

GOVERNMENTAL AFFAIRS
OFFICE

AMERICAN BAR ASSOCIATION

Governmental Affairs Office

740 Fifteenth Street, NW
Washington, DC 20005-1022
(202) 662-1760
FAX: (202) 662-1762

DEPUTY DIRECTOR
Denise A. Cardman
(202) 662-1761
cardmand@staff.abanet.org

SENIOR LEGISLATIVE COUNSEL
R. Larson Frisby
(202) 662-1098
frisbyr@staff.abanet.org

Lillian B. Gaskin
(202) 662-1768
gaskinl@staff.abanet.org

LEGISLATIVE COUNSEL
Kristi Gaines
(202) 662-1763
gainesk@staff.abanet.org

Kenneth J. Goldsmith
(202) 662-1789
goldsmithk@staff.abanet.org

Kerry M. Lawrence
(202) 662-1766
lawrenck@staff.abanet.org

Ellen McBarnette
(202) 662-1767
mcbarnee@staff.abanet.org

E. Bruce Nicholson
(202) 662-1769
nicholsonb@staff.abanet.org

DIRECTOR GRASSROOTS
OPERATIONS/LEGISLATIVE COUNSEL
Julie M. Strandlie
(202) 662-1764
strandlj@staff.abanet.org

INTELLECTUAL PROPERTY
LAW CONSULTANT
Hayden Gregory
(202) 662-1772
gregoryh@staff.abanet.org

STATE LEGISLATIVE COUNSEL
Rita C. Aguilar
(202) 662-1780
aguilarr@staff.abanet.org

EXECUTIVE ASSISTANT
Julie Pasatiempo
(202) 662-1776
jpasatiempo@staff.abanet.org

STAFF DIRECTOR FOR
INFORMATION SERVICES
Sharon Greene
(202) 662-1014
greenes@staff.abanet.org

EDITOR WASHINGTON LETTER
Rhonda J. McMillion
(202) 662-1017

March 5, 2008

U.S. House of Representatives
Washington, DC 20015

Re: H.R. 1424, the Paul Wellstone Mental Health and Addiction Equity Act

Dear Representative:

In support of access to treatment for those with substance abuse and mental health ailments, the American Bar Association supports H.R. 1424, the Paul Wellstone Mental Health and Addiction Equity Act of 2007, introduced by Congressmen Patrick J. Kennedy.

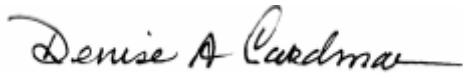
Currently, most health insurance benefit programs, in both the public and the private sectors, do not adequately cover substance abuse and mental health treatment. Often, insurers disallow coverage of specific services, impose annual or lifetime maximums on expenditures for those services unrelated to the treatment standards, impose limits on the number of outpatient visits or inpatient days for substance abuse and mental health care or simply do not offer coverage for mental health or substance abuse treatment at all. Stringent limitations can act as road blocks to recovery by preventing individuals from receiving essential care. While states may assure stronger coverage for their citizens, a national minimum would enhance coverage for all.

Because alcohol and substance use and dependence are chronic, relapsing illnesses, an individual with either condition could easily exhaust what insurance coverage is available before treatment is complete. Those unable to pay for uncovered services would be forced to either forgo necessary treatment or rely upon overburdened publicly funded healthcare systems. Most of which are not designed to handle the unique needs of individuals dependent on alcohol and other drugs. Nonetheless, for many, the public care network has become the primary source of care, and funds for care for mental health and substance abuse treatment.

The cost to the individuals, their families, their communities and the U.S. economy resulting from the lack of treatment for substance abuse, addiction or mental health are well documented, and the consequences of inadequate access to treatment are evident in the workplace, in schools, and in the criminal justice systems. The cumulative burden upon our nation's economy is enormous. For instance, substance use results in a considerable burden on the workplace and cost to employers in the form of absenteeism, "presenteeism" (attending work with symptoms that impair performance), disability leave, and "critical incidents," such as on-the-job accidents. Clinical depression alone is estimated to cost the economy more than \$30 billion per year and bipolar disorder is believed to cost as much as \$14 billion per year. These costs to society and to the economy are unacceptable and could be ameliorated if every insured individual had access to medically necessary treatment.

The ABA supports H.R. 1424 because it would bring parity to medical treatment for substance abuse and mental health in comparison with other medically necessary care by removing unreasonable limits on care. This legislation offers a flexible approach that would allow the states to further define care for their citizens. We therefore urge your support for passage of the measure.

Sincerely,

A handwritten signature in cursive script that reads "Denise A. Cardman". The signature is written in black ink and is positioned below the word "Sincerely,".

Denise A. Cardman