

104<sup>TH</sup> CONGRESS  
1<sup>ST</sup> SESSION

# S. 298

To establish a comprehensive policy with respect to the provision of health care coverage and services to individuals with severe mental illnesses, and for other purposes.

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## IN THE SENATE OF THE UNITED STATES

JANUARY 31 (legislative day, JANUARY 30), 1995

Mr. DOMENICI (for himself and Mr. WELLSTONE) introduced the following bill; which was read twice and referred to the Committee on Labor and Human Resources

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## A BILL

To establish a comprehensive policy with respect to the provision of health care coverage and services to individuals with severe mental illnesses, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*  
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Equitable Health Care  
5 for Severe Mental Illnesses Act of 1995”.

6 **SEC. 2. FINDINGS.**

7 Congress finds that—

8 (1) American families should have health insur-  
9 ance protection for the costs of treating severe men-

1 tal illnesses that is commensurate with the protec-  
2 tion provided for other illnesses;

3 (2) currently, many private health insurance  
4 policies and public insurance programs discriminate  
5 against persons with severe mental illnesses by pro-  
6 viding more restrictive coverage for treatments of  
7 those illnesses compared to coverage provided for  
8 treatments of other medical problems;

9 (3) many health insurance plans limit the num-  
10 ber of days allowed for facility care or limit the  
11 number of outpatient visits allowed for the treat-  
12 ment of severe mental illnesses while providing no  
13 limit for the treatment of other physical illnesses;

14 (4) only 21 percent of all health insurance poli-  
15 cies provide inpatient coverage for severe mental ill-  
16 nesses comparable to coverage for other illnesses,  
17 and only 2 percent have comparable outpatient  
18 coverage;

19 (5) only 2 percent of Americans with private  
20 health care coverage have policies that adequately  
21 and fairly cover severe mental illnesses;

22 (6) over 60 percent of health maintenance and  
23 preferred provider organizations specifically exclude  
24 treatment for those with severe mental illnesses;

1           (7) private health insurance provides some type  
2 of coverage for 64 percent of all individuals with se-  
3 vere mental illness, but provides only 46 percent of  
4 the annual expenditures required for the treatment  
5 of severe mental illnesses;

6           (8) health care reform plans designed to make  
7 health care more accessible and affordable often in-  
8 corporate the policies that are discriminatory with  
9 respect to persons with severe mental illnesses which  
10 now exist in common private health insurance plans;

11           (9) unequal health insurance coverage contrib-  
12 utes to the destructive and unfair stigmatization of  
13 persons with severe mental illnesses, illnesses that  
14 are beyond the control of the individuals, just like  
15 cancer, diabetes, and other serious physical health  
16 problems;

17           (10) schizophrenia strikes more than 2,500,000  
18 Americans over the course of their lifetimes, and ap-  
19 proximately 30 percent of all hospitalized psychiatric  
20 patients in the United States suffer from this most  
21 disabling group of mental disorders;

22           (11) left untreated, severe mental illnesses are  
23 some of the most disabling and destructive illnesses  
24 afflicting Americans;

1           (12) studies have found that up to 90 percent  
2 of all persons who commit suicide suffer from a  
3 treatable severe mental illness, such as schizophre-  
4 nia, depression, or manic depressive illness;

5           (13) some 10 percent of all inmates, or 100,000  
6 people, in prisons and jails in the United States suf-  
7 fer from schizophrenia or manic-depressive  
8 psychosis;

9           (14) severe mental illness places an individual  
10 at high risk for homelessness, as approximately one-  
11 third of the Nation's 600,000 homeless persons suf-  
12 fer from severe mental illnesses;

13           (15) many persons suffering from severe mental  
14 illnesses can be treated effectively but ignorance and  
15 stigma continue to prevent many mentally ill individ-  
16 uals from obtaining help;

17           (16) seventy to 80 percent of those suffering  
18 from depression respond quickly to treatment and  
19 80 percent of the victims of schizophrenia can be re-  
20 lieved of acute symptoms with proper medication;

21           (17) about 95 percent of what is known about  
22 both normal and abnormal structure and function of  
23 the brain has been learned in the last 10 years, but  
24 millions of severely mentally ill people have yet to

1 benefit from these startling research advances in  
2 clinical and basic neuroscience;

3 (18) ensuring adequate health insurance cov-  
4 erage for the treatment of severe mental illnesses  
5 can reduce health and societal costs by as much as  
6 \$2,200,000,000 annually by preventing more costly  
7 interventions in the lives of persons with untreated  
8 severe mental illnesses and by helping those with se-  
9 vere mental illnesses, many of whom are young  
10 adults, remain productive members of society; and

11 (19) legislation to reform the health care sys-  
12 tem should not condone or perpetuate discrimination  
13 against persons with severe mental illnesses.

14 **SEC. 3. STATEMENT OF POLICY.**

15 (a) IN GENERAL.—It is the policy of the United  
16 States that—

17 (1) persons with severe mental illnesses must  
18 not be discriminated against in the health care sys-  
19 tem; and

20 (2) health care coverage, whether provided  
21 through public or private health insurance or any  
22 other means of financing, must provide for the treat-  
23 ment of severe mental illnesses in a manner that is  
24 equitable and commensurate with that provided for  
25 other major physical illnesses.

1 (b) CONSTRUCTION.—Subsection (a) shall not be con-  
2 strued to preclude the adoption of laws or policies requir-  
3 ing or providing for appropriate and equitable coverage  
4 for other mental health services.

5 **SEC. 4. NONDISCRIMINATORY AND EQUITABLE HEALTH**  
6 **CARE COVERAGE.**

7 With respect to persons with severe mental illnesses,  
8 to be considered nondiscriminatory and equitable under  
9 this Act, health care coverage shall cover services that are  
10 essential to the effective treatment of severe mental ill-  
11 nesses in a manner that—

12 (1) is not more restrictive than coverage pro-  
13 vided for other major physical illnesses;

14 (2) provides adequate financial protection to the  
15 person requiring the medical treatment for a severe  
16 mental illness; and

17 (3) is consistent with effective and common  
18 methods of controlling health care costs for other  
19 major physical illnesses.

20 **SEC. 5. COMMITMENT TO POLICY.**

21 It is the purpose of this Act to commit the Congress  
22 and the Executive Branch to incorporating the policy set  
23 forth in section 3 through efforts, including the enactment  
24 of legislation, which are intended to improve access to or  
25 control the costs of health care.

1 **SEC. 6. DEFINITION.**

2 As used in this Act, the term “severe mental illness”  
3 means an illness that is defined through diagnosis, disabil-  
4 ity and duration, and includes disorders with psychotic  
5 symptoms such as schizophrenia, schizoaffective disorder,  
6 manic depressive disorder, autism, as well as severe forms  
7 of other disorders such as major depression, panic dis-  
8 order, and obsessive compulsive disorder.

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