

AMERICAN ACADEMY OF CHILD & ADOLESCENT PSYCHIATRY

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April 11, 2018

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Centers for Medicare and Medicaid Services

Department of Health and Human Services

Attention: CMS-9924-P

P.O. Box 8010

Baltimore, MD 21244-8010

Re: RIN 0938-AT48 Short-Term, Limited-Duration Insurance

Dear Dr. Verma:

The American Academy of Child and Adolescent Psychiatry (AACAP) appreciates the opportunity to respond to the agency's request for public comments on the proposed rule that would amend the definition of short-term limited duration health insurance intended to lengthen the maximum period of such policies.

AACAP is the professional home to 9,300 child and adolescent psychiatrists. Our mission is to promote the healthy development of children, adolescents, and families, and we therefore have a strong interest in health insurance matters. When needed, early and prompt mental health intervention is essential to the healthy development of children and adolescents and changes the trajectory of young lives for the better. The Affordable Care Act of 2010 appropriately included mental health and substance use disorder treatments as one of ten Essential Health Benefits (EHBs) in health insurance plan requirements.

The proposed rule states that this policy change would provide a greater number of affordable consumer choices for health insurance coverage, but this proposal also states that such health insurance policies would be unlikely to include coverage of the ten EHBs.

Of additional concern is that the proposed rule only discusses benefits that would likely not be covered in short-term limited-duration health insurance plans yet provides no meaningful detail about which services would be covered in these plans.

Without such details, it is impossible to determine the exact impact of having these short-term limited duration health insurance plans made available to consumers.

AACAP therefore has serious concerns about the proposed rule, which if not modified, would seem to drastically loosen healthcare coverage requirements for short-term, limited-duration health insurance plans. Without further clarification concerning which services would and would not be covered in these plans, AACAP fears that treatment for mental health and substance use disorders would be excluded. We are also concerned that the proposed rule, if finalized without significant revision, would exacerbate existing and severe challenges in accessing mental health and substance use disorder services. We believe that allowing these plans to enter the insurance marketplace is short-sighted and is not the answer to solving the nation's healthcare financing challenges.

Prevention and early intervention is the key to better child and adolescent mental health outcomes before these conditions become more serious, costlier, and more difficult to treat.¹ For example, 13% of youth aged 8-15 live with mental illnesses severe enough to cause significant impairment in their day-to-day lives.² This figure jumps to 21% in youth aged 13-18.³ Among these mental illnesses is depression, with 5% of children and adolescents suffering from this potentially disabling condition at any given time⁴. Without treatment, these conditions worsen and can prevent the normal development of youth into productive adults. Moreover, children who live in households with adults who cannot access needed mental health and substance use treatments also suffer if these services are not available for their parents or other caregivers.

Separate, multi-agency efforts are underway to study and address mental illness and serious emotional disturbances. The Interdepartmental Serious Mental Illness Coordinating Committee, established in the 21st Century Cures Act of 2016, includes members across several federal agencies including the Substance Abuse Mental Health Services Administration and the Department of Veterans Affairs. In addition, Current Procedural Terminology has now added a code set that covers psychiatric collaborative care management services that cover the work of a primary care physicians, psychiatric consultants, and care managers working together to provide comprehensive care to patients. This code set, first reimbursed in the Medicare program, recognizes that mental health is a key part of physical health. Therefore, the promulgation of regulations such as this one, that would potentially dismantle meaningful health insurance coverage for large numbers of Americans, including children, would seem to conflict with other efforts at the federal level to expand coverage for mental health and substance use disorder coverage.

AACAP therefore urges the agency to retain requirements for EHBs in the final rule defining short-term, limited-duration health insurance plans. As a society we cannot afford to go back to a time when services to treat mental health and substance use disorders were not covered by health plans or

¹ NIMH, Mental Illness Exacts Heavy Toll: Beginning in Youth, 2005.

² National Health and Nutrition Examination Survey, 2010.

³ National Comorbidity Survey Replication—Adolescent Supplement, 2010.

⁴ American Academy of Child and Adolescent Psychiatry.

https://www.aacap.org/AACAP/Families_and_Youth/Resource_Centers/Depression_Resource_Center/Home.aspx

insurance carriers. Leaving the door open to removing requirements to cover these essential services would harm some of our nation's most vulnerable citizens—our children and adolescents.

Thank you for your consideration of AACAP's concerns. Please don't hesitate to contact Karen Ferguson, Deputy Director of Clinical Practice, at kferguson@aacap.org should you have questions.

Sincerely,

A handwritten signature in black ink that reads "Karen Dineen Wagner". The signature is written in a cursive, flowing style.

Karen Dineen Wagner, MD, PhD
President