

COALITION FOR WHOLE HEALTH

January 12, 2010

The Honorable Harry Reid
Senate Majority Leader
United States Senate
S-221 Capitol
Washington, DC 20510

The Honorable Nancy Pelosi
Speaker
U.S. House of Representatives
H-232 Capitol
Washington, DC 20515

Dear Leader Reid and Speaker Pelosi:

On behalf of the Coalition for Whole Health, the undersigned organizations are writing to express our support for provisions in the *Affordable Health Care for America Act* (H.R. 3962) and *The Patient Protection and Affordable Care Act* (H.R. 3590) that will increase access to mental health and addiction prevention, treatment and recovery support services for millions of Americans.

Specifically, we strongly support inclusion of the following provisions in the final legislation:

Inclusion of Coverage for Mental Health and Substance Use Disorders in the Essential Benefits Package

- Thank you for including coverage for mental health and substance use disorders in the essential benefits package in both bills. The Coalition respectfully asks that that all qualified health plans, including large employers, be required to offer mental health and substance use disorder benefits as part of the benefits package they offer to their enrollees. (H.R. 3962)

Expansion of the Wellstone Domenici Parity Law to All Qualified Health Insurance Plans

- We also thank you for including provisions expanding the Wellstone Domenici parity law to all qualified health insurance plans. However, legal experts have expressed concerns that the phrase “in the same manner and to the same extent” in H.R. 3590’s Section 1311(j) could be interpreted to mean that parity does not apply to small and individual plans because the “extent” to which the Public Health Service Act’s parity provisions apply to group plans is only to large group plans and it does not apply at all to individual plans. The Coalition requests the inclusion of H.R. 3962’s parity provision in the final bill and/or accompanying report language clarifying Congressional intent to include all plans. (H.R. 3962)

Expansion of Medicaid Eligibility and Mental Health and Substance Use Disorder Benefits

- The expansion of Medicaid eligibility to 150% of poverty and offering all eligible individuals full Medicaid benefits (H.R. 3962); we ask that the provision requiring that mental health and substance use disorder benefits be at parity in H.R. 3590 be retained.
- The requirement that managed care plans certify that they have the capacity to meet the health, mental health and substance use disorder needs of the newly eligible population (H.R. 3962)
- Providing states the option of enrolling Medicaid beneficiaries with chronic conditions, including mental illness and substance abuse, into a health home. Community Mental Health Centers are listed as potential health home providers (H.R. 3590)
- Inclusion of language in H.R. 3962’s Section 1729 clarifying coverage of therapeutic foster care services under Medicaid; this will ensure that children in need of intensive mental health and addiction services can receive them in less restrictive, out-of-home settings (H.R. 3962)

Inclusion of Workforce Development Funds for Mental Health and Substance Use Disorder Providers

- The inclusion of workforce development funds for mental health and substance use disorder providers. We ask that the final bill ensures that the full continuum of mental health and substance use disorder providers included in H.R. 3962’s Section 2522 are eligible to apply for grant funds. (H.R. 3590 & H.R. 3962)

Inclusion of Substance Use Disorder and Mental Illness Prevention

- Includes the Substance Abuse and Mental Health Services Administration (SAMHSA) in the list of agencies that will be consulted for the development of a national prevention and wellness plan (H.R. 3692); the Coalition also asks that final legislation explicitly includes substance abuse prevention defined as the prevention of underage drinking, tobacco use, illegal drug use and/or the misuse/abuse of over-the-counter and prescription medications and products in all community based prevention strategies, activities and funds included in the bill. The Coalition asks that final health care legislation explicitly defines “chronic disease,” “chronic illness” and “chronic condition” as including substance use disorders and serious mental illnesses.
- In a section authorizing community health team grants aimed at supporting medical homes, includes a provision to include substance use disorder prevention, treatment and mental health service providers as eligible grantees (H.R. 3590)
- Includes substance use disorders as a national priority in the report to be provided to Congress and the President by the National Prevention, Health Promotion and Public Health Council (H.R. 3590)
- Requires that substance use disorder and mental health services be provided at school-based community health centers (H.R. 3590)
- Permits state or local health departments receiving grant funds through a Department of Health and Human Services (HHS) public health grant program, administered through the Centers for Disease Control and Prevention, to enter into contracts with mental health and substance use disorder providers; screening activities conducted by grantees may include screening for mental health and substance use disorders (H.R. 3590)
- Includes a Department of Health and Human Services education and outreach campaign on the benefits of prevention (H.R. 3590)

Inclusion of Funding for Mental Health and Substance Use Disorder Screening, Brief Interventions and Treatment

- Authorization of grants for mental health and substance use disorder screening, brief intervention and treatment (H.R. 3962)
- Coverage of clinical preventive services including coverage of A and B recommendations from the Task Force on Clinical Preventive Services in the prevention benefit package for policies offered through the health exchange that will expand access to mental health and substance use disorder screenings for adults and adolescents (H.R. 3962 & H.R. 3590)
- Authorization of Substance Abuse and Mental Health Services Administration grants to facilitate the provision of primary care services to individuals with mental illness and co-occurring disorders (H.R. 3590). The Coalition requests statutory language in the final bill and/or accompanying report language clarifying that both mental health and substance use disorder community-based treatment centers are eligible to apply for grant funds.

Inclusion of Explicit Language to Ensure that State Addiction Treatment and Mental Health Laws that are Stronger than the Federal Law are Preserved

- The Coalition asks that final healthcare reform legislation includes explicit language to ensure that state mental health and substance use disorder treatment healthcare laws that are stronger, from the standpoint of the insured or the enrollee, than the protections provided by federal law are preserved. The Coalition requests statutory language in the final bill and accompanying report language clarifying that stronger state laws are protected.

Inclusion of Relevant Mental Health and Substance Use Disorder Agencies in Federal Studies or Working Groups

- As part of the Medicaid “State Plan Option Promoting Health Homes for Enrollees with Chronic Conditions” program, states are directed to consult and coordinate with the Substance Abuse and Mental Health Services Administration in addressing prevention & treatment of mental health and substance use disorders (H.R. 3590)
- Includes the Substance Abuse and Mental Health Services Administration as an agency in the “Interagency Working Group on Health Care Quality” (H.R. 3590)

Medical experts agree that addiction and serious mental illnesses are chronic diseases that can be prevented and treated effectively. Unfortunately, less than half of the 15 million adults with serious mental illness received treatment or counseling for a mental health problem and only 18 percent of the 22.6 million people in need of help for an alcohol and/or drug use problem received any form of treatment in the past year. The above provisions are essential to remedying this treatment gap and increasing access to addiction and mental health prevention, treatment and recovery support services for millions of American and their families.

Thank you again for your leadership. The Coalition for Whole Health looks forward to working with you and your staff to ensure these provisions are part of the final health care reform bill. If we can serve as a resource, please do not hesitate to contact Gabrielle de la Gueronniere or Dan Belnap at 202-544-5478, Carol McDaid at 202-737-8168, or Holly Merbaum at 202-737-7393.

Sincerely,

National Organizations:

Advocates for Recovery through Medicine (ARM)
AIDS Action Council
American Academy of Child and Adolescent Psychiatry (AACAP)
American Association of Children's Residential Centers
American Association for Geriatric Psychiatry
American Association for the Treatment of Opioid Dependence (AATOD)
American Board of Examiners in Clinical Social Work
American Foundation for Suicide Prevention/SPAN USA
American Nurses Association
American Probation and Parole Association
American Psychotherapy Association
American Society of Addiction Medicine (ASAM)
Association for Ambulatory Behavioral Healthcare
Bazelon Center for Mental Health Law
Betty Ford Center
Betty Ford Institute
Bradford Health Services
Caron Treatment Centers
The Carter Center Mental Health Program
Center for Clinical Social Work
Center for Integrated Behavioral Health Policy, Department of Health Policy, George Washington University Medical Center
Community Anti-Drug Coalitions of America (CADCA)
The Depression and Bipolar Support Alliance
Eating Disorders Coalition
Entertainment Industries Council
Faces and Voices of Recovery
Friends of SAMHSA
Hazelden Foundation
International Certification and Reciprocity Consortium (IC & RC)
Legal Action Center
National African American Drug Policy Coalition Inc. (NAADPC)

National Alliance on Mental Illness
National Association of Addiction Treatment Providers (NAATP)
National Association of Children of Alcoholics (NACoA)
National Association of County Behavioral Health and Developmental Disability Directors
National Association of Drug Court Professionals
National Eating Disorders Association
National Association of State Alcohol and Drug Abuse Directors (NASADAD)
National Association of State Mental Health Program Directors (NASMHPD)
National Association on Alcohol, Drugs and Disability
NAADAC-The Association for Addiction Professionals
National Consortium of TASC Programs, Inc. (National TASC)
National Council on Alcoholism and Drug Dependence, Inc. (NCADD)
National Council for Community Behavioral Healthcare
National Education Alliance for Borderline Personality Disorder
National Federation of Families for Children's Mental Health
National Foundation for Mental Health
Open Society Policy Center
State Associations of Addiction Services
Students for Sensible Drug Policy
Suicide Awareness Voices of Education
TeenScreen National Center for Mental Health Checkups
Therapeutic Communities of America (TCA)
United Methodist Church – General Board of Church and Society
The Watershed Treatment Programs
WestCare Foundation

State and Local Organizations:

622 Communities Partnership, Inc.
A New PATH (Parents for Addiction Treatment & Healing)
Addiction Resource Council, Inc.
Alaska Addiction Professionals Association
Alcoholism Council of New York (ACNY)
Association for Behavioral Healthcare, Massachusetts
Behavioral Health Services Association of SC
California Association of Addiction Recovery Resources (CAARR)
California Association of Alcohol and Drug Abuse Counselors (CAADAC)
The California Association of Alcohol, and Drug Program Executives (CAADPE)
California Foundation for the Advancement of Addiction Professionals (CFAAP)
Colorado Providers Association
Community Advocates, Inc.
Connecticut Association of Nonprofits
Council on Addictions of NYS (CANYS) an NCADD state affiliate
Council on Alcoholism and Addictions of the Finger Lakes
Council on Alcoholism and Drug Abuse
County Alcohol & Drug Program Administrators Association of California
DePaul's National Council on Alcoholism and Drug Dependence-Rochester Area
Drug and Alcohol Service Providers Organization of Pennsylvania
Drug and Alcohol Treatment Association of Rhode Island (DATA)
Exponents
Focus on Community
Foster Family-based Treatment Association
Friends of Recovery of Delaware and Otsego Counties, Inc.
Gateway Foundation
Illinois Alcoholism and Drug Dependence Association
Indiana Addictions Issues Coalition
Indiana Association of Substance Abuse Providers
Iowa Behavioral Health Association

LEAF Council on Alcoholism and Addictions
Maine Alliance for Addiction Recovery
Maine Alliance to Prevent Substance Abuse
Maine Association of Substance Abuse Providers
Maine Substance Abuse Foundation
MARRCH – Minnesota Association of Resources for Recovery and Chemical Health
Message Carriers of Pennsylvania, Inc
McShin Foundation
Michigan Association of Licensed Substance Abuse Organizations
Mountain View Prevention Services
The National Council on Alcoholism and Drug Abuse (NCADA) – St. Louis Area
NCADD – New Jersey
Nevada Alliance for Addictive Disorders, Advocacy, Prevention and Treatment Services (Nevada AADAPTS)
New York Association of Alcoholism and Substance Abuse Providers
Ohio Citizen Advocates for Chemical Dependency Prevention & Treatment
The Ohio Council of Behavioral Health and Family Services Providers
OPERA (Oregon Prevention Education and Recovery Association)
PAR-People Advocating Recovery
Psychotherapy & Organizational Development, LLC
RASE Project/Buprenorphine Coordinator Project
Seaway Valley Council for Alcohol/Substance Abuse Prevention, Inc.
South Suburban Council on Alcoholism and Substance Abuse
Stepping Stone of San Diego
Tarzana Treatment Centers
TASC, Inc.
Washington State Association of Alcoholism & Addiction Programs

Cc: The Honorable Steny Hoyer
The Honorable Dick Durbin
The Honorable Tom Harkin
The Honorable Chris Dodd
The Honorable Henry Waxman
The Honorable John Dingell
The Honorable Frank Pallone
The Honorable Charlie Rangel
The Honorable Pete Stark
The Honorable George Miller
The Honorable Robert Andrews