H1871 An Act Relative to Mental Health Parity
Sponsored by Representative Ruth B. Balser

H1871 will greatly enhance access to necessary mental health and substance abuse treatment for the people of the Commonwealth while saving the state much needed funds. When health plans do not cover necessary medical treatment, the taxpayers inevitably foot the bill as patients seek treatment paid for by state agencies.

The current Massachusetts Mental Health Parity Law, passed as chapter 80 of the Acts of 2000, “An Act Relative to Mental Health Benefits,” expanded the mandate on private health plans but stopped short of full parity. The 2000 statute requires health plans to cover the diagnosis and treatment of certain mental disorders to the same extent that they cover the diagnosis and treatment of physical disorders.

The statute that we passed in 2000 draws a distinction between “biologically-based disorders” and “non-biologically based disorders,” giving full parity to the so-called “biologically-based disorders” while setting a limit on coverage for all remaining behavioral health disorders. (The disorders that are included for full parity are: “schizophrenia, schizoaffective disorder, major depressive disorder, bipolar disorder, paranoia and other psychotic disorders, obsessive-compulsive disorder, panic disorder, delirium and dementia, affective disorders.” Examples of disorders not included are: substance abuse, eating disorders, and trauma.)

This distinction in law is contradicted by a growing body of research which attributes many presumed “non-biologically based disorders,” such as eating disorders or addictions, to biological factors. More importantly, the need for treatment exists regardless of the source of the illness. A battered wife or a veteran suffering from post-traumatic stress disorder needs treatment regardless of whether or not there is a biological basis for the illness. H1871 closes this loophole by requiring coverage for any disorder identified by the American Psychiatric Association.

This legislation continues the commitment Massachusetts has made to improving the quality and accessibility of healthcare. While the former Governor proposed stripping new health plans of state mandates, the legislature insisted that as we expand coverage to the uninsured, all plans must provide comprehensive quality care. By passing H1871, the legislature continues its historic role in protecting access to mental health and substance abuse treatment. At the federal level, Senator Ted Kennedy is the sponsor of similar mental health parity legislation. In fact, his bill passed the US Senate unanimously on September 18. H1871 supports Senator Kennedy’s efforts by showing the nation that his own state has a model statute, and complements it as it requires the same coverage for state-regulated policies, that his bill would require for federally-regulated policies.

Mental health parity fights stigma against a vulnerable population. It saves the state money. It furthers the Massachusetts commitment to increasing access to comprehensive health care for all the people of Massachusetts.