



Policy Recommendations of the
AMHCA Board of Directors

A Mental Health Access Improvement Roadmap

**AMHCA's Advocacy For Affordable
Care Act Expansion and Mental Health
Care Policy Reform**



April 2021
Alexandria, VA

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Executive Summary

The American Mental Health Counselors Association (AMHCA) promotes the expansion of medical and behavioral health services that are also included in the ten essential benefits of the Affordable Care Act (ACA). AMHCA advocates for inclusion of Clinical Mental Health Counselors (CMHCs). The CMHC acronym applies to all clinical mental health counselors irrespective of their state title (e.g., Licensed Professional Counselor or LPC).

CMHCs are licensed to assess, diagnose and treat psychological disorders defined by the “Diagnostic and Statistical Manual of Mental Disorders” (DSM) published by the American Psychiatric Association. They provide outcome-focused psychotherapy. CMHCs provide crucial services for three of these ACA benefits:

- *Mental health and substance use disorder services, including behavioral health treatment (this includes counseling and psychotherapy)* - CMHCs are licensed mental health providers with master’s or doctoral degrees who are specifically trained in mental health and addiction disorders, and the co-occurring disorders that always accompany substance use disorders.
- *Rehabilitative and habilitative services and devices (services and devices to help people with injuries, disabilities, or chronic conditions gain or recover mental and physical skills)* - CMHCs are trained to assess, diagnose, and treat trauma and chronic distress that accompany disabilities so that individuals can live more purposeful lives as contributing members of their communities.
- *Preventive and wellness services and chronic disease management* - CMHCs focus on comprehensive mental health measures that promote positive lifestyle changes and greater mental and physical health resilience for individuals and families.

Although recognized by the National Academy of Medicine for inclusion in federal laws, CMHCs are barred from reimbursement by federal Medicare prohibitions and Medicaid limitations. This limits patient care by prohibiting treatment by over 140,000 licensed mental health care providers as they comprise the largest sector – 37 percent – of the licensed behavioral health care workforce in the United States.

AMHCA is ready to assist the Biden Administration in addressing several of the domestic crises that President Biden highlighted in his inaugural address (and other issues) on January 20, 2021:

1. The Covid-19 Pandemic – CMHCs are treating untold numbers of individuals and families that are dealing with pandemic related depression, anxiety, grief, substance use, and other mental disorders
2. Economic Distress – Uniquely trained in career counseling, CMHCs provide counseling for those who have become unemployed or underemployed
3. Systemic Racism and Inequality – CMHCs all receive graduate education in multicultural counseling and advocacy for diversity, equality, and inclusion for all individuals and their families
4. Affordable Health Insurance and Health Care – Our profession is on the forefront for promoting integrated behavioral health care that attends to both medical and psychological issues
5. Environmental Issues – CMHCs practice holistically to help address social influences that negatively impact the health and mental health of individuals, families, and communities
6. Substance Use Disorders and Suicide – CMHCs are on the front lines as primary mental health therapists addressing the opioid addiction crisis, and other addictions such as alcohol abuse, as well as employing state-of-the-art suicide prevention strategies.

CMHCs promote holistic, public health integration and evidenced based treatment. Please see further information in the next section to learn how CMHCs are vital resources, and key health care reform recommendations that would allow CMHCs to provide access to services to improve mental health.

Response to the Domestic Crises Highlighted by President Biden

There are 140,000 LCMHCs who are uniquely qualified by education and experience to address these crises.

Appallingly, they are often prohibited from providing services to those who are most in need.

1. The Covid-19 Pandemic

CMHCs treat both individuals and families who are facing mental and emotional distress brought on by the pandemic's illness, death, economic stressors, and other concerns. They employ holistic treatment practices. CMHCs assess the co-morbid problems associated with anxiety, depression, and relational issues and they use evidenced-based Cognitive Behavioral Therapy, Trauma Informed Care, and Family Systems Counseling to resolve these intertwined conditions.

2. Economic Distress

Fundamental to the education of all CMHCs is specific training in evaluating and addressing work related issues, career counseling, and employment enrichment approaches such as the improvement of on-the-job relationship skills. If individuals are laid off, they have a licensed professional

who can actively support them in their employment search while they can also gain additional training or job-related competencies and reduce their levels of stress.

3. Systemic Racism and Inequality

Every CMHC receives graduate education in multicultural counseling that supports individuals regardless of their ethnicity, orientation, religion, or culture. In a time with systemic racism precludes true equality and inclusion, CMHCs understand these issues and they assist every person and every family who are overcoming these barriers. - CMHCs are advocates for diversity and inclusion.

4. Affordable Health Insurance and Health Care

Based on multiple research studies, many medical conditions (e.g., diabetes, intestinal tract issues, substance use disorders, etc.) benefit from coordinated medical and psychological treatments. CMHCs



comprehend the critical value of integrated healthcare. For example, they all receive graduate education in psychopharmacology to monitor psychiatric medications in order to support patients as they deal with drug side-effects and problematic drug interactions. CMHCs often provide interdisciplinary consultation with physicians so that individuals receive optimal care. CMHC's training and experience in wellness programs, prevention and mental health promotion provides early intervention to individuals before there behavioral health conditions worsen, thereby improving quality of care and reducing costs to employers and health plans in the public and private sectors.

5. Environmental Issues

Environmental issues at the community level impact health and emotional well-being. As advocates for comprehensive health, CMHCs stay attuned to ecological concerns that can greatly impact their patients. Inadequate safeguards for clean water, housing, epidemics, etc. cause health, emotional health, and economic stressors that require coordination with local and state agencies. CMHCs speak for their patients when they have no one else to turn.

6. Substance Use Disorders and Suicide

In addition to the other crises, our country faces an increasing substance use crisis. Every CMHC receives specific graduate

education in treating substance use and the co-occurring other mental disorders. As our country deals with consequences of growing addiction issues, crime related to addiction, and drug overdoses, -CMHCs are prepared to help addicted individuals receive treatment for both the substance use and the always accompanying trauma, anxiety, depression, and other disorders. They are also trained to help family members to become more supportive.

CMHCs are on the front lines of providing holistic healthcare services. Their singular graduate education coursework provides the foundation for addressing these critical crisis issues.

Our country has a licensed mental healthcare workforce that is woefully underutilized. Tragically, older adults, disabled individuals, and others cannot access CMHCs because state and national laws preclude Medicare and Medicaid reimbursement. As our country strives to effectively deal with these crises, we all can benefit from the integrated health care that CMHCs are educated and licensed to provide.



Beyond A Perfect Storm

A Growing Mental Health Crises

AMHCA has issued a major meta-analysis that shows the devastating impact of the Covid-19 pandemic and the problems that President Biden highlighted that have led to a mental health crisis. Based on new studies, AMHCA estimates that 100 million -- or 40 percent of -- Americans mental health has been affected by the crises, with adults reporting four-fold increases in anxiety and depressive disorders over just a one-year period. Young adults and people of color are experiencing the worst mental health effects of this crisis

The study highlights the need to for public policy actions including expanding health insurance coverage and Medicaid through the Affordable Care Act, promoting health equity by addressing racism and discrimination within our society and health care system, and several actions in the mental health policy area such as promoting early diagnosis and intervention, and recognition of clinical mental health counselors in the Medicare program.

We support President Biden's desire to design a more integrated health care system that continues to put patients at the forefront and addresses the underlying factors driving unsustainable health care spending. To accomplish this goal, AMHCA urges that any health care reform developed by the Biden Administration recognizes CMHCs in all public and private insurance programs including Medicare and include strong mental health and substance abuse parity requirements while expanding coverage levels that are available today.

We need a comprehensive plan to support all Americans living with mental health problems and illnesses. We support the integration of our health care system by putting the treatment of behavioral health concerns on par with that of physical health.

The long historical storm of racism and oppression in the United States has converged with the current storm of health care and economic crises brought about by the COVID-19 pandemic. These cataclysmic events have caused significant increases in mental health and substance related disorders in the United States in 2020. We are now witnessing a tsunami of mental health needs that will create massive suffering if not

addressed on a widespread scale.

In our recent study, “Beyond a Perfect Storm: How Racism, Covid-19, and Economic Meltdown Imperil Our Mental Health,” the convergence of these events has caused significant increases in mental health and substance use disorders in the United States.

COVID-19 health crisis: All Americans have been facing a major health crisis due to the coronavirus pandemic over the last several months. In addition, Americans are reporting high levels of emotional distress from the COVID-19 pandemic— levels that the authors of the Perfect Storm report believe will lead to a national mental health crisis, if Congress and the states do not take action. Although, our U.S. society is in a shared state of traumatic distress, new data about COVID-19 has revealed an alarming trend: Black families face a much higher risk of contracting and dying from the virus. Residents of majority-Black counties have three times the rate of infection and almost six times the rate of death as residents of majority-white counties.

Economic meltdown: Economic downturns are usually associated with higher rates of depression and anxiety disorders as well as increased suicides. The financial strain resulting from income loss and unemployment has already been identified as a major driver of adverse mental health outcomes including depressive disorders, anxiety disorders, addiction disorders, and suicide. Extensive evidence supports the link between unemployment and devalued well-being. Blacks and other racial groups have higher unemployment during good economic times and are even more disproportionately unemployed during recessions and downturns. The COVID-19 pandemic and resulting economic downturn has negatively affected many people’s mental health. They have also created new barriers for people already suffering from mental illness and substance use disorders.

Systemic racism: Systemic racism persists in our schools, offices, court system, police departments, and health care system. Racism and discrimination have adversely affected health outcomes particularly for Blacks and other people of color. They experience health disparities and they are at higher risk for chronic illness, including mental health disorders such as depression and anxiety.

Due to the coronavirus pandemic and economic downturn, based on recent surveys by the CDC and Census Bureau – and AMHCA’s own meta-analysis – nearly 40 percent of all adults in the United States, more than 100 million people, are coping with a mental health condition. Trauma disorders are increasing at an alarming rate related to domestic violence, family separations, and a wide variety of other traumatic experiences.

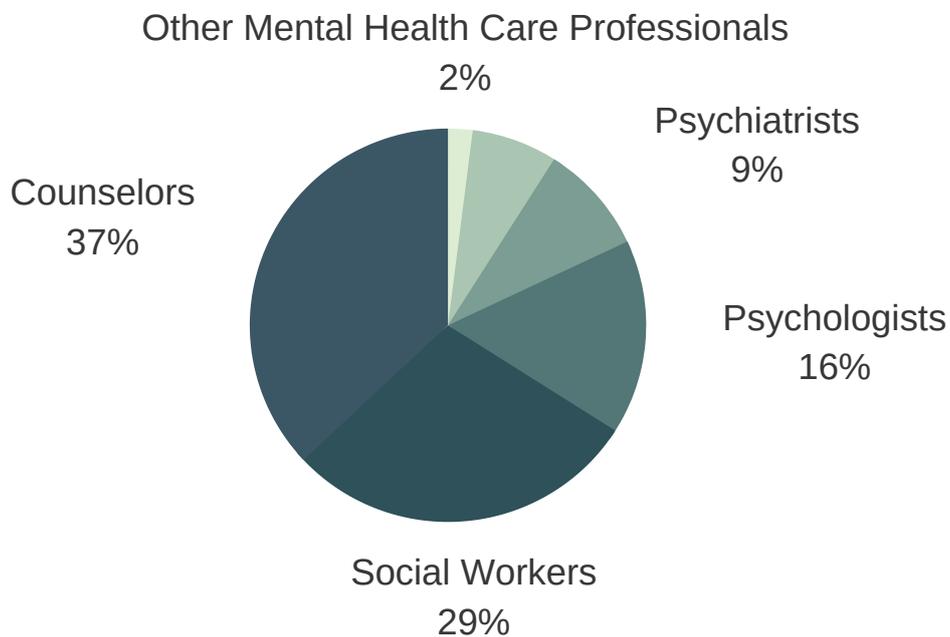
Additionally, many of these mental health problems are related to co-occurring medical issues such as the chronic distress of life-changing medical diagnoses (e.g., Diabetes), physical disability (e.g., permanent combat injuries), neurological conditions (e.g., Parkinson’s disease), etc.

Lack of Access to Licensed Mental Health Therapists and Specialists Creates Barriers to Timely Care

According to the Bureau of Labor Statistics, Clinical Mental Health Counselors number 140,000 today. CMHCs share an overarching goal of fostering a 21st century health care system that improves health and behavioral outcomes and reduces the financial burden on consumers, businesses and government. Members of AMHCA are clinical mental health counselors with a master's or doctoral degree in clinical mental health counseling, have completed a minimum of 2 years education, 3,000 hours of supervised post-master's clinical experience, and have passed a state licensure examination.

The United States of America does not have a shortage of licensed mental health professionals. We have a shortage of access.

Behavioral Health and Other Related Providers, by Field



Sources: Centers for Medicare and Medicaid Services, National Provider Identifier (NPI) Database (2014) HRSA Health Workforce. Behavioral Health Workforce Projections, 2017-2030. 2019.

Too many Americans have little or no access to qualified and licensed mental health services.

- Beneficiaries in Medicare that cannot see Clinical Mental Health Counselors because these licensed therapists are not eligible for Medicare reimbursement
- Individuals who are in Social Security Medicare Disability cannot see CMHCs because of Medicare ineligibility
- Individuals and families living in rural areas who have little or no access to qualified therapists
- Drug treatment that does not include specialized psychotherapy interventions when the best outcomes require coordinated medical and psychotherapy treatment
- Individuals and families in some locations who do not have access to mental health care because of state Medicaid limitations for CMHCs

COMPREHENSIVE HEALTH CARE REFORM ESSENTIALS

The profession of clinical mental health counseling fosters greater public health. CMHCs promote holistic health integration and evidence-based treatment for individuals and families. Coordinating services with primary care providers offers enhanced mental health and physical health outcomes.

Americans with mental health conditions and their families need our support. The economic impact of mental illness is enormous—at nearly \$210 billion per year nationwide in lost earnings—and the human cost is worse.

Often, Americans are being left to face mental health problems on their own, and too many individuals are dying prematurely from associated health conditions. We must do better. We need laws and policies that will directly support to individuals with mental health problems and their families—including a detailed agenda to support military service members and veterans, an initiative to end America’s epidemic of drug and alcohol addiction, and a robust caregivers’ agenda.

We need a comprehensive agenda on mental health care. AMHCA recommends that any health care reform policy initiative developed by the President include:

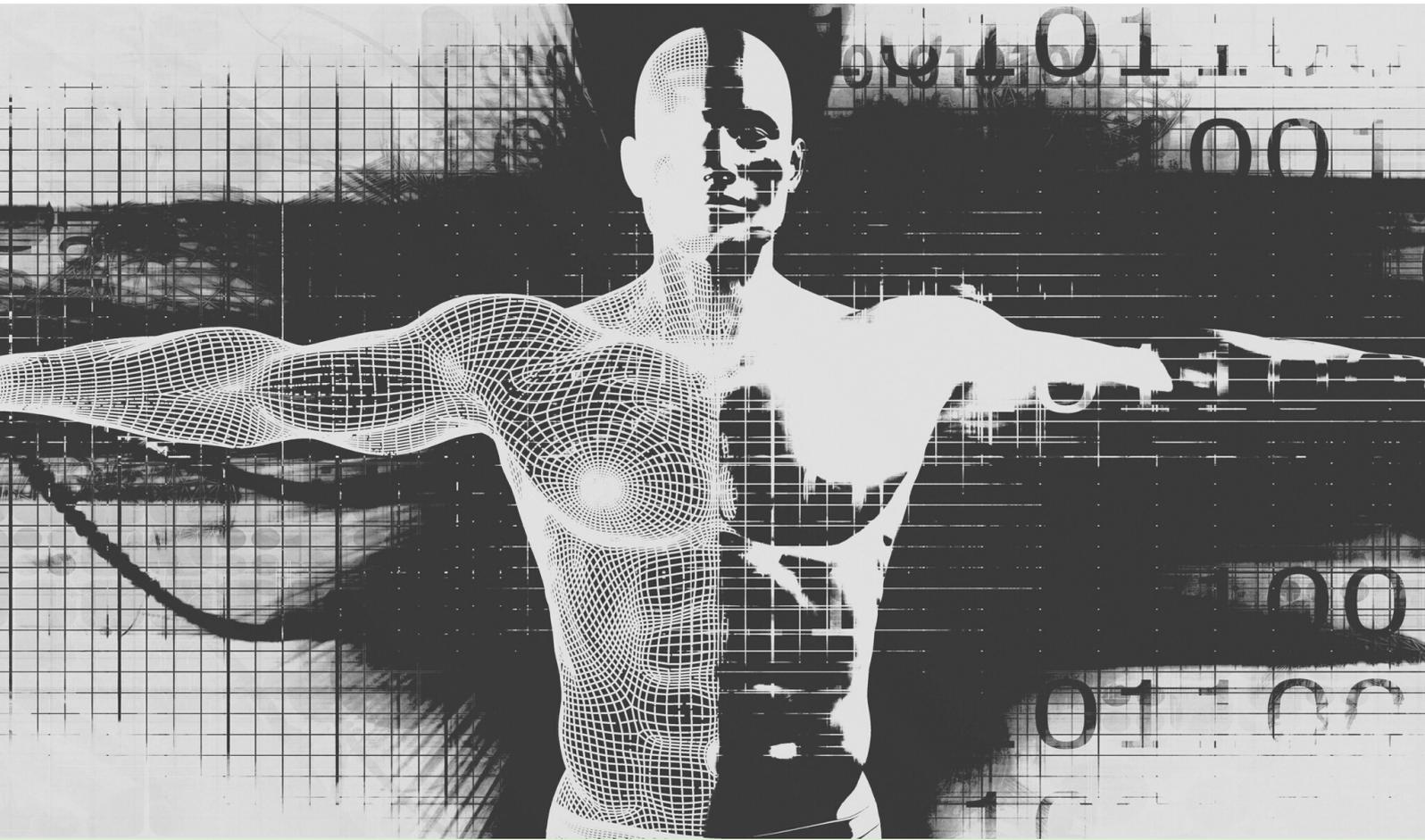
- Expand access to crucial mental health and substance use disorder services and programs for the millions of Americans living with addictions and the co-occurring mental disorders that impacts their families and their communities.
- Ensure that behavioral health treatment remains available to all Americans that need them.
- Increase current funding levels for the Medicaid expansion program, and maintain eligibility for new beneficiaries added under this program.
- Promote health and mental health equity by adequately addressing racism, bias, discrimination, and other systemic barriers within the health care system.
- Support the development of a robust, diverse, and culturally competent health care workforce by facilitating diversity throughout the health care system and by adequately training all staff to be culturally sensitive.

- Expand mental health services and accessibility through tele-mental health platforms.
- Maintain recent federal policies to integrate medical and behavioral health services, in recognition of the fact that treating the whole person reduces co-occurring medical conditions among individuals with behavioral health conditions and chronic medical conditions. (CMHCs embrace a whole-person approach to care, and AMHCA urges that any reform legislation include a priority on expanding evidence-based care and moving toward payment systems that focus on value-based care.)
- Maintain the ban on exclusions of pre-existing medical conditions, including prohibiting charging higher prices to individuals with pre-existing conditions such as mental health disorders.
- Maintain coverage for preventive health services without a co-payment.

Additional key provisions of new health care reform proposals must include:

- Increase the public's access to CMHCs through Medicare recognition and reimbursement of CMHCs so older adults and disabled Americans receive the needed mental health services they deserve (this legislation called the Mental Health Access Improvement Act, includes Medicare recognition for marriage and family therapists).
- Federal legislation authorizing Medicaid reimbursements for CMHCs in all state programs and participation in health plan networks.
- Congressional oversight for federal legislation that has authorized the hiring of CMHCs by the VA, DoD and other federal programs and agencies.
- Congressional oversight for VA hiring of CMHCs in support of the greatly increasing needs of veterans with mental disorders.
- Support for expanding the PHS Act definition of the mental health workforce.
- Complete implementation for the Department of Transportation Substance Abuse Treatment Recognition for CMHCs.
- Promote Federal recognition and advocacy for the inclusion of CMHCs by all private and public employers and insurance programs.
- Promote the federal acknowledgement to policymakers and stakeholders of the *AMHCA Clinical Standards of Practice* and AMHCA's clinical ethics standards that have been recognized by the National Academy of Medicine in prior federal laws.

Conclusion



Our goal is that all Americans will no longer separate mental health from physical health when it comes to access to care or quality of treatment. The next generation must grow up knowing that mental health is a key component of overall health and there is no shame, stigma, or barriers to seeking out care.

Clinical Mental Health Counselors stand ready to engage in a constructive and thoughtful dialogue to ensure the success of future reform efforts. We look forward to continued collaboration on these important issues.

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