



538 E. Town St., Suite D  
Columbus, OH 43215  
614-221-1441 p  
614-221-1491 f  
www.mhafc.org

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## Federal Parity Alert: Action Needed

**UPDATE: NOV. 29, 2007**

Broad support for ending health-care discrimination helped pave the way for this year's unanimous Senate passage of S. 558 (mental health parity) and approval by three committees of H.R. 1424, the Paul Wellstone Mental Health and Equity Addiction Act of 2007.

However, few legislative days remain. Lawmakers need your support to enact meaningful mental health parity legislation this year. The message is clear. Without delay, Congress must assign priority to mental health parity that will help millions of Americans.

Fuel the momentum. Phone or email your Senators and Representative today.

Go to <http://www.congress.org> and enter the name or the house and your state to find your lawmaker's phone number.

Over the last month, House sponsors Patrick Kennedy (D-R.I.) and Jim Ramstad (R-Minn.) have met with Senate sponsors Pete Domenici (R-N.M.) and Edward Kennedy (D-Mass.) to discuss possible compromises. "We are at a delicate point in the negotiations," Ramstad said (Johnson, Congress Daily, 11/19).

The House bill includes provisions not included in the Senate legislation, including a broader definition of medical conditions that insurers would have to cover. In addition, the Senate bill would take effect one year after the legislation becomes law, while the House bill would be implemented Jan. 1, 2008 (Kaiser Daily Health Policy Report, 10/17).

### **U.S. Senate – S. 558**

Senate Bill 558, the Mental Health Parity Act of 2007, cleared the U.S. Senate by unanimous consent on 9/18/07. Unfortunately, the Senate bill is not limited to its advertised goal of parity. Instead, it also includes provisions that will doubtlessly be used by insurers to argue that they have the ability to overrule state laws regarding: medical necessity, utilization review, authorization, admission criteria, rules governing network/out-of-network and other "management practices".

The insurance industry is supporting the Senate bill and claims that S. 558 "protect[s] a plan's ability to manage mental health benefits, make medical necessity and appropriateness determinations . . ." (American Benefits

Council, Side-by-Side Comparison of the Senate and House Mental Health Parity Bills, 9/14/07)

U.S. House – HR 1424, the Paul Wellstone Mental Health and Addiction Equity Act of 2007, sponsored by Congressman Patrick Kennedy (D-Rhode Island) and Congressman James Ramstad (R-Minnesota) has now cleared all the Committees of jurisdiction in the U.S. House of Representatives and is poised for action on the floor of the House.

A VOTE OF THE FULL HOUSE OF REPRESENTATIVES IS EXPECTED, POSSIBLY AS SOON AS THE WEEK OF NOVEMBER 5, 2007.

During the Committee and subcommittee meetings on HR 1424, there were repeated attempts to weaken the bill through the amendment process. Some of the amendments included: additions of the Senate language giving managed care the ability to argue control of medical necessity and clinical matters, substitution of S. 558 for HR 1424, narrowing of the diagnoses covered by the House bill and elimination of parity for out-of-network benefits. All of these weakening amendments were defeated.

### **Action Needed Now ---**

CONTACT your member of the Congressional delegation to the U.S. House NOW by PHONE OR FAX (Please call or fax – security concerns delay regular mail for 3 to 4 weeks.)

### ***WHAT IS THE MESSAGE?***

- 1) SUPPORT HR 1424 WITHOUT AMENDMENTS
- 2) VOTE TO DEFEAT ALL WEAKENING AMENDMENTS
- 3) KEEP THE BILL CLEAN. Protect a state's ability to define consumer protections, bill of rights, medical necessity, etc. ---

Please take time to EXPLAIN to your member of Congress or staff why parity and protection of state law is important to you.

The goal is to get the House bill to the House/Senate Conference Committee and/or into negotiations in the strongest possible form.

Thanks for your help on this important policy issue.

*Special thanks to the Ohio Council of Behavioral Healthcare Providers for providing this alert information.*