

The Affordable Care Act to Increase Mental Health Services

What would you consider essential healthcare services? Ambulance? Hospitalization?

How about treatment for the mentally ill or for substance use?

The Affordable Care Act sees 10 essential benefits that every qualified health plan should provide to participate in the State Health Insurance Exchange and, as a consequence, the Medicaid expansion. Included among these are medical benefits and mental health and substance use treatment services, including behavioral health treatment.

Other essential services are:

- Ambulatory patient services
- Emergency services
- Hospitalization
- Maternity and newborn care
- Prescription drugs
- Rehabilitative and habilitative services and devices
- Laboratory services
- Preventive and wellness services and chronic disease management
- Pediatric services, including oral and vision care

Final rules on the Essential Health Benefits released earlier this year ensure that consumers purchasing insurance can be confident that their health plans will provide the care they need if they get sick, and this includes mental health and substance use disorders.

This means that nearly four million people who are currently covered in the individual health insurance market will gain either mental health or substance use disorder coverage (or both). More than 1.2 million individuals enrolled in small, group insurance plans will also receive mental health and substance use disorder benefits under the Affordable Care Act.

In addition, according to an article from the [American Mental Health Counselors Association](#), “the [Mental Health Parity and Addiction Equity Act](#) (MHPAEA) of 2008 prohibits financial requirements and treatment limitations for mental health and substance abuse benefits in group health plans from being more restrictive than those placed on medical and surgical benefits.”

The Affordable Care Act will expand insurance coverage to a projected 28 million Americans, who were previously uninsured, by providing access to private health insurance in the individual and small-group markets, the State Health Insurance Marketplaces, and Medicaid. Essential Health Benefits, including mental health and substance use disorder services, subject to parity requirements, will be available to this entire newly covered population.

These changes will have a dramatic effect on healthcare providers in the mental health field. For the first time, people who were disenfranchised from the health insurance market will be able to participate and receive the healthcare they need and deserve. For mental healthcare providers, this will mean new opportunities to treat and rehabilitate a segment of the population that has remained in the shadows. and to help rehabilitate them so they can begin to lead constructive lives.

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