare patients with mental health disorders who require ongoing psychiatric treatment and hospitalizations, when in crisis, continues to exist.

The Medicare Payment Advisory Commission reported that most Medicare beneficiaries treated in inpatient psychiatric facilities qualify for Medicare because of disability, hence they tend to be younger and poorer than the typical Medicare beneficiary. These Medicare beneficiaries live with serious mental illnesses (such as schizophrenia and bipolar disorder) and who are living with these disorders from a relatively young age. These illnesses are chronic and will require ongoing treatment and care over their lifetimes, including hospitalization when in crisis.

The elimination of the 190-day limit will equalize Medicare mental health coverage with private health insurance coverage, increase access for the most seriously ill, improve continuity of care and create a more cost-effective Medicare program.
The MHLG applauds your bipartisan leadership and looks forward to working with you and your staff to enact this important legislation.

Sincerely,

2020 Mom
American Art Therapy Association
American Association for Marriage and Family Therapy
American Association for Psychoanalysis in Clinical Social Work
American Association of Child & Adolescent Psychiatry
American Association of Suicidology
American Association on Health and Disability
American Counseling Association
American Dance Therapy Association
American Foundation for Suicide Prevention
American Group Psychotherapy Association
American Mental Health Counselors Association
American Nurses Association
American Psychiatric Association
American Psychoanalytic Association
American Psychological Association
American Society of Addiction Medicine
Anxiety and Depression Association of America
Association for Ambulatory Behavioral Healthcare
Association for Behavioral and Cognitive Therapies
Centerstone
Children and Adults with Attention-Deficit Hyperactivity Disorder
Clinical Social Work Association
Confederation of Independent Psychoanalytic Societies
Depression and Bipolar Support Alliance
Eating Disorders Coalition
Global Alliance for Behavioral Health and Social Justice
International Certification & Reciprocity Consortium
International OCD Foundation
International Society for Psychiatric Mental Health Nurses
The Kennedy Forum
Maternal Mental Health Leadership Alliance
Mental Health America
NAADAC, the Association for Addiction Professionals
National Alliance on Mental Illness
National Alliance to Advance Adolescent Health
National Association for Behavioral Healthcare
National Association for Children’s Behavioral Health
National Association for Rural Mental Health
National Association of County Behavioral Health and Developmental Disability Directors
National Association of Pediatric Nurse Practitioners
National Association of Social Workers
National Association of State Alcohol and Drug Abuse Directors (NASADAD)
National Association of State Mental Health Program Directors
National Board for Certified Counselors
National Council for Mental Wellbeing
National Disability Rights Network
National Federation of Families
National League for Nurses
National Register of Health Service Psychologists
NHMH- No Health without Mental Health
Psychotherapy Action Network
Residential Eating Disorders Consortium
Schizophrenia & Psychosis Action Alliance
Treatment Communities of America
Vibrant Emotional Health
Well Being Trust