



## **U.S. SENATE ADVOCACY ALERT**

**PLEASE CONTACT YOUR U.S. SENATORS TODAY AND ASK THEM TO SUPPORT S. 558 THE MENTAL HEALTH PARITY ACT OF 2007 WITH INCLUSION OF KEY PROVISIONS FROM HOUSE PARITY BILL, H.R. 1424**

### **WHAT YOU NEED TO DO**

**ACTION:** Please fax or email the attached model letter to both of your U.S. Senators asking them to support S. 558 with the inclusion of the key provisions (outlined below) that are in the House bill (H.R. 1424, the Paul Wellstone Mental Health and Addiction Equity Act of 2007). Please feel free to personalize the letter with your own story about discrimination you or your family member faced when trying to access care and/or information specific to your area. Find your Members of Congress by visiting <http://www.senate.gov> or by calling the U.S. Capitol Switchboard at (202) 224-3121.

### **WHAT YOU NEED TO KNOW**

**BACKGROUND:** Addiction is a chronic disease, like diabetes, asthma or hypertension, and paying for its treatment yields as good a return as paying for treatment for other chronic illnesses. Providing alcohol and drug and mental health treatment services on par with services for other physical illnesses will decrease health care and other costs for employers and society by increasing productivity; reducing accidents, absenteeism, and crime; and supporting healthier parenting. **As the parity bill is negotiated in the Senate, the following key provisions from the House bill, H.R. 1424, which are not yet contained in the Senate parity bill, must be included, so that improved access to and utilization of treatment for addiction and mental illness will truly be achieved.** The inclusion of the following principles from H.R. 1424 in S. 558 will help eliminate some of the inequitable and counter-productive barriers imposed by insurers by:

- Requiring meaningful equity with medical and surgical benefits in provision of alcohol/drug and mental health benefits for both in- and out-of-network benefits;
- Requiring parity for benefits for treatment of the full range of substance use disorders and mental health conditions in the American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders, 4th. Edition (DSM-IV);
- Requiring that plans make medical necessity criteria and reasons for any denials of reimbursement available to participants and beneficiaries upon request; and
- Specifying that state laws which provide better protections remain in effect and are not preempted by this new federal law.

*If you have any questions, please feel free to call Gabrielle de la Gueronniere or Alexa Eggleston at Legal Action Center, (202) 544-5478. Thanks for your help!*

## SAMPLE LETTER

DATE

*When addressing your Senators use the format indicated below:*

The Honorable (Full Name)  
The United States Senate  
Washington, D.C. 20510

Dear Senator \_\_\_\_\_:

The [*insert organization*], a member organization of the State Associations of Addiction Services (SAAS), would like to express our strong support for H.R. 1424, the PAUL WELLSTONE MENTAL HEALTH AND ADDICTION EQUITY ACT OF 2007, and urge that as S. 558, the MENTAL HEALTH PARITY ACT OF 2007 is negotiated in the Senate, several key provisions which are not yet contained in the Senate bill be included in the final version so that improved access to and utilization of treatment for addiction and mental illness will truly be achieved. Parity in insurance coverage for alcohol, drug and mental health treatment is imperative at a time when the Robert Wood Johnson Foundation has estimated the annual economic cost of alcohol and other drug problems in America to be more than \$400 billion. The inclusion of the key provisions outlined below from H.R. 1424 would strengthen S. 558 and improve access to lifesaving mental health and addiction treatment by limiting the discriminatory barriers that have kept thousands of Americans with mental health and substance use disorders from receiving the care they desperately need.

Addiction is a chronic disease, like diabetes, asthma or hypertension, and paying for its treatment yields as good a return as paying for treatment for other chronic illnesses. Yet, according to the 2005 National Household Survey conducted by the Substance Abuse and Mental Health Services Administration, 20.9 million people needed but did not receive alcohol and/or drug treatment. 44.4 percent of individuals who made an effort to receive treatment but were unable to, reported that cost or insurance barriers prevented them from gaining access to treatment. When privately insured individuals exhaust or are unable to access their benefits, they turn to the public sector for treatment, which increases costs to federal, state, and local governments. The inclusion of the following principles from H.R. 1424 in S. 558 will help eliminate some of the inequitable and counter-productive barriers imposed by insurers by:

- Requiring meaningful equity with medical and surgical benefits in provision of alcohol/drug and mental health benefits for both in- and out-of-network benefits;
- Requiring parity for benefits for treatment of the full range of substance use disorders and mental health conditions in the American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders, 4th. Edition (DSM-IV);
- Requiring that plans make medical necessity criteria and reasons for any denials of reimbursement available to participants and beneficiaries upon request; and
- Specifying that state laws which provide better protections remain in effect and are not preempted by this new federal law.

Providing alcohol and drug and mental health treatment services on par with services for other physical illnesses will decrease health care and other costs for employers and society by increasing productivity; reducing accidents, absenteeism, and crime; and supporting healthier parenting. Your leadership on inclusion of the key House provisions in the Senate bill is very much appreciated and will help to ensure that increasing numbers of individuals are able to access the healthcare they need.

Once again, we thank you for your consideration of this critically important bill.

Sincerely,