

Congress of the United States
Washington, DC 20510

September 6, 2017

The Honorable Tom Price
Secretary
Department of Health and Human Services
200 Independence Ave. SW
Washington, DC 20201

Dear Secretary Price:

We are writing to request an update on the status of the implementation of the Mental Health and Addiction Insurance Help Consumer Portal, which was created in October 2016 to help improve compliance with mental health and substance use disorder coverage parity requirements in current law.

Insurance coverage for behavioral health services is critical to the health of our constituents and to our ability to address the opioid crisis devastating communities across the country. The Wellstone-Domenici Mental Health Parity and Addiction Equity Act of 2008 (MHPAEA) and the Affordable Care Act (ACA) require that insurance coverage for behavioral health care services is equivalent to the coverage that insurers provide for physical health care services.

However, surveys of consumers and reports from our constituents tell a very different story. According to 2015 data from the Substance Abuse and Mental Health Services Administration, almost 18 percent of adults in the U.S. have some type of mental illness, yet less than half of these individuals receive mental health services.¹ Lack of coverage for mental health services is a key cause of this gap in treatment. A 2015 survey from the National Alliance on Mental Illness (NAMI) found that nearly twice as many respondents had been denied coverage for mental health services as for general medical care.²

The lack of robust data regarding denial rates, reasons for denials, and insurance plan design further complicates enforcement of mental health parity. Consumers may find it difficult to navigate the process of appealing coverage denials and reporting problems.

¹ Center for Behavioral Health Statistics and Quality, “Key Substance Use and Mental Health Indicators in the United States: Results from the 2015 National Survey on Drug Use and Health” (2016) (online at: <https://www.samhsa.gov/data/sites/default/files/NSDUH-FFR1-2015/NSDUH-FFR1-2015/NSDUH-FFR1-2015.htm#mhi>)

² National Alliance on Mental Illness (NAMI), “A Long Road Ahead – Achieving True Parity in Mental Health and Substance Use Care” (April 2015) (online at: <https://www.nami.org/About-NAMI/Publications-Reports/Public-Policy-Reports/A-Long-Road-Ahead/2015-ALongRoadAhead.pdf>)

Parity is the law of the land, but we need more transparency and better tools to enforce these laws and empower consumers.

In order to help address persistent lack of compliance with existing parity laws, we have urged the creation of a “consumer parity portal” website that would allow consumers to submit complaints and report violations of parity requirements to a central online clearinghouse.³ The Mental Health and Substance Use Disorder Parity Task Force, established by President Obama to identify and promote best practices for improving compliance with current requirements for mental health and substance use disorder parity, also recommended creating “a one-stop consumer web portal to help consumers navigate parity” that would enable consumers to “get to the correct resource to help them solve their coverage issue, file a complaint, or submit an appeal, as necessary.”⁴

In conjunction with the October 2016 release of the Task Force’s final report, the Department of Health and Human Services (HHS) also released a beta version of a consumer parity portal website: the Mental Health and Addiction Insurance Help Consumer Portal.⁵ The Task Force was clear that the beta version of the consumer parity portal was only “an initial step,” saying that “fully implementing this recommendation will require time and resources.” The Task Force also emphasized that “this resource creates a starting point for future efforts to build out additional functionality such as complaint tracking.”⁶ Currently, the website merely directs individuals to the various federal or state agencies who would handle their claim and provides general information on parity laws.

In order to improve our understanding of how your administration intends to use the Mental Health and Addiction Insurance Help Consumer Portal to address parity violations and ensure individuals have access to mental and behavioral health care, we ask that you provide written answers to the following questions by September 29th, 2017.

1. HHS indicated that it was “optimizing search terms to help consumers find and use this resource” when the agency announced the beta release of the parity portal.⁷ What is the status of those actions, and what other actions has HHS taken to help consumers find and use this website and information about mental health and substance use disorder parity rights? What other steps does it intend to take,

³ H.R. 4276 (114th Congress) and S. 2647 (114th Congress). Letter to Director Cecilia Muñoz, White House Domestic Policy Council, to inform the Mental Health and Substance Use Disorder Parity Task Force (July 14, 2016) (online at: <https://www.murphy.senate.gov/newsroom/press-releases/murphy-leads-17-senators-in-urging-white-house-to-take-new-action-to-improve-mental-health-parity>).

⁴ Mental Health and Substance Use Disorder Parity Task Force, *Final Report* (October 2016), p. 23 (online at: <https://www.hhs.gov/sites/default/files/mental-health-substance-use-disorder-parity-task-force-final-report.pdf>).

⁵ Department of Health and Human Services, “Mental Health and Substance Use Disorder Parity Task Force” (October 27, 2016) (online at: <https://www.hhs.gov/about/agencies/advisory-committees/parity/#report>). Department of Health and Human Services, “Mental Health and Addiction Insurance Help” (online at: <https://www.hhs.gov/mental-health-and-addiction-insurance-help>).

⁶ Mental Health and Substance Use Disorder Parity Task Force, p. 23.

⁷ Mental Health and Substance Use Disorder Parity Task Force, p. 23.

and what is the timeline for these actions?

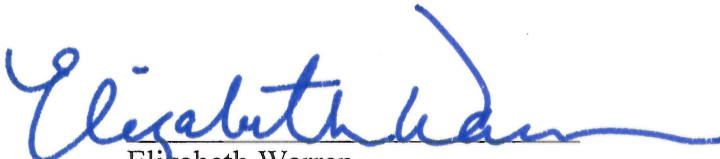
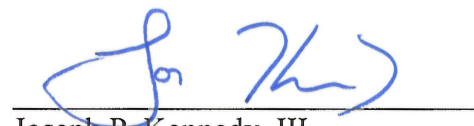
2. Has HHS established goals for the number of unique visitors to the website? If so, what are these goals? Does HHS track the number of visitors who access the parity portal? If so, how many unique visitors has the parity portal received in each month since its launch in October 2016?
3. Does HHS track how many individuals have sought help for different types of insurance coverage? If so, how many individuals sought assistance in dealing with the following categories (as categorized on the portal)?
 - a. Employer private insurance
 - b. Individual private insurance
 - c. Medicaid or Children's Health Insurance Program (CHIP)
 - d. Medicare
 - e. Government employees, Veterans, and Military? Specifically,
 - i. VA
 - ii. DOD/TRICARE
 - iii. Federal Government
 - iv. State Government
 - v. Municipal Government
 - f. Other
4. Does HHS track how many individuals used the portal to connect directly to the agencies to which it guided them for assistance? If so, for the agencies where website links were provided, how many individuals directly connected to:
 - a. The U.S. Department of Labor's Employee Benefits Security Administration (EBSA),
 - b. State insurance complaint sites,
 - c. State Medicaid and CHIP programs,
 - d. The Department of Veterans Affairs, or
 - e. TRICARE?
5. The Mental Health and Substance Use Disorder Task Force said the beta portal "creates a starting point for future efforts to build out additional functionality such as complaint tracking."⁸ What is your timeline for making such improvements?
6. Does the Department plan to add additional functions to the parity portal such as
 - a. Tracking of:
 - i. The types of complaints received by the agencies that portal directs individuals to,
 - ii. How complaints are resolved by each agency,
 - iii. The average time it takes each agency to resolve a complaint,

⁸ Mental Health and Substance Use Disorder Parity Task Force, p. 23.

- b. A central online clearinghouse for complaint submissions,
- c. Processes for guaranteeing a timely response to consumers,
- d. Processes for guaranteeing a timely response by covered plans to regulators,
- e. Electronic infrastructure allowing HHS to collaborate with other agencies and states, or
- f. Other functionalities?

It is critical we ensure individuals seeking mental and behavioral health care have access to the services and coverage that they need – and to which they are entitled by law. If you have any questions about this request, please do not hesitate to contact Julia Frederick (julia_frederick@warren.senate.gov) in the office of Senator Elizabeth Warren or Sarah Curtis (sarah.curtis@mail.house.gov) in the office of Representative Joseph P. Kennedy, III.

Sincerely,


Elizabeth Warren
United States Senator
Joseph P. Kennedy, III
Member of Congress

CC:

Elinore McCance-Katz, M.D., Ph.D, Assistant Secretary for Mental Health and Substance Abuse, Substance Abuse and Mental Health Services Administration