

The American Health Care Act of 2017 Negatively Impacts Mental Health and Substance Use Treatment

As physicians serving Connecticut citizens and representing the Yale Department of Psychiatry, we ask that you **oppose** the following proposed AHCA components and **protect consumer access** to behavioral health care.

- 1) The AHCA will **cut all federally matched funds** for Medicaid expansions in 2020 and initiate per capita block funding for Medicaid enrollees.
- 2) The AHCA will provide waivers that allow states to **opt out** of the federally mandated inclusion of the ACA essential health benefits (EHB) for individual, marketplace and Medicaid expansion group plans.

These proposed reforms will **eliminate** key consumer protections and will also **severely limit** our state's ability to maintain its current level of care for Medicaid enrollees. The Affordable Care Act (ACA) incorporates a national standard for Essential Health Benefits that helps address the 34% of enrollees who lacked substance abuse services in their plans and the 18% of enrollees who did not have coverage for mental health services. In 2016 alone, 917 CT residents died from overdose-related deaths. The ACA also protects these EHB against lifetime/annual spending caps and insurmountable out-of-pocket costs.

Opposing the proposed health reforms will ensure protection and mental health parity for our state's constituents. There should be no gaps in behavioral health coverage for citizens in need. We also understand that citizens can become financially ruined from being unable pay for treatment of chronic, pre-existing health conditions.

Evidence shows that AHCA will:

1. **Threaten mental health parity**—the law, as currently written, will eliminate in 2020 the requirement that states offer robust coverage of mental health and substance abuse services for people who enrolled in Medicaid under the Obamacare expansion. Such a change would give states the option to end otherwise guaranteed treatment for mental health and substance use disorders.
2. **Leave State Medicaid budgets vulnerable**—through an \$880 billion drop in federal Medicaid spending over the decade. Consumer advocates outline how a crisis, such as the opioid epidemic, will quickly lead to a dramatic increase in spending without the buffering provided by matched federal funds. The result will be repeatedly underfunded public health crises and loss of state's ability to respond proactively.
3. **Eliminate consumer protections**— narrowing or eliminating EHBs (including substance abuse and mental health services) will lead to a loss of associated ACA mandatory caps on out-of-pocket spending, annual and life time limits on the dollar amount of care received.
4. **Overwhelm hospitals due to uncompensated care**— with projected loss of coverage for 24 million people by 2026, hospitals providing care to the uninsured will have to absorb those costs forcing taxpayers and local governments to cover the unpaid bills. The proposed reform suggests repeal of the ACA Medicaid disproportionate share hospital cuts, however, predictions suggest this will not offset the subsequent increase in uncompensated care costs.

We are ASKING that you strongly OPPOSE any attempt to eliminate the provision of federally mandated Essential Health Benefits (i.e. state waivers) and OPPOSE the proposed modification to federal funding of state Medicaid programs.

References

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