



LEGISLATIVE ALERT

American Mental Health Counselors Association
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Senate Health Reform Package Falters in Enhancing Access; Bill Fails to Recognize LMHCs as Medicare Providers

Alexandria, VA – November 20, 2009 – This past Wednesday Senate Majority Leader, Harry Reid (D-NV), unveiled the Senate's health care reform package. He pronounced the bill as being one to expand health care coverage to millions of Americans. As currently written, the Senate's health care reform bill continues to deny mental health access to millions of Medicare beneficiaries. **The bill unveiled by Senator Reid lacks Medicare eligibility of licensed mental health counselors (LMHCs).**

For months, AMHCA, in conjunction with other organizations representing the interests of mental health counselors and marriage and family therapists, has pushed for inclusion of Senator Lincoln's Medicare reimbursement bill, S. 671, in the Senate's health care reform package. AMHCA's cries to include Medicare reimbursement in the Senate health care reform bill are falling on deaf ears, as every U.S. Senator's office has been apprised of S. 671 and the great need for its enactment, but S. 671's Medicare reimbursement of LMHCs cannot be found anywhere in the Senate's health care reform bill.

It's not too late for your U.S. Senators to include S. 671 in the final Senate health care reform bill. With over 77 million Americans residing in areas characterized as mental health shortage areas and a great share of well-educated and highly trained LMHCs residing in underserved areas, there is no reason to deny LMHCs recognition under Medicare. The House rose to the occasion two weeks ago, including Medicare recognition of LMHCs in Section 1308 of its health reform bill, H.R. 3962, the Affordable Health Care for America Act. Economically, it would be an exercise of fiscal prudence to make LMHCs eligible as outpatient Medicare mental health providers. The Congressional Budget Office's recent scoring of Medicare recognition of LMHCs came to \$400 million over 10 years. Medicare presently spends mental health dollars inefficiently, with 80 percent of its mental health costs going to higher cost inpatient health care and only 20 percent being directed at lower cost, preventive outpatient care, like psychotherapy. Increased access to outpatient mental health providers can reign in the higher costs stemming from inpatient mental health care and chronic physical illness, each arising from lack of outpatient mental health care services.

AMHCA urges its members to call their U.S. Senators and ask that they sign onto S. 671 as a cosponsor and additionally ask for S. 671's inclusion in the Senate health care reform bill. Over 100,000 highly trained mental health clinicians stand ready and able to deliver outpatient mental health services to Medicare beneficiaries. Time is of the essence; **please call the Capitol Switchboard at 202-224-3121** and ask to be connected to your U.S. Senators' offices. Let your Senators know you stand ready, willing, and more than competent to provide much needed mental health services to Medicare's beneficiaries. Let them know enhanced access to mental health care in conjunction with a reduction in overall health care expenditures CAN BE and MUST BE achieved via incorporation of S. 671 into the Senate's health reform package.

Contact Julie A. Clements, J.D., AMHCA Director of Legislative Affairs, at jclements@amhca.org or 1-800-326-2642 if you have further inquiries.