

Remarks of Rep. Jim Ramstad (R-MN) during House consideration of H.R. 1424 on March 5, 2008.

Mr. Speaker, the issue before us is not just another public policy issue, it's a matter of life or death for 54 million Americans suffering the ravages of mental health and for 22 million Americans suffering from chemical addiction.

Last year alone, 300,000 people were denied access to addiction treatment, most had health insurance, and 33,000 people committed suicide from untreated depression. Over 150,000 of our fellow Americans died as a direct result of chemical addiction.

On top of the tragic loss of lives, Mr. Speaker, untreated addiction and mental illness cost our economy over \$550 billion last year. According to the Wall Street Journal, untreated depression alone cost our businesses \$70 billion in lost productivity last year.

So it's ludicrous for the opponents to come here and argue that parity will cost businesses \$1.5 billion, as my friend from Washington, member of the Rules Committee, did. If you don't believe the Wall Street Journal, certainly those on our side of the aisle, what do you believe? Cost businesses \$70 billion, just depression, untreated depression alone.

Mr. Speaker, all the empirical data, including all the actuarial studies, show that equity for mental health and addiction treatment will save literally billions of dollars nationally. At the same time, it will not raise premiums more than two-tenths of 1 percent, according to the Congressional Budget Office. That's our own CBO numbers. So, I don't know where these people are getting these numbers, these inflated cost figures. Pulling them out of thin air is the only thing I can surmise.

The CBO says it will not raise premiums more than two-tenths of 1 percent. In other words, for the price of a cheap cup of coffee per month, several million Americans in health plans can receive treatment for chemical addiction and mental illness. And it's unfortunate, Mr. Speaker, that some opponents of this legislation have misrepresented the costs of enacting parity.

Mr. Speaker, I'm alive and sober today only because of the access I had to treatment back on July 31, 1981, when I woke up in a jail cell in Sioux Falls, South Dakota. I'm living proof that treatment works and recovery is real.

But far too many people in our country don't have the same access to treatment that I had and other Members of Congress have also had. A major barrier for thousands of Americans is insurance discrimination against people in health plans who need treatment for mental illness or chemical addiction.

The legislation that my friend from Rhode Island, **PATRICK KENNEDY**, who has worked tirelessly on this legislation, who arranged for all 14 field hearings, who has been a real champion, this legislation that we have authored will end the discrimination by prohibiting health insurers from placing discriminatory restrictions on treatment for people with mental illness or addiction. In other words, no more inflatable deductibles or copayments that don't apply to physical diseases. No more limited treatment stays that don't apply to physical diseases. No more discrimination against people with mental illness or chemical addiction.

The Paul Wellstone Mental Health and Addiction Equity Act simply provides equal treatment for diseases of the brain and the body. This legislation provides people in health plans with the same exact coverage that we as Members of Congress have and other Federal employees as well.

By the way, some of the exaggeration, some of the red herrings as to the use of the Diagnostic and Statistical Manual IV are just beyond belief. The red herrings presented by opponents, caffeine addiction, sibling rivalry, jet lag, would not be subject to treatment because insurance plans can use "medical necessity" requirements. So let's not use bogus red herring arguments. Let's come with intellectually honest arguments if you're against this legislation.

Also, the DSM-IV is used for Medicare, Medicaid, and veterans health care. I wonder how many of you can go home and say, look, it's good enough for

Members of Congress but it's not good enough for you, constituents. I don't think anybody in this body would dare do that nor should we. If it's good enough for Members of Congress, it's good enough for the American people.

Mr. Speaker, **PATRICK KENNEDY** and I have traveled the country from one end to the other, holding 14 field hearings. We've heard literally hundreds of stories of human suffering, broken families, tragic deaths, shattered dreams all because of insurance companies not providing access to adequate treatment for mental illness and addiction. I don't have time, Mr. Speaker, to recite some of these horror stories, but **PATRICK** and I could share hundreds and hundreds of horror stories caused by discrimination in treatment for mentally ill and addicted people that we heard in these 14 States.

Mr. Speaker, it's time to end the discrimination against people who need treatment for mental illness and addiction. It's time to prohibit health insurers from placing discriminatory barriers to treatment. It's time to pass the Paul Wellstone Mental Health and Addiction Equity Act. The American people, Mr. Speaker, cannot wait any longer.

Remarks of Rep. Patrick Kennedy (D-RI) during House consideration of H.R. 1424 on March 5, 2008.

I thank the chairman for yielding me this time, and I want to thank him for all of his hard work and that of the other chairmen, Chairman *Dingell*, Chairman *Rangel*, Chairman *Miller*, Chairman *Stark*, and obviously you, Chairman Pallone, for hosting that committee hearing in your district, as well as Chairman *Andrews* for all the work he did on this issue to bring H.R. 1424 to the floor today.

Without all of your markups, this bill would not have made it as far as it did today to come to this floor as one of the most important public health bills that we have seen on this floor in decades. Of course, that would not have happened had it not been for the great support of our Speaker, *Nancy Pelosi*, and Leader *Hoyer* who without their support this would not have happened as well. I am indebted to them for their support.

Today, this House of Representatives takes up a truly landmark piece of civil rights legislation. Why civil rights? Because just as it would account for the color of your skin, or any other immutable fact about you, you don't choose if you're born with a congenital defect or if you're born with

one characteristic or another, just as you don't choose to have a predisposition to cancer, a predisposition to having asthma, a predisposition to dying early of one disease or another. And that applies true with those with mental illness. Yet when you have health insurance in this country, you expect to buy health insurance and it should cover your whole body.

But unfortunately, unbelievably, the brain is still relegated to that part of the world where people think of it as something that should be in your control, something that you should take charge of and so forth; that even though you might have a biochemical imbalance in your brain, that it is your fault if you have that biochemical imbalance in your brain.

So if you had diabetes and you don't produce enough insulin and you eat the wrong food and have sugar imbalances, no one holds it against you if you have complications to diabetes. But God forbid you have a dopamine imbalance in your brain that causes you to use alcohol or drugs, or you have a dopamine imbalance that has you in a depression or an imbalance in your brain that has you have a mental illness like schizophrenia. Then you are held to account because someone says that is your fault. And if you wander around the streets or if you are homeless, that must be your fault.

Those are the physical symptoms of a mental illness. Yet an insurance company will hospitalize you for the symptoms of a chemical imbalance called diabetes, but they won't hospitalize you for the physical and chemical imbalances of a brain illness as a result of dopamine imbalances or glutamate imbalances. What sense does that make? It doesn't make any sense. But it is

stereotyped in an old dark ages mindset that has people hanging in the shadows because they are afraid someone is going to point someone out and say you should be ashamed of yourself because you have a mental illness.

My friends, I have a mental illness. I am fortunately getting the best care this country has to offer because I am a Member of Congress. If it is good enough for Members of Congress to have full parity, then it ought to be good enough for every American in this country who buys health insurance not to be discriminated against.

If we care about health care in this country, why are we not taking care of health care, rather than sick care? We ought to be taking care of people before they end up sick. We are spending in our emergency rooms too much money taking care of all of the acute cases as a result of mental illnesses, the car accidents, stabbings and intubations. Why not take care of people before they end up ending up in the emergency rooms? Why not take care of the people before they end up in our jails?

Let's pass mental parity, make this country stronger, make our people stronger, and let's make this day a great day for civil rights for all Americans.

I want to say this couldn't have been done without my good friend and colleague **JIM RAMSTAD**. Let's put this bill on the floor and do it this year and make it a tribute to Congressman **JIM RAMSTAD**, who has fought for this bill so long and hard.

Remarks of Rep. Steny Hoyer (D-MD) during House consideration of H.R. 1424 on March 5, 2008.

Mr. Speaker, I thank the gentleman for yielding, and I am pleased to follow my friend Mr. *Murphy* who just spoke, with whom I agree entirely. This will be a cost savings. I want to congratulate as well **PATRICK KENNEDY** and **JIM RAMSTAD**, one a Democrat and one a Republican.

But this is not a partisan issue. This is not a Republican or Democratic issue. It is an issue of human beings. It is an issue of people that need help and have been denied it, people who are one of us, as Mr. *Murphy* so eloquently and correctly pointed out.

I rise in strong support of this legislation. I strongly support this long overdue bipartisan legislation to end discrimination against patients seeking treatment for mental illness. Mr. *Kennedy* spoke of that discrimination.

I want to commend Congressman *Kennedy* and my friend Congressman *Ramstad*. Congressman *Ramstad* is going to be leaving us, but he has been one of the best Members that has served in this body, who looks at issues on their merits, not on partisanship. We all ought to do that.

This legislation, the Paul Wellstone Mental Health and Addiction Equity Act, now has 274 cosponsors on both sides of the aisle. Under this bill, an insurer or group health plan must ensure that any financial requirements such as deductibles, copayments, coinsurance and out-of-pocket expenses which apply to mental health and addiction treatments are no more restrictive or costly than the financial requirements applied to comparable medical and surgical benefits that the plan confers.

Why does it do that? It does it because in America we want healthy people; not physically healthy people or mentally healthy people, but people who are physically and mentally healthy, because obviously there is an extraordinary relationship between the two. Under this bill, we will accomplish that end.

It also requires equity in treatment limits. This means that the treatment limits, such as the frequency of treatment, number of visits and days of coverage applied to mental health and addiction benefits, are no more restrictive than the treatment limits applied to comparable medical and surgical benefits. Why? Again, because we want to effect the health of the individuals we are serving.

It is important to note that this bill only applies to insurers and group health plans that provide mental health benefits. That is, it does not require plans that do not currently offer mental health benefits to do so. It simply says, if you provide mental health benefits, do so equitably and fairly and equally. That is why **PATRICK KENNEDY** referred to this as a civil rights bill. It is a civil rights bill.

It also exempts businesses with 50 or fewer employees and businesses that experience an overall premium increase of 2 percent or more in the first year and 1 percent in subsequent years. We believe that perhaps will not happen, but it provides for it.

Research has shown that there has been no significant cost increase attributable to the parity requirement in the Federal Employees Health Benefits Program, which has made parity coverage for mental health care available to more than 8 1/2 million Federal employees for 8 years. So we have had experience at this. This is not a radical departure. This is, however, the provision of equal treatment.

Furthermore, this bill's enforcement mechanisms are real, permitting the IRS to enforce and levy fines and penalties on plans for disallowing employers from deducting health care costs as an expense.

The two offsets in this bill were included in the Children's Health and Medical Protection Act, or the CHAMP Act, which passed the House last August. The first increases the rebate or discount that drug companies are required to provide State Medicaid programs for drugs provided for Medicaid beneficiaries. The second prohibits physicians from referring patients to

hospitals in which they have an ownership interest, with the ability to grandfather existing physician-owned hospitals.

It is telling, Mr. Speaker, that this bill is supported by, among others, the American Medical Association, the American Hospital Association, the American Nurses Association, the American Psychiatric Association, and the American Psychological Association.

On the steps of the Capitol in a press conference with the Speaker, with Mrs. Rosalynn Carter, Mr. *Kennedy* and Mr. *Ramstad*, as well as David Wellstone, I said that the United Negro College Fund has a wonderful phrase that it uses, and that phrase is that "a mind is a terrible thing to waste." That is so very accurate. And if a mind is a terrible thing to waste, it is a terrible thing not to treat, as we would treat the broken arm or the diabetes or any other physical ailment.

This bill makes America healthier. This bill will save money. This bill makes good sense, morally and economically. Support this vital piece of legislation.