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March 14, 2017

The Honorable Paul Ryan
Speaker
U.S. House of Representatives
Washington, DC 20515

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

Dear Speaker Ryan and Minority Leader Pelosi:

We are writing on behalf of the American Psychological Association and the American Psychological Association Practice Organization to express our opposition to the American Health Care Act, as approved last week by the House Energy and Commerce Committee and House Ways and Means Committee. Our organizations comprise nearly 115,700 members and affiliates, who are clinicians, researchers, educators, consultants, and students.

As we have previously communicated, we believe that any health care reform legislation to repeal and replace the Patient Protection and Affordable Care Act (ACA) considered by Congress should increase the number of Americans with coverage for mental health and substance use disorder services, including behavioral health treatment. Unfortunately, as the recent analysis by the Congressional Budget Office (CBO) concludes, the American Health Care Act would significantly decrease Americans' access to these services, and by 2026 would take coverage away from an estimated 24 million people who would have otherwise been covered under current law, nearly doubling the proportion of Americans without health insurance.

Medicaid is a pillar of our nation's mental health treatment system, providing roughly a quarter of all financing for mental health services. Research shows that individuals in poverty are roughly twice as likely to suffer from serious mental illness as those above the poverty line. The American Health Care Act would severely undermine Medicaid by instituting per capita caps in federal payments to states that would not keep pace with per enrollee spending growth, and by eliminating the Medicaid expansion for Americans with incomes below 138% of the federal poverty level. Altogether, CBO projects that the American Health Care Act would cut Medicaid spending by \$880 billion over the next ten years and remove coverage from 14 million beneficiaries by 2026.

These cuts are unconscionable in light of the large unmet need for mental and behavioral health and substance use services, as evidenced by the tens of thousands of Americans dying each year due to opioid addiction. Currently, an estimated 12 million Americans have coverage for mental and behavioral health and substance use treatment, provided at parity with coverage for general medical services, through Medicaid expansion plans. As a result, an estimated 1.3 million Americans in these plans are receiving treatment for mental health, behavioral, and substance use disorders. The ACA requires Medicaid expansion plans to cover an essential health benefits package including services for these disorders, and this coverage must comply with mental health parity requirements established under the Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act of 2008. By drastically reducing federal spending for Medicaid, and by removing the requirement that Medicaid

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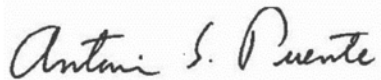
benchmark plans cover mental health, substance use, and behavioral health services, the American Health Care Act would jeopardize coverage for these life-saving treatments for the entire Medicaid population. These changes would force states to reduce enrollment and reduce benefits, harming millions of those most at risk of having a mental health, behavioral, or substance use disorder.

We are also concerned about the American Health Care Act's proposed changes to the private health insurance market, including through its reductions in premium supports and elimination of cost sharing subsidies under current law for those most in need of health insurance. CBO's analysis concludes that the American Health Care Act would reduce the quality and reliability of private sector insurance by allowing plans to offer coverage with less actuarial value, increase out-of-pocket costs for lower-income and less healthy Americans, and make it harder to shop for and compare plans. We believe these changes would combine to disproportionately impact access to mental and behavioral health and substance use services, compounded by the lingering stigma surrounding these disorders.

We also oppose the Act's elimination of vitally important funding for the Prevention and Public Health Fund, and its prohibition on funding for providers that primarily offer reproductive health services under Medicaid. The American Health Care Act would effectively cut off access to care for many low-income women and sexual and gender minorities, many of whom would not have access to health care if they could not access these service providers.

While we support efforts to strengthen and stabilize our nation's health care system and extend insurance coverage and protections, we oppose the American Health Care Act due to the adverse impact it will have on Americans with mental health, behavioral, and substance use disorders. We would greatly appreciate the opportunity to work with you to address these issues in your further work on health care reform.

Sincerely,



Antonio E. Puente, PhD
President



Cynthia D. Belar, PhD, ABPP
Interim Chief Executive Officer

cc: Senate Majority Leader Mitch McConnell
Senate Minority Leader Charles Schumer