



National Asian American Pacific Islander Mental Health Association

Healthcare Reform and Mental Health

The need to reform the current healthcare system, including the provision of mental health and substance use services has been an ongoing debate for decades. In 2010, major provisions for a reformed system were addressed in what is referred to as Healthcare Form. The **Patient Protection and Affordable Care Act** (PPACA, H.R.3590) was signed into law on March 23, 2010 by President Obama and the **Health Care and Education Reconciliation Act**, signed on March 30, was designed to amend certain provision in the PPACA. Together they are known as the **Affordable Care Act (ACA)**. In March, 2012, the **Mental Health Excellence Act, S 2257** was introduced by Senators Jack Reed (D-RI) and Debbie Stabenow (D-MI). If passed, this bill will establish federal status for organizations that provide mental health services for millions of individuals with mental and addictive disorders. This will help relieve added stress placed on the system due to increased demand/eligibility for mental health services.

Mental Health Issues ~ there can be no health without mental health

Mental health impacts every aspect of a person's life including one's physical health, the ability to do well at work and school and maintain healthy personal relationships

- Many AANHPIs experience serious mental health problems including high rates of depression, post traumatic stress disorder and thoughts of suicide.
- Those with limited English proficiency are at particular risk for mental health and related health problems.
- Failure to receive accurate assessment/diagnosis can lead to poor outcomes and increased severity of symptoms
- Individuals with serious mental health problems die 25 years earlier than the general population ~ usually due to health related conditions that could have been addressed had they received proper mental health care in collaboration with their medical care
- Failure to address mental health issues increases likelihood of person not taking proper care of their physical health including proper diet, exercise, taking medications and following medical regimen.
- The burden of disease from mental disorders exceeds that of any other health condition
- There is a direct correlation between mental health, diabetes, cardiovascular disease, obesity, asthma and other health conditions
- Mental illness represents four of the top six sources of disability for Americans ages 15-44
- Approximately 22% of adults with mental illness and/or substance use disorders are uninsured.
- 30% of individuals with co-occurring mental illness and substance use disorders lack any insurance.
- One in three uninsured adults with mental illness and/or substance use disorders is under 100% of the federal poverty line.
- The US spends more than \$2 trillion annually on health care, the highest in the world, yet tens of millions of Americans continue to have poor quality of health due to chronic diseases like cancer, diabetes, Alzheimer's and mental health disorders
- Important to provide quality care because~ people with serious mental health conditions do get better!

Access to quality care is critical ~ Recovery is possible!

Mental Health Provisions in Healthcare Reform

The Affordable Care Act will greatly expand access to health care coverage that includes mental health and addiction treatment. The Mental Health Parity and Addiction Equity Act is also expanded to apply to health insurance plans for small business and individuals.

Insurance Reform

- All participating health plans must provide mental health and substance use coverage.
- Mental health and addiction treatment must be covered in new plans offered to the uninsured through the exchanges
- Cannot deny coverage based on pre-existing conditions. This is important because mental illness is frequently considered a pre-existing condition
- The law bans lifetime and unreasonable annual dollar limits, but restrictions can still be applied using non-monetary criteria e.g. number of mental health visits, or length of stay in the hospital
- Individuals may select any primary care provider that accepts their insurance. Helps insure continuity of care which is critical for those with chronic mental health issues
- Mental Health Parity and Addiction Equity Act is expanded to include health insurance plans offered to small business and individuals
- Coverage of dependent children up to age 26 for all individual and group policies

Medicaid

Medicaid is the single largest payer for mental health services, providing services and supports for 58 million adults and children. People with serious mental illnesses need the full array of Medicaid services that include benefits not covered in typical insurance plans (e.g. psychiatric rehabilitation services) but are covered in Medicaid.

- Coverage expanded to individuals with income at or below 133% of poverty level
- Gradually closes Part D prescription drug program donut hole, the period during which individuals become responsible for the full cost of medications until their spending reaches a much higher level and preserves access to mental health medication.
- State Medicaid programs must allow low SES individuals to apply for coverage in familiar places such as Federally Qualified Health Centers, and locations other than welfare offices.
- Elimination of co-pays or deductibles for preventive care is important for many with mental health problems who do not have a disposable income
- The bill enables state Medicaid programs to cover home visitation by trained nurses to families during a first pregnancy or with a child under 2. This can help reduce maternal depression and thus improve care of children
- Maintain current eligibility standards for state Children's Health Insurance Program (CHIP) until at least 2019 and funded through 2015
- Individuals with at least two chronic conditions or at least one serious mental health condition can designate a provider, including a community mental health center, as a health home to be responsible for coordination of care.
- States have option to expand Medicaid (with regular match) to childless adults beginning April 1, 2010

Prevention

Prevention is key to keeping down health costs, improving the quality of life and reducing the prevalence of serious mental health/health problems that could have been avoided had better prevention efforts been available. On June 10, President Obama signed an Executive Order creating the National Prevention, Health Promotion and Public Health Council that coordinates prevention activities across federal agencies. The ACA

- Provides Prevention and Public Health Fund for prevention and public health programs
- Community transformation grant program will support community based prevention and wellness services
- Funding for early childhood home visitation programs
- Funding for school-based health clinics, with explicit directions to include mental health and substance use assessment, treatment and referral
- Expand access to prevention services, including annual wellness visits, and include outreach and education campaigns
- Provides incentives for employers who participate in/establish wellness program
- New annual wellness visit benefit that provides comprehensive health risk assessment and creates personal prevention plan

Community Mental Health and Addiction Safety Net Equity Act, HR 5636

The \$2 billion cut in public mental health services has created major gaps in availability of services to some of the country's most vulnerable populations, including Asian Americans, Native Hawaiians and Pacific Islanders, AANHPIs. This along with increased eligibility for Medicaid coverage requires the development of other options to insure continued mental health services. The need to integrate mental health, substance abuse and physical health is a necessary change in how services are provided. It is not only cost effective but it also represents a holistic approach that is culturally appropriate for AANHPIs who do not separate the mind, body or spirit. One of the challenges, however, is insuring that as the service delivery system is changed, mental health and substance use services are not lost. The shift must reflect a strength based, recovery focused, client centered approach that assumes a public health perspective, recognizing that mental health issues cannot be separated from other parts of a person's life, e.g. education, employment, housing, and immigration. HR 5636 proposes to strengthen the behavioral health centers to work in collaboration that can compliment Federally Qualified Health Centers.

HR 5636 offers new definition for Federally Qualified Behavioral Health Centers

- Identifies core services, creates nationwide cost based reimbursement and establishes accountability guidelines
- Medicaid Health Home State Option requires mandatory subcontract with behavioral health organizations to serve as medical homes for those with serious mental health conditions
- Helps insure parity for mental health and substance use services

Resources and references:

- American Psychiatric Association www.psych.org
- American Psychological Association www.api.org
- Asian Pacific Islander American Health Forum www.apiahf.org
- Association for Asian Pacific American Health Organizations www.aapcho.org
- Bazelon Center for Mental Health Law www.bazelon.org
- Centers for Medicare and Medicaid Services Multilingual Publications
www.medicare.gov/publications/multilanguage.asp
- Families USA Fact Sheets www.familiesusa.org
- Henry J. Kaiser Family Foundation www.healthreform.kff.org
- Ignatius Bau Health Policy Consultant www.ignatiusbau.com
- Library of Congress Thomas Home www.thomas.loc.gov
- Mental Health America www.mentalhealthamerica.net
- National Alliance on Mental Illness www.nami.org
- National Association of State Mental Health Program Director www.nashmpd.org
- National Conference of State Legislatures www.ncsl.org
- National Council for Community Behavioral Healthcare www.thenationalcouncil.org
- Robert Wood Johnson www.rwjf.org/healthpolicy
- U.S. Department of Health and Human Services www.healthcare.gov
- U.S. Dept. of Health and Human Services, Substance Abuse and Mental Health Services Administration www.samhsa.gov