



Greater Des Moines



Legislation for Medicare Mental Health Workforce

New bipartisan legislation in the House and Senate would create greater access to mental health care, particularly for rural areas. The bill – **the Mental Health Access Improvement Act** – would allow marriage and family therapists (MFTs) and licensed mental health counselors to directly bill Medicare for their services. Similar legislation has been introduced in previous sessions of Congress.

The Mental Health Access Improvement Act was written and introduced in the House by Representatives John Katko (R-NY) and Mike Thompson (D-CA) and in the Senate by Senators John Barrasso (R-WY) and Debbie Stabenow (D-MI).

Currently, Medicare does not directly pay for services from these types of providers, instead requiring that they must bill under the supervision of a physician.

This exclusion limits patients' access to services in areas with physician shortages and excludes an important class of professionals serving people with mental health and addiction disorders.

With 77 percent of U.S. counties experiencing a severe shortage of behavioral health professionals, over 80 million Americans live in areas that lack a sufficient supply of providers. According to SAMHSA, half of all U.S. counties have no practicing psychiatrists, psychologists, or social workers. Many of these rural and underserved areas do have practicing MFTs and/or mental health counselors.

The inclusion of MFTs and counselors in Medicare is also critical in the fight against the opioid crisis. Medicare pays for one-third of all opioid-related hospitalizations and Medicaid pays for another one-third. MFTs and counselors who are trained and licensed to provide addiction services are an integral part of the addiction workforce. Allowing Medicare beneficiaries access to MFTs and counselors will expand community-based addiction services and reduce costly hospitalizations for Medicare beneficiaries.

Allowing previously ineligible providers to directly bill Medicare for their services would immediately alleviate the strain on our nation's mental health and addiction workforce serving Medicare enrollees. These provisions would not change the Medicare mental health benefit or modify states' scope of practice laws but would instead allow Medicare enrollees access to medically necessary covered services provided by mental health and addiction treatment professionals who are properly trained and licensed to deliver such services.

Please contact Senators **Grassley** and **Ernst** and Representative Cindy **Axne** to support this bill.

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