NAMI
National Alliance on Mental Illness

October 30, 2009

The Honorable Nancy Pelosi
Speaker
U.S. House of Representatives
Washington, DC 20515

Dear Speaker Pelosi:

On behalf of the more than 1,100 affiliates of the National Alliance on Mental Illness (NAMI), I am writing to offer our support for the Affordable Health Care for America Act (HR 3962). As the nation's largest organization representing children and adults living with serious mental illness and their families, NAMI looks forward to working with you and your colleagues to ensure swift House passage of this important legislation.

NAMI supports strong health care reform legislation that meets the overriding goals set forth by President Obama for expanded coverage, cost containment, quality improvement, long-term sustainability and protections to ensure that individuals and families can keep the coverage they have if they choose. NAMI would like to highlight several key provisions in the Affordable Health Care for America Act that we believe mark important steps to further comprehensive health reform.

Insurance Market Reforms
NAMI supports the full range of insurance market reforms included in HR 3962. These changes are critically important to people living with serious mental illness excluded from coverage on the basis of pre-existing medical conditions. Among these important new protections are:

- Requirements for guaranteed issue and guaranteed renewal of coverage in the individual and small group markets;
- A prohibition of pre-existing health condition exclusions as well as restrictions to severely limit the use of health status in determining premium rates;
- A prohibition on the application of annual and lifetime insurance caps and limits on out-of-pocket spending; and
- Creation of a high-risk pool to provide immediate assistance to those currently uninsured with pre-existing conditions before insurance market reforms go into effect.

Inclusion and Equitable Coverage of Mental Health and Substance Abuse Benefits
NAMI is extremely proud of what Congress was able to accomplish in 2008 with passage of the Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act. This landmark law will ensure that group health plans provide equal coverage for mental illness and substance abuse treatment relative to medical-surgical coverage with respect to durational treatment limits and financial limitations.

NAMI • 3803 North Fairfax Drive, Suite 100 • Arlington, VA 22203-1701
(703) 524-7600 • www.nami.org

NAMI is strongly supportive of language in HR 3962 that ensure that all health plans offered through the Health Insurance Exchange will be required to BOTH offer coverage of mental illness and substance use treatment AND do so in compliance with the new Wellstone-Domenici parity law. It is critical that all plans offered through the Exchange – whether purchased through the individual or small group market – comply with this important new law. New coverage made available to uninsured and underinsured must equitably cover treatment for mental illness.

Improvements to Medicare and Medicaid

NAMI is extremely grateful for the landmark improvements to the Medicare and Medicaid programs that are included in HR 3962. Among these are:

- Expansion of Medicaid eligibility to 150% of the federal poverty level (FPL), extending health coverage and security to literally millions of Americans living with serious mental illness, including childless adults not able to qualify for Medicaid in their state;
- Enhancements to the Medicare Part D program including filling the "doughnut hole" coverage gap, expansion of the Low-Income Subsidy (LIS) program and additional protections for dual eligible beneficiaries;
- Elimination of cost sharing for preventive services under Medicare and a new requirement for state Medicaid programs to cover preventive services without cost sharing;
- Authorization for a Medicaid demonstration program for emergency psychiatric services; and
- A new Medicare "medical home" pilot program to provide more coordinated and comprehensive care for beneficiaries with multiple medical co-morbidities.

Comparative Effectiveness Research (CER)

NAMI recognizes that improvements have been made in the provisions in the Energy and Commerce Committee bill setting forth structure and oversight to guide implementation of CER. New protections in HR 3962 will help ensure that differences among ethnic and minority subpopulations are more accurately measured in CER. New language will also ensure that CER is not used to inappropriately mandate payment, coverage or reimbursement policies. NAMI would urge further improvements such as those in Representative Kurt Schrader's legislation (HR 2502) ensuring that CER is overseen and implemented by an independent, non-governmental institute that genuinely represents the interests of patients, researchers and providers and reflective of how CER can best be used in real world treatment settings.

Community Living Assistance Services and Supports (CLASS) Act

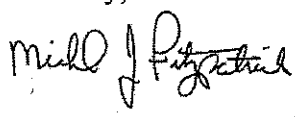
NAMI is extremely pleased that HR 3962 includes the late Senator Edward Kennedy's CLASS Act, a new voluntary, public, long-term care insurance program to help support people with significant functional limitations, including serious mental illness. After a contribution period, individuals determined to need assistance as a result of functional limitations would qualify to receive assistance to purchase services to maintain personal

and financial independence. CLASS Act assistance would supplement, and not supplant, other long-term care assistance such as Medicaid.

Finally, NAMI would like to express our gratitude for a provision in HR 3962 that would establish new standards for Federally Qualified Behavioral Health Centers (FQBHCs) under the Public Health Service Act (Section 2513). These new standards include outpatient mental illness treatment services, targeted case management, crisis intervention services, family psychoeducation, peer support and family supports. This provision, authored by Representative Doris Matsui is an important step forward in creating greater accountability in the public mental health system.

Thank you for your leadership in bringing this important legislation forward. NAMI is anxious to work with you and your colleagues in the House to achieve a strong health reform bill this year. It is critical that health reform meets the needs of children and adults living with mental illness.

Sincerely,



Michael J. Fitzpatrick, M.S.W.
Executive Director