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STATEMENT

From Mark Covall. President/CEO. National Association of Psychiatric Health Systems

on introduction of H.R.2783 The Medicare Mental Health Inpatient Equity Act

August 15, 2011

This month Rep. Paul Tonko (D-NY) introduced the Medicare Mental Health Inpatient Equity Act (H.R.2783), a measure intended to eliminate discriminatory coverage policies in Medicare. The measure is cosponsored by Rep. Pete Stark (D-CA). Sens. John Kerry (D-MA) and Olympia Snowe (R-ME) introduced a similar bill (S.374) earlier this year.

We applaud Reps. Tonko and Stark for their leadership in introducing this crucial legislation, which would help to eliminate one of the remaining vestiges of discrimination against individuals with mental illnesses. Medicare beneficiaries are currently limited to just 190 days of inpatient psychiatric hospital care in their lifetime. No other Medicare specialty inpatient hospital service has this type of arbitrary cap on benefits. The 190-day lifetime limit is problematic for patients being treated in psychiatric hospitals as they may easily exceed the 190 days if they have a chronic mental illness. The Medicare Mental Health Inpatient Equity Act would eliminate the Medicare 190-day lifetime limit for Medicare beneficiaries receiving care in a psychiatric hospital.

It is important to end discrimination – in all its forms – against individuals with mental illnesses. This House bill builds on historic laws Congress has already passed (including the Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act and the Medicare Mental Health Copayment Equity Act). This measure has garnered strong support from consumers, providers, hospitals, and organizations representing seniors. The bill is supported by a broad coalition of nearly 80 national organizations including the National Association of Psychiatric Health Systems (NAPHS) as well as the AARP, American Hospital Association, American Nurses Association, American Psychiatric Association, Federation of American Hospitals, National Alliance on Mental Illness (NAMI), National Council on Aging, and Mental Health America, among others.

We urge Congress to pass the *Medicare Mental Health Inpatient Equity Act* to end this remaining barrier to equal access and coverage for Medicare beneficiaries. Eliminating the Medicare 190-day lifetime limit will equalize Medicare mental health coverage with private health insurance coverage and expand beneficiary choice of inpatient psychiatric care providers. It will also increase access to essential treatment for the most seriously ill and help to improve continuity of care.

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