

Imagine that you or someone you know suffers from post-traumatic stress disorder or has a biochemical imbalance in the brain that causes severe depression. It is not so hard to imagine when one out of every five Americans suffers from a diagnosable mental condition that prevents them from living life to the fullest.

Then imagine that because your illness is related to the functioning of the brain rather than the functioning of the body, your access to insurance coverage for necessary treatments is severely limited. This is sadly the case for two-thirds of the 54 million Americans suffering from mental illness who are denied access to or can't afford treatment because their health plan imposes severe restrictions on mental health benefits.

This means that roughly 36 million people in this country who suffer from mental illness must also live with the disabling effects of these untreated conditions, including broken relationships, lost productivity at work, unemployment, homelessness, incarceration, and suicide.

According to the World Health Organization and the World Bank, four of the ten most costly diseases in terms of disability and fatality are mental illnesses. Mental illness and addictive disorders together are the single most burdensome family of diseases in industrialized nations, ahead of even heart disease.

It is especially burdensome for many of our nation's war heroes, returning home with the damaging psychological wounds of combat. The Army Surgeon General has reported that 30 percent of servicemembers returning from Iraq developed mental health problems three to four months after returning home according to a survey. We must be prepared to treat their wounds, not just the physical, but the psychological as well.

The fact is that mental illnesses are treatable diseases that impact millions of Americans each year. However, many group health plans currently do not provide the same coverage for mental illnesses as they do for physical ailments.

This week, the U.S. House of Representatives acted to repair this glaring hole that exists within our nation's health care system by passing the Paul Wellstone Mental Health and Addiction

Equity Act.

Under this bill, an insurer or group health plan must ensure that any financial requirements - such as deductibles, co-payments, co-insurance and out-of-pocket expenses - applied 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 covers.

It also requires equity in treatment limits. This means that the treatment limits - such as 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.

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 also exempts businesses with 50 or fewer employees and businesses that experience an overall premium increase of two percent or more in the first year and one percent in subsequent years.

Research has shown that there has been no significant cost increase attributable to the parity requirement in the Federal Employee Health Benefits Program, which has made parity coverage for mental health care available to more than 8.5 million federal employees for eight years. Now, this bill makes available to all Americans the access to affordable mental health services already available to federal employees, Members of Congress, and their staff.

The bottom line is that group health plans shouldn't get to cover some diseases and ignore others. Our nation's history has been characterized by a steady expansion of opportunity for marginalized populations, and it is time to use the voluminous brain science at our disposal and recent milestones in the introduction of successful treatments for mental disorders to facilitate the inclusion of those with mental illness into the American mainstream.

The mental health parity legislation we passed this week is an important and necessary measure to end the stigma of mental illness and ensure that those in need of mental health care are not subjected to higher costs or treatment limitations. It is after all, both the physical and mental health of a person that determines their overall well-being. It is time that our health care

system reflects that fact.