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To: EBSA, E-OHPSCA - EBSA

Subject: Comments in response to the "Request for Information Regarding the Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act of 2008."

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DEPARTMENT OF THE TREASURY, Internal Revenue Service, 26 CFR Part 54, RIN 1545-BI70, DEPARTMENT OF LABOR, Employee Benefits Security Administration, 29 CFR Part 2590, RIN 1210-AB30, DEPARTMENT OF HEALTH AND HUMAN SERVICES, Centers for Medicare & Medicaid Services, 45 CFR Parts 144 and 146, [CMS-4140-NC]RIN 0938-AP65

The Hawaii Substance Abuse Coalition, a group of substance abuse and mental health providers throughout the state of Hawaii, provide the following comments and recommendations.

We commend government for enacting The Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act of 2008 that there is improved treatment for these illnesses leading to wellness in recovery as positive community members:

- Having the same co-pays, cost-sharing percentages and rules for out-of-pocket expenses as for other medical benefits will end a major access to treatment problem as well as communicate to families and communities that there is hope because these illnesses are treatable as are other medical conditions.
- Ending treatment limitations for restricting the number of visits or number of days for inpatient or outpatient treatment, especially annual and lifetime maximums, will ensure proper treatment is provided according to individual need, which means more individuals and families will find recovery and wellness. Furthermore, this will help reduce stigma and encourage others to seek recovery and wellness throughout each community.

We offer recommendations to address potential shortfalls for any future revisions or new laws:

- Mandate that plans cover mental health or substance use disorders because this is a prevalent medical condition with proven treatment methods for a brain disease. Any epidemic or prevalent medical condition that impacts the social and biological condition of so many members of community must be addressed with proper medical treatment.
- Define with standard language what the definition is with respect to “medically necessary” determinants for mental health or substance abuse services in order to remove any possible limitations that would prevent proper medical treatment.

- Regulate that plans must properly disclose any defining criteria for what is determined as medically necessary in enrollment materials and plan information documents as a means that community may be properly informed.
- Regulate that all mental health benefits or substance abuse benefits be defined as opposed to the rather vague language that states as “defined under the terms of the plan and in accordance with applicable Federal and State law.” The concern is that plans may use this provision to limit coverage i.e. coverage may apply to these substances but not this substance, etc.
- Include regulations that government plans have no such restriction with respect to limiting the number of visits or number of days for inpatient or outpatient treatment.
- Establish a plan period where small employers will eventually have to comply with parity. The concern is that the need for proper medical treatment is paramount for the individual regardless of who might be the employer.

Aloha,

Alan Johnson, Chairperson, Hawaii Substance Abuse Coalition