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News Feature

By Bob Curley

In a major step forward for equal medical treatment and insurance coverage for addictive and mental-health disorders, the U.S. Senate voted this week to approve the <u>Mental Health Parity Act</u>, while the House Ways and Means Health Subcommittee voted 10-3 to approve the more comprehensive <u>Paul Wellstone</u> <u>Mental Health and Addiction Equity Act of 2007</u>.

House bill sponsor Rep. Patrick Kennedy (D-R.I.) said that parity is "not just another public-policy issue ... That's a life-or-death issue for millions of Americans."

"We're very excited about the growing momentum" in support of parity legislation, said Pat Taylor, executive director of <u>Faces and Voices of Recovery</u>. "It looks like the bill has strong support on the House side and ... the bill passed by the Senate has been significantly strengthened. It now has more protections [for addiction and mental-health patients] though not as strong as the House bill."

The House measure, sponsored by Reps. Kennedy and Jim Ramstad (R-Minn.) and with 270 cosponsors, requires insurers to cover addiction and mental illnesses on par with physical illnesses, using the health plan covering members of Congress and other federal employees as a model.

Mental-health advocates have supported the compromise Senate bill, S-558, sponsored by Sens. Pete Dominici (R-N.M.) and Edward Kennedy (D-Mass.), although its protections are not as strong as the House measure. However, the Senate measure was recently amended to allow stronger state parity laws to preempt the federal legislation, and several attempts by Republican lawmakers to weaken the House bill in committee were beaten back.

"Jim and I applaud the passage of the mental-health parity bill in the Senate as an historic step in ending insurance discrimination against Americans living with brain diseases," said Rep. Kennedy. "The spirit of the action in both chambers illustrates the fact that mental-health issues have been thrust to the forefront and the American people and mental-health communities have done a great job in demanding that we address insurance discrimination." After final clearance by the Ways and Means committee -- which is expected -the House bill goes to the Energy and Commerce committee before a possible floor vote. More than 1,000 people called House Speaker Nancy Pelosi's office this week urging her to bring the measure to a vote on the House floor, and advocates have praised Pelosi for her support of the bill.

"The recovery community is speaking with one voice and we have one goal this year -- ending insurance discrimination," said Taylor. Faces and Voices of Recovery organized the call-in campaign as well as several rallies around the country in support of parity.

Taylor and others expressed optimism that the House would vote on the bill between now and the end of October. "I think it's going to happen," said Taylor. "Before I leave Congress, I expect the mental health and addiction treatment parity bill will become law," added Ramstad, who recently announced that he will retire when his current two-year term in office expires in 2008.

While differences between the House and Senate parity bills have narrowed, any measure passed by the full House will still need to be reconciled with the legislation approved by the full Senate this week. "Senate passage is a major step forward, but the work is not over. Ten years of gridlock in Congress on this issue still needs to be broken, once and for all," said Michael Fitzpatrick, executive director of the National Alliance on Mental Illness (NAMI), who urged the House to pass the Senate version of the bill.

NAMI and other mental-health groups have embraced the weaker Senate bill in the belief that it has a greater chance of passing both houses of Congress. Pamela Greenberg, chair of the <u>Coalition for Fairness in Mental Illness</u> <u>Coverage</u>, noted that the Senate bill "has unprecedented support from consumers, providers, hospitals, employers and health insurers."

The coalition includes the American Hospital Association, American Medical Association, American Psychiatric Association, American Psychological Association, Association for Behavioral Health and Wellness, Federation of American Hospitals, Mental Health America, NAMI, and the National Association of Psychiatric Health Systems.