



AATA Signs Letter to Protect Coverage of Mental Health Services

AATA

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On March 17th, 2017 AATA joined 41 other partner organizations of the Mental Health Liaison Group (MHLG) in signing a [letter](#) addressed to House Speaker Paul Ryan and House Minority Leader Nancy Pelosi urging Congress to protect the access to and coverage of mental health and substance use disorder care and services. The letter specifically expresses serious concerns about provisions of the American Health Care Act (AHCA) that would restructure the Medicaid program and end the Medicaid expansion as well as provisions that would significantly reduce the Federal premium assistance that enables enrollees to maintain continuous insurance coverage. These changes would specifically affect mental health care through the elimination of required coverage for prevention and treatment of mental illness and substance use disorders under state Medicaid managed care and alternative benefit programs.

The letter informs congressional leaders of the recent Congressional Budget Office estimate that the Medicaid provisions of the AHCA would reduce Medicaid funding by \$880 billion, or about 25 percent, in the next 10 years. The group also reminds legislators of their commitment to certain vulnerable populations—such as the 1.3 million adults with serious mental illness and the 2.8 million adults with substance use disorders who gained coverage under Medicaid expansion for the first time. This coverage gain is largely credited to the passage of 21st Century Cures and the Comprehensive Addiction and Recovery Act (CARA) of 2016.

Furthermore, for those states that have implemented expansion and are particularly affected by the opioid epidemic, the proposed elimination of mandated coverage would “likely result in state cost shifting” so that CARA appropriations and funds under the 21st Century Cures for prescription opioid addiction prevention and treatment services would replace, rather than supplement, the existing Medicaid coverage of services. A similar shift of significant costs to states over time would occur if Medicaid were converted into either a per capita cap block grant program or a simple block grant program. The estimated 30 percent premium surcharge required under AHCA due to the failure to maintain continuous coverage will likely affect the lowest-income enrollees most.

In conclusion, the partnered organizations urge Congressmen “to continue to protect these vulnerable Americans’ access to and coverage of vital mental health and substance use disorder care and services, and to not reverse the recent progress made with the enactment of key mental health and substance use disorder prevention and treatment reforms under the 21st Century Cures Act and CARA.”

