March 23, 2017

The Honorable Paul Ryan
Speaker
U.S. House of Representatives
H-232, The Capitol
Washington, D.C. 20515

The Honorable Nancy Pelosi
Minority Leader
U.S. House of Representatives
H-204, The Capitol
Washington, D.C. 20515

The Honorable Kevin McCarthy
Majority Leader
U.S. House of Representatives
H-107, The Capitol
Washington, D.C. 20515

The Honorable Steny Hoyer
Minority Whip
U.S. House of Representatives
H-148, The Capitol
Washington, D.C. 20515


Dear Speaker Ryan, Minority Leader Pelosi, Majority Leader McCarthy and Minority Whip Hoyer:

On behalf of NAMI, the nation’s largest grassroots mental health organization dedicated to building better lives for the millions of Americans affected by mental illness, I write to express our opposition to H.R. 1628, the American Health Care Act of 2017 (AHCA). The AHCA will have a profoundly negative impact on individuals with mental health conditions and their families. Americans need more mental health coverage, not less. Unfortunately, the AHCA does not achieve this goal.

Our nation is currently facing a mental health crisis. Half of all Americans with mental illness going without treatment is just one indicator of this emergency. The main reason individuals cite for not receiving treatment is affordability. The AHCA will erode substantial federal assistance to buy insurance, leaving even more people unable to get the mental health treatment they need. Further, research shows that individuals receiving treatment early, before their conditions worsen, is vital to changing the trajectory of mental illness.

The AHCA also undermines the very coverage of mental health and substance use conditions. For decades, NAMI and its members fought for parity, or fair and equal mental health coverage. With bipartisan support, Congress passed the federal parity law in 2008 and extended the law’s reach in the Affordable Care Act of 2010. More recently, Congress overwhelmingly made a bipartisan commitment to addressing our nation’s mental health and opioid crises in the 21st Century Cures Act of 2016. The AHCA decimates these pivotal commitments and progress we have made by stripping the requirement that mental health and substance use conditions be covered under Medicaid expansion plans and the Medicaid block grant option.

NAMI is also deeply concerned that the most recent proposed changes to H.R. 1628 will remove existing requirements for Essential Health Benefits (EHBs) in individual and small group plans. This would allow plans to completely exclude coverage for mental illness and substance use disorders.

The AHCA proposes massive federal cuts to Medicaid, the single largest payer of mental health and substance use services in the United States. Medicaid is the primary funder of the public mental
health system which serves people with the most severe mental illnesses. As you are aware, the CBO reported that the AHCA will slash federal Medicaid spending by $880 billion over the next decade. This disinvestment will threaten the ability of millions to access the mental health and substance use services they need to experience recovery, stay off the streets and out of the criminal justice system.

Unfortunately, the AHCA also effectively ends the expansion of Medicaid. Today, nearly 1 out of 3 individuals covered by Medicaid expansion lives with a mental health or substance use condition. Medicaid expansion is a lifeline for people with mental illness who typically fall through the cracks. It provides coverage to people with mental health conditions who are too sick to navigate the traditional Medicaid application process, who are just stable enough not to qualify for disability (often because they are coming out of a psychiatric hospital), or who have first symptoms of a serious mental illness. Additionally, Medicaid expansion is helping individuals with mental health and substance use conditions get the treatment they need to finish school, get back to work and contribute to society.

NAMI has applauded Congress’ bipartisan recognition and support of mental health care over the past several years. However, we oppose the AHCA as it will reverse the important strides we have made together to ensure all Americans receive the mental health care they need to lead productive lives. Additionally, we remain deeply concerned that the cost-shifting mechanisms contained in the AHCA will drive people with mental illness into homelessness and costly emergency rooms, hospitals and jails.

NAMI appreciates the challenges in reforming America’s health care system and recognizes improvements need to be made. We remain committed to working with you, Congress and the Administration to improve mental health coverage for children and adults throughout our nation.

Sincerely,

Mary Giliberti, J.D.
Chief Executive Officer
NAMI