



MENTAL HEALTH ACCESS IMPROVEMENT ACT OF 2017 (H.R. 3032)

In June 2017, Representatives John Katko (R-NY) and Mike Thompson (D-CA), introduced the Mental Health Access Improvement Act of 2017 (H.R. 3032). This legislation would allow marriage and family therapists (MFTs) and licensed mental health counselors to directly bill Medicare for their services. Currently, these professionals are not eligible Medicare providers, despite the important role they play in delivering treatment, recovery and prevention services to seniors and people with disabilities, particularly in underserved, rural areas with a mental health workforce shortage. This simple change would immediately increase patients' access to needed care in their communities. Additionally, the National Council and Hill Day Partners support adding language that would ensure patients' access to counselors who are trained, credentialed and licensed to provide addiction treatment.

WHY DO WE NEED THE MENTAL HEALTH ACCESS IMPROVEMENT ACT?

Older Americans have high rates of mental illness and suicide, yet have lower rates of treatment than others. Individuals age 65 and older have the highest rates of mental health-related hospitalizations and a suicide rate that exceeds the rest of the population. Yet, they are the least likely to receive mental health services, with only one in five receiving needed therapy. Allowing additional providers to serve Medicare enrollees with behavioral health disorders offers a remedy for this lack of access to care.

MFTs and counselors practice in areas without access to other Medicare-covered professionals. With 77 percent of U.S. counties experiencing a severe shortage of behavioral health professionals, over 80 million Americans live in areas that lack sufficient providers. According to the Substance Abuse and Mental Health Services Administration, fully half of all U.S. counties have no practicing psychiatrists, psychologists or social workers. Many of these rural and underserved areas without any current Medicare providers do have practicing MFTs and/or mental health counselors, including counselors who have been trained and licensed to provide addiction services.

BOTTOM LINE

Expanding Medicare providers relieves the behavioral health workforce shortage

REQUEST FOR REPRESENTATIVES

Cosponsor the Mental Health Access Improvement Act of 2017 (H.R. 3032)

REQUEST FOR SENATORS

Please cosponsor this legislation when it is introduced

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Expanding the workforce pool would expand patients' access to treatment. Allowing qualified, previously ineligible providers to directly bill Medicare for their services would immediately alleviate the strain on our nation's mental health and addiction workforce serving Medicare enrollees, adding an estimated 200,000 mental health providers to the Medicare network. This legislation would not change the Medicare mental health benefit or modify states' scope of practice laws, but would instead allow Medicare enrollees access to medically necessary covered services provided by mental health and addiction professionals who are properly trained and licensed to deliver such services.

Counselors and MFTs have equivalent training and licensure standards to providers already included within Medicare. MFTs and licensed mental health counselors must obtain a master's or doctoral degree, two years' post-graduate supervised experience and pass a national exam to obtain a state license, requirements comparable to those placed on Medicare-covered clinical social workers. Counselors and MFTs are trained in addictions and can go through additional training to become certified as addiction specialists. All 50 states license these professionals and their services are covered by other federal programs like TRICARE and the Veterans Administration.

Congress has long supported this change. Legislation to include MFTs and mental health counselors in Medicare has won bipartisan support over eight past Congresses and was passed in either the full House or Senate on four separate occasions.

MENTAL HEALTH ACCESS IMPROVEMENT ACT COSPONSORS

AS OF 9.19.17

H.R.3032

AZ: Ruben Gallego (D-07)

CA: Alan Lowenthal (D-47)

CA: Anna Eshoo (D-18)

CA: Grace Napolitano (D-32)

CA: Judy Chu (D-27)

CA: Julia Brownley (D-26)

CA: Mike Thompson (D-05)

Lead Sponsor

CA: Pete Aguilar (D-31)

CA: Ted Lieu (D-33)

CA: Zoe Lofgren (D-19)

CO: Scott Tipton (R-03)

IA: David Young (R-03)

MD: Jamie Raskin (D-08)

MO: Lacy Clay (D-01)

NE: Jeff Fortenberry (R-01)

NV: Ruben Kihuen (D-04)

NY: Daniel Donovan (R-11)

NY: Elise Stefanik (R-21)

NY: John Faso (R-19)

NY: John Katko (R-24)

Lead Sponsor

OH: Joyce Beatty (D-03)

OR: Earl Blumenauer (D-03)

OR: Peter DeFazio (D-04)

VA: Barbara Comstock (R-10)

CBO Score: The Congressional Budget Office has not yet scored this legislation.

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