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## Proposals for Mental Health Parity Pit a Father's Pragmatism Against a Son's Passion

By [ROBERT PEAR](#)

WASHINGTON, March 18 — It's Kennedy versus Kennedy as two members of Congress from the same family face off over competing versions of legislation that would require many health insurance companies and employers to provide more generous benefits to people with [mental illness](#).

Representative Patrick J. Kennedy, Democrat of Rhode Island and chief sponsor of the House bill, has criticized as inadequate the Senate bill introduced by his father, Senator [Edward M. Kennedy](#), Democrat of Massachusetts. Representative Kennedy is trying to mobilize mental health advocates to lobby for what he describes as "the stronger of the two bills, the House bill."

Both bills seek to end discrimination against people with mental disorders by requiring insurers and employers to provide equivalent coverage, or parity, for mental and physical illnesses.

That would be a huge change. For decades, insurers have charged higher co-payments and set stricter limits on coverage of mental health services. For example, insurers often refuse to cover more than 20 visits a year to a psychotherapist. And a patient may have to pay 20 percent of the cost for visiting a [cancer](#) specialist, but 40 percent or more for a mental health specialist.

The differences between the Kennedys' bills reflect different views about what is possible and what is politically feasible.

Senator Kennedy said he was taking a pragmatic approach and had made a number of compromises to win the support of business and insurance groups. These compromises, he said, greatly increased the chances that a bill would become law, protecting millions of Americans in group health plans.

Insurers and employers had opposed similar proposals in the past, saying the plans would drive up costs. This year, however, Senator Kennedy invited employers and insurers to help write the legislation, along with mental health groups, and they have endorsed the bill that he introduced with Senator [Pete V. Domenici](#), Republican of New Mexico. The bill was recently approved in a Senate committee by a vote of 18 to 3.

The younger Kennedy approaches the issue with the passion of a man who has been treated for [depression](#) and drug dependence. He has advocated parity legislation since 2001, but he said his commitment increased when he became "the public face of alcoholism and addiction" last year after a car crash on Capitol Hill.

With a new Democratic majority, Congress appears likely to pass some version of the legislation. President Bush has endorsed the principle of mental health parity, though not a specific bill.

Nearly 60 percent of all House members have expressed support for the House bill, which provides more protections to patients but is not backed by insurers or employers.

"The House bill is everything that we did not like in previous mental health parity bills," said E. Neil Trautwein, a vice president of the National Retail Federation, a trade group.

Speaking to mental health advocates this month, Representative Kennedy declared: "We can't cut any deals with insurance companies. We need to strengthen the Senate bill."

America's Health Insurance Plans, which represents 1,300 insurers, and the American Benefits Council, a trade group mostly of Fortune 500 companies, strongly prefer the Senate version.

The [American Psychiatric Association](#) supports both bills, describing them as different approaches to the same goal. Mental Health America, an advocacy group for patients, also supports both bills. But Ralph J. Ibson, the chief lobbyist for Mental Health America, said, "The House bill has greater protections and is therefore a stronger bill."

The House bill is named for [Paul Wellstone](#), the senator from Minnesota who championed similar legislation before he died in a plane crash in 2002. Jeff Blodgett, executive director of Wellstone Action, a nonprofit group that is continuing the Democratic senator's work, said, "The Senate bill is a step forward, but the House version is true to Paul Wellstone's vision."

On behalf of the senator's sons, David and Mark Wellstone, Mr. Blodgett said, he asked the Senate sponsors not to put the Wellstone name on the Senate bill at this time.

One of the biggest differences between the House and Senate bills is that the House version defines the "minimum scope of coverage." Under the House bill, if a group health plan provides any mental health benefits, then it must cover the same wide range of mental illnesses and addiction disorders covered by the health plan with the largest enrollment of federal employees.

By contrast, the Senate bill does not specify what mental conditions or diagnoses must be covered.

James A. Klein, president of the American Benefits Council, said he liked the Senate bill because it "does not mandate the specific benefits that a plan must cover."

But Patrick Kennedy said that was a weakness of his father's bill.

"Congress is covered, under the Federal Employees Health Benefits Program, for the treatment of mental illnesses as defined by the medical community," Representative Kennedy said in an interview. "If it's good enough for members of Congress, it should be good enough for the American public. The Senate bill leaves the definition up to whatever is negotiated between the insurer and the employer."

Representative Kennedy said he feared that some insurers would refuse to cover drug and alcohol abuse, [eating disorders](#), or [post-traumatic stress](#) disorder.

A patient's ability to get treatment at an affordable price often depends on state law. The National Conference

of State Legislatures says that 42 states have some type of parity law.

The House bill says that federal law will not override “any state law that provides greater consumer protections, benefits,” rights or remedies. The Senate bill, by contrast, would “supersede any provision of state law” that establishes standards different from the federal standards for cost-sharing and treatment limits.

Karen M. Ignagni, president of America's Health Insurance Plans, praised this provision of the Senate bill, saying it would help “achieve consistency on how parity is defined” in different states.

But Senators [Christopher J. Dodd](#), Democrat of Connecticut, and Bernard Sanders, independent of Vermont, expressed concern that the Senate bill could interfere with laws in their states.

Senator Kennedy said he was confident that he and his son could resolve their differences. “We will find ways of working together,” he said.

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