When implementing the parity legislation for mental health care I expect Congress to ensure that the oversight mechanism is in place and maintained for as long as mental health services are covered by insurance benefits. Continuous and vigilant oversight is necessary to assure that insurers cannot discriminate against certain conditions or fail to cover some treatments. Those who don’t live with mental health conditions -- their own or a family member’s -- or see firsthand that individuals with addictions can recover -- fail to recognize the effectiveness of treatment.

I would also like to see a list of conditions and treatments that are covered -- not that this can or should be exhaustive. Such a list would prevent the insurance industry from narrowly defining what conditions and treatments are to be covered. Because mental illnesses and addictions carry such a stigma, and the general population is pessimistic about individuals’ ability to recovery and live productive lives, I’m concerned that only the most well known treatments with a long history of use will be covered. These aren’t necessarily the most effective and some mental health diagnoses (eg: borderline personality disorder, PTSD) require intensive and longterm treatment that simply aren’t attractive to the insurance industry. Stigma and ignorance shouldn’t be allowed to limit the scope and length of treatments available.

It goes without saying that if an insurance plan offers out-of-network benefits for medical/surgical care, it must also offer out-of-network coverage for mental health and addiction treatment, and services must be provided at parity. I also expect oversight of this legislation to assure that state parity laws supersede the federal legislation when they provide additional protections to individuals in treatment for addiction or mental illness. All that can be done MUST be done to assure comprehensive coverage for these conditions.