

Mental health ill's deserve equal insurance coverage

COMPASS: Points of view from the community

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Published: October 16, 2007

Last Modified: October 16, 2007 at 03:01 AM

There are thousands of Alaskans who are no longer using alcohol and other drugs and are in long-term recovery from addiction. They have found recovery and new lives because they were able to get the help they needed to recover and are now building better lives for themselves and their families. Yet according to the 2005 National Survey on Drug Use and Health, 37,000 Alaskans needed but did not receive alcohol and/or drug treatment. Too many of our friends and neighbors aren't getting help because they face discrimination from their health insurance companies.



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Over 44 percent of the people who made an effort to get help but weren't able to reported that cost or insurance barriers prevented them from gaining access to treatment. When people are routinely denied coverage for a very serious health issue and left to fend for themselves, they end up creating an unnecessary burden on other parts of the health care system and our economy, to say nothing of the toll on the lives of their friends and family.

What does it mean to families when we don't require coverage for alcohol, drug and mental health treatment services on par with services for other physical illnesses?

After years of leading the fight for equal treatment on Capitol Hill, Reps. Patrick Kennedy, D-R.I., and Jim Ramstad, R-Minn., decided to find out this spring. They joined with other members of Congress to hold field hearings across the country, hearing testimony before thousands of citizens, many of whom told their stories of the devastation caused by insurance discrimination against them and their families.

They learned firsthand how emergency rooms, social services agencies and prisons are overflowing with people who are denied coverage. In fact, an average of 235 Alaskans a year die of causes directly related

to alcohol or drug abuse.

The Robert Wood Johnson Foundation has estimated the annual economic cost of alcohol and other drug problems in the U.S. to be more than \$400 billion. In Alaska, economic costs are estimated to be \$738 million in lost productivity, accidents, health care, criminal justice and public assistance. Even more significant are the social costs to families, communities and individuals when alcohol and drug problems are not treated.

In 1996, the first Mental Health Parity Act was enacted thanks to the hard work of the late Sen. Paul Wellstone, D-Minn. He understood the unique challenges of caring for someone who is living with mental illness. Unfortunately, the 1996 law contained huge loopholes fought for by the health insurance companies. In 2002, Wellstone died tragically and as a tribute, many of his colleagues in Congress are fighting to strengthen the law this year. [The Paul Wellstone Mental](#)

House of Representatives.

Study after study has demonstrated that requiring equitable treatment will not increase the cost of insurance. When privately insured individuals exhaust or are unable to access their benefits, they turn to the public sector for treatment -- increasing costs to taxpayers.

Most Americans have no idea about the discrimination that people with addiction and their families face when they're trying to get help, until they are confronted with a problem in their own families. With growing public awareness, there is new hope. It's time to finally end insurance discrimination.

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