



1000 Wilson Blvd., Suite 1825
Arlington, VA 22209

December 16, 2015

**Board of Trustees
2015-2016**

Renée L. Binder, M.D.
President

Maria A. Oquendo, M.D.
President-Elect

Altha J. Stewart, M.D.
Secretary

Frank W. Brown, M.D.
Treasurer

Paul Summergrad, M.D.
Jeffrey A. Lieberman, M.D.
Dilip V. Jeste, M.D.
Past Presidents

Jeffrey L. Geller, M.D., M.P.H.
Vivian B. Pender, M.D.
Brian Crowley, M.D.
Ronald M. Burd, M.D.
R. Scott Benson, M.D.
Melinda L. Young, M.D.
Jeffrey Akaka, M.D.
Anita S. Everett, M.D.
Lama Bazzi, M.D.
Gail E. Robinson, M.D.
Ravi N. Shah, M.D., M.B.A.
Stella Cai, M.D.
Trustees

**Assembly
2015-2016**

Glenn Martin, M.D.
Speaker

Daniel Anzia, M.D.
Speaker-Elect

Theresa Miskimen, M.D.
Recorder

Administration

Saul Levin, M.D., M.P.A.
CEO and Medical Director
Paul T. Burke
Executive Director
APA Foundation

The Honorable Joe Kennedy III
US House of Representatives
306 Cannon House Office Building
Washington, DC 20515

Dear Representative Kennedy,

On behalf of the American Psychiatric Association (APA), the national medical specialty society representing more than 36,000 physicians specializing in psychiatry, we are writing in support of your Behavioral Health Coverage Transparency Act. This legislation would strengthen enforcement of established parity law to more fully realize the promise of access to equitable and comprehensive insurance coverage of mental health and substance use disorder (MH/SUD) services.

The need for improved access to psychiatric care is great. 43.8 million adults experienced mental illness in 2013 and 1 in 5 teens ages 13–18 have experienced a severe mental disorder.^{1,2} The Mental Health Parity and Addiction Equity Act of 2008 (MHPAEA) was landmark bipartisan legislation that barred most private health plans from engaging in discriminatory activities targeting beneficiaries with mental illness, including substance use disorders. While insurance companies have largely eliminated discriminatory and differential copays and deductibles in accordance with the law, plans creatively circumvent other parity requirements through opaque policies and harmful practices that effectively limit beneficiaries' access to needed psychiatric care and increase the cost of care for patients in need of MH/SUD treatment services.

Your legislation addresses these continued challenges through the authorization of random audits and public reporting that would bring further scrutiny of plans' parity compliance analyses. These added tools will aid robust federal, state and consumer access to insurance data, and in turn better identify violations and promote compliance.

We applaud your leadership as well as that of others in Congress who are undertaking efforts to make meaningful and comprehensive reforms to our nation's broken mental health system, including through addressing gaps in enforcement of the historic mental health parity law. We look forward to working with you to enact this legislation. If you have any questions, or if we can be of further assistance, please contact Jeffrey P. Regan, Deputy Director, Federal Affairs at jregan@psych.org.

Sincerely,

Renée Binder, M.D.
President

Saul Levin, M.D., M.P.A.
CEO and Medical Director

¹ Any Disorder Among Children. (n.d.) The National Institute of Mental Health. Retrieved December 11, 2015, from <http://www.nimh.nih.gov/health/statistics/prevalence/any-disorder-among-children.shtml>

² Any Mental Illness (AMI) Among Adults. (n.d.). The National Institute of Mental Health. Retrieved December 11, 2015 from <http://www.nimh.nih.gov/health/statistics/prevalence/any-mental-illness-ami-among-adults.shtml>