

A report issued by the U.S. Department of Justice Bureau of Justice Statistics in September 2006 revealed that more than half of all prison and jail inmates had a mental health problem. BJS also reported that more than two-fifths of state inmates and more than half of jail inmates showed symptoms of mania, 23% of state prisoners and 30% of jail inmates suffer from depression and that 15% of state prisoners and 24% of jail inmates met the criteria for psychotic disorders. 24% of state prisoners and 19% of jail inmates suffered from substance dependence or abuse and an estimated 42% of inmates in state prisons and nearly half of those in local jails were found to have both a mental health problem and a substance dependence or abuse problem.

Without proper care and treatment in a mental hospital, these individuals will never recover or be healthy again nor will they ever be able to live a normal life. Most likely they will continue to recidivate, crowd our facilities, drive up costs throughout the entire criminal justice system and cause harm to others and unto themselves. Quite simply, correctional facilities are not equipped and corrections personnel are not trained to handle the mentally ill individuals.

We appreciate your leadership on this issue and offer you our full support for H.R. 1424, the Paul Wellstone Mental Health and Addiction Equity Act of 2007.

Sincerely,

GARY D. MAYNARD,
President.

NATIONAL ASSOCIATION OF ANOREXIA
NERVOSA AND ASSOCIATED DIS-
ORDERS,

Highland Park, IL, March 3, 2008.

Re the Paul Wellstone Mental Health and
Addiction Equity Act of 2007.

Hon. PATRICK J. KENNEDY and Hon. JIM
RAMSTAD,
House of Representatives,
Washington, DC.

DEAR REPRESENTATIVES KENNEDY AND
RAMSTAD: I am writing on behalf of ANAD,
the National Association of Anorexia
Nervosa and Associated Disorders, to urge
House Members to vote YES on your bill
H.R. 1424, the Paul Wellstone Mental Health
& Addiction Equity Act. ANAD is the nation's
oldest organization dedicated to alleviating
the problems of eating disorders, with an
active membership composed of professionals,
sufferers, and their families.

More than 8 million Americans suffering
from eating disorders who face overwhelming
obstacles to health insurance coverage for
mental health treatment fully embrace the
passage of this legislation. Eating disorders
kill. Anorexia nervosa has the highest
mortality rate of any mental illness. By
closing the loopholes in the 1996 federal
parity law and requiring equity in eating
disorders coverage, treatment, and financial
requirements, this legislation will greatly
assist Americans with these potentially
deadly illnesses without a costly burden to
employers.

ANAD hopes that passage of your strong
bipartisan bill will hasten the completion of
negotiations with the Senate on a bill that
will cover the full range of mental illnesses
and become law this year. Further delay is
unacceptable, especially for those whose
lives are in peril.

We thank you for your leadership on this
important issue.

Sincerely,

VIVIAN HANSON MEEHAN,
President.

EASTER SEALS,
Washington, DC, March 3, 2008.

DEAR REPRESENTATIVE: Easter Seals urges
you to vote to support the passage of H.R.

1424, the Paul Wellstone Mental Health and
Addiction Equity Act of 2007. Access to men-
tal health services is essential for anyone to
live a healthy life.

Mental health disorders are the second
leading cause of disability and premature
death in the United States and are often ex-
perienced by people with disabilities. Many
health insurance plans set cost limits on
mental health treatment, but do not impose
similar cost limits on other medical and sur-
gical benefits. It is critical that access to
mental health services be on par with access
to services for other medical conditions.
Breaking down barriers to accessing mental
health services improves the lives of people
with disabilities, strengthens families and
saves lives.

We look forward to continuing to work
with you as the process moves forward.
Thank you for considering our views.

Sincerely,

KATHERINE BEH NEAS,
Vice President, Government Relations.

SERVICE EMPLOYEES
INTERNATIONAL UNION,
Washington, DC, March 4, 2008.

DEAR REPRESENTATIVE: The Service Em-
ployees International Union (SEIU) urges
you to vote "yes" on H.R. 1424, the Paul
Wellstone Mental Health and Addiction Equ-
ity Act. Millions of American families are
touched by mental illness and substance
abuse disorders, and our workplaces are less
productive when mental illness is untreated
and stigmatized. H.R. 1424 would require that
group health plans cover mental illness on
the same terms that it provides for medical
and surgical coverage. There is a growing
body of evidence that supports the effective-
ness of various treatments for people suf-
fering from mental illness and substance
abuse disorders. High co-pays and
deductibles can discourage access to treat-
ment, and arbitrary limits can result in dis-
continued therapies that would otherwise be
effective. Better screening and early treat-
ment is often the most cost-effective treat-
ment. It is time to pass H.R. 1424 and give
new hope and treatment to millions of pa-
tients and families struggling with mental
illness.

Votes on this legislation will be added to
the SEW scorecard found at www.seiu.org. If
you have any questions, please contact Ann
Kempski, Deputy Director of Legislation.

Sincerely,

ANNA BURGER,
International Secretary-Treasurer.

AUTISM SOCIETY OF AMERICA,
Bethesda, MD, March 2, 2008.

Hon. PATRICK KENNEDY,
House of Representatives,
Washington, DC.

DEAR CONGRESSMAN KENNEDY: On behalf of
the Autism Society of America, we write in
strong support of the Paul Wellstone Mental
Health and Addiction Equity Act of 2007.
This legislation will go a long way to end
discrimination by private health insurers by
mandating parity in the treatment of mental
health coverage.

Autism is a complex developmental dis-
ability that typically appears during the
first three years of life and affects a person's
ability to communicate and interact with
others. Autism is defined by a certain set of
behaviors and is a "spectrum disorder" that
affects individuals differently and to varying
degrees. There is no known single cause for
autism, nor is there a single treatment.

While there is no single treatment for au-
tism, intensive, sustained special education
programs and behavior therapy does improve
the function of children with autism, allow-
ing them to increase their communication

skills and learn. Individuals with autism
often benefit from mental health treatments
including the prescribing of medication and
counseling. Beyond these, there are new
treatments and interventions on the horizon,
and it is important that individuals with au-
tism can access breakthrough therapies.

Your legislation provides equal treatment
of mental health insurance benefits com-
pared to medical and surgical benefits spe-
cifically with respect to cost sharing re-
quirements, financial requirements, and
treatment limitations. Many individuals
with autism have co-morbid mental illnesses
and would greatly benefit from enactment of
this legislation.

ASA, the nation's leading grassroots au-
tism organization, exists to improve the
lives of all affected by autism. On behalf of
our 200,000 members and supporters across
the nation, we thank you for your leadership
on this issue, and strongly support you in
your efforts.

Sincerely,

LEE GROSSMAN,
President and CEO.

PAUL WELLSTONE MENTAL
HEALTH AND ADDICTION EQUITY
ACT OF 2007

SPEECH OF

HON. JANICE D. SCHAKOWSKY
OF ILLINOIS

IN THE HOUSE OF REPRESENTATIVES

Wednesday, March 5, 2008

Ms. SCHAKOWSKY. Mr. Speaker, I would
like to have the following letters of support for
H.R. 1424, the Paul Wellstone Mental Health
and Addiction Equity Act, submitted for the
record on the floor debate of this bill.

MARCH 4, 2008.

Hon. NANCY PELOSI,
*Speaker of the House of Representatives, Capitol
Building, Washington, DC.*

Hon. JOHN BOEHNER,
*Republican Leader, House, Capitol Building,
Washington, DC.*

DEAR SPEAKER PELOSI AND LEADER
BOEHNER: Consumers Union, the nonprofit
publisher of Consumer Reports, urges you to
support HR 1424, the Paul Wellstone Mental
Health and Addiction Equity Act, to prohibit
insurance discrimination against 80 million
Americans suffering from addiction and
mental illness.

Over 25 million people need mental health
and addiction treatment but are not getting
it. Each year, 1.3 billion work days are lost
due to mental disorders, more than arthritis,
stroke, heart attack and cancer combined.
Moreover, workers with untreated depression
cost their employers \$31 billion a year in lost
productivity and workers with untreated al-
coholism cost their employers \$135 billion in
lost productivity each year. The need for equ-
ity in health plans for the treatment of ad-
diction and mental illness is well docu-
mented—14 field hearings were held around
the country in 2007. The time to pass this
legislation is now.

H.R. 1424, introduced by Representatives
Patrick Kennedy and Jim Ramstad, has the
support of the majority of the House with 273
cosponsors. Because of the critical nature of
this legislation, we urge you to support HR
1424 and move it to the full floor for a vote
as soon as possible.

Sincerely,

GAIL SHEARER,
*Director, Health Policy
Analysis, Consumers
Union Washington
Office.*

NATIONAL ASSOCIATION OF COUNCILS
ON DEVELOPMENTAL DISABILITIES,
Alexandria, VA, March 2, 2008.

Hon. PATRICK KENNEDY,
*House of Representatives,
Washington, DC.*

DEAR CONGRESSMAN KENNEDY: On behalf of the National Association of Councils on Developmental Disabilities we write in strong support of the Paul Wellstone Mental Health and Addiction Equity Act of 2007.

Research from the past 10 to 20 years has resulted in a fundamental change in the way mental illnesses are viewed and treated. We know now that people can improve and recover from many serious mental illnesses. Yet, according to the Substance Abuse and Mental Health Administration's (SAMHSA) Resource Center to Address Discrimination Stigma Associated with Mental Illness (ADS Center), only 1 in 5 of children in need is receiving appropriate treatment. Two-thirds of the roughly 54 million Americans with mental illnesses do not receive treatment.

Your legislation provides equal treatment of mental health insurance benefits compared to medical and surgical benefits specifically with respect to cost sharing requirements, financial requirements, and treatment limitations. Without parity, millions of Americans will continue to go without groundbreaking treatment leading them to suffer more emotional pain, disability, and financial burden, and resulting in greater morbidity costs—the loss of productivity in usual activities.

As you work to move this legislation across the finish line, the Councils strongly support your efforts. Thank you for your leadership on this issue.

Sincerely,

KAREN F. FLIPPO,
Chief Executive Officer.
LISTENING SAGE ASSOCIATES,
Santa Fe, NM.

Hon. PATRICK J. KENNEDY,
*House of Representatives,
Washington, DC.*

Hon. JIM RAMSTAD,
*House of Representatives,
Washington, DC.*

DEAR REPRESENTATIVES KENNEDY AND RAMSTAD: I am writing to urge House Members to vote YES on your bill H.R. 1424, the Paul Wellstone Mental Health & Addiction Equity Act.

Insurance coverage has been grossly inadequate for mental health services and many families have not been able to afford services. Insurance companies often give false impressions about the real mental health benefits they offer. Often the client pays three fourths of the bill and the insurance company pays a small co-pay. This is unfair and dishonest. I hope your bill will be supported and passed. It needs to cut out the loop holes in former mental health acts.

Thank you for your leadership.

Sincerely,

LEONA STUCKY-ABBOTT.
NATIONAL ASSOCIATION FOR THE
DUALY DIAGNOSED,
Kingston, NY, February 29, 2008.

Hon. PATRICK J. KENNEDY,
*House of Representatives,
Washington, DC.*

Hon. JIM RAMSTAD,
*House of Representatives,
Washington, DC.*

DEAR REPRESENTATIVES KENNEDY AND RAMSTAD: I am writing on behalf of the National Association for the Dually Diagnosed (NADD) to urge House Members to vote YES on your bill H.R. 1424, the Paul Wellstone Mental Health Addiction Equity Act.

Millions of American families who face structural discrimination against the mental health benefits in their health coverage will

welcome passage of this legislation. It is designed to close loopholes in the 1996 Federal parity law that has too often been evaded. By requiring group health plans that provide mental health or substance use benefits to include them without different duration limits and financial requirements, this legislation will help people with mental disorders without a costly burden on employers.

We hope that House passage of your strong bipartisan bill will spur to completion the negotiations with the Senate on a bill that can become law this year. Further delay is not acceptable.

Thank you for your leadership on this important issue.

Sincerely,

ROBERT J. FLETCHER,
Chief Executive Officer and Founder.

PAUL WELLSTONE MENTAL HEALTH AND ADDICTION EQUITY ACT OF 2007

SPEECH OF

HON. FRANK PALLONE, JR.

OF NEW JERSEY

IN THE HOUSE OF REPRESENTATIVES

Wednesday, March 5, 2008

Mr. PALLONE. Mr. Speaker, I would ask that the following letters of support for H.R. 1424, the Paul Wellstone Mental Health and Addiction Equity Act of 2008, submitted for the RECORD on the floor debate on this bill.

PARITY NOW COALITION,
March 3, 2008.

Hon. PATRICK KENNEDY,
*House of Representatives,
Washington, DC.*

Hon. JIM RAMSTAD,
*House of Representatives,
Washington, DC.*

DEAR REPRESENTATIVE KENNEDY AND REPRESENTATIVE RAMSTAD: The undersigned organizations applaud you for your commitment to mental health and addiction parity legislation. We wish to thank you and your staffs for the countless hours you have dedicated to this bill thus far and look forward to working with you towards enacting the Paul Wellstone Mental Health and Addiction Equity Act of 2007 into law.

We hereby lend our formal support to this invaluable piece of legislation.

NATIONAL ORGANIZATIONS

AFL-CIO
AIDS Action Council
Alliance for Children and Families
American Academy of Child and Adolescent Psychiatry
American Academy of HIV Medicine
American Academy of Neurology
American Academy of Pediatrics
American Association for Geriatric Psychiatry
American Association for Marriage and Family Therapy
American Association for Psychological Rehabilitation
American Association for the Treatment of Opioid Dependence
American Association of Children's Residential Centers
American Association of Pastoral Counselors
American Association of Suicidology
American College of Occupational and Environmental Medicine
American Counseling Association
American Federation of Teachers
American Foundation for Suicide Prevention
American Group Psychotherapy Association

American Hospital Association
American Medical Association
American Mental Health Counselors Association
American Music Therapy Association
American Nurses Association
American Occupational Therapy Association
American Psychiatric Nurses Association
American Psychoanalytic Association
American Psychotherapy Association
American Probation and Parole Association
American Public Health Association
American School Health Association
American Society of Addiction Medicine
Anna Westin Foundation
Anxiety Disorders Association of America
Association for the Advancement of Psychology
Association for Ambulatory Behavioral Healthcare
Association for Psychological Science
Association of American Medical Colleges
Association of Jewish Family & Children's Agencies
Association of Recovery Schools
Association of University Centers on Disabilities
Bazelon Center for Mental Health Law
Betty Ford Center
Bradford Health Services
Caron Treatment Centers
Center for Clinical Social Work
Center for Science in the Public Interest
Children and Adults with Attention-Deficit/Hyperactivity Disorder
Child Welfare League of America
Clinical Social Work Association
Clinical Social Work Guild 49, OPEIU
Community Anti-Drug Coalitions of America (CADCA)
Cumberland Heights
Depression and Bipolar Support Alliance
Disability Rights Education & Defense Fund
Easter Seals
Eating Disorders Coalition for Research, Policy and Action
Eating Disorder Referral and Information Center/EDReferral.com
Entertainment Industries Council
Faces and Voices of Recovery
Families for Depression Awareness
Families USA
Family Voices
Federation of Families for Children's Mental Health
First Focus
Hazelden Foundation
HIV Medicine Association
Housing Works, Inc
Human Rights Campaign
Institute for the Advancement of Social Work Research
Johnson Institute
Kids Project
Legal Action Center
Mental Health America
NAADAC—The Association for Addiction Professionals
National Advocacy Center of the Sisters of the Good Shepherd
National Advocates for Pregnant Women
National Alliance of Methadone Advocates
National Alliance to End Homelessness
National Association for Children of Alcoholics
National Association of Addiction Treatment Providers
National Association of Anorexia Nervosa and Associated Disorders—ANAD
National Association of County and City Health Officials
National Association of County Behavioral Health and Developmental Disability Directors