Medicare Beneficiaries

Lack Adequate Access to Mental Health and Substance Use Disorder Treatment

S.828/H.R.432 The Mental Health Access Improvement Act

This legislation is critical to addressing the serious gaps in care for Medicare beneficiaries as well as rapidly increasing hospital costs.

This legislation:

- Adds approximately 225,000 mental health providers to the Medicare network.
- Increases access in rural and underserved areas.
- Modernizes Medicare mental health policy and addresses increased demand for services.
- Lowers cost of care and improves outcomes.
  - Will provide treatment options for the 1 in 4 older adults that are reporting anxiety and depression during the COVID-19 pandemic.
  - Will address the opioid crisis, as Medicare is currently the single largest payer for opioid-related hospitalizations.
  - Passed the House Energy and Commerce Committee’s markup in September 2020.

Access to Mental Health Professionals Varies Heavily Across the United States

Approximately 77 million people live in 3,000 mental health professional shortage areas.

- According to the National Rural Health Association, there are already 30 million people living in rural counties where access to mental health treatment is completely unavailable.
- 50% of rural counties in America have no clinicians (psychiatrists, psychologists, or social workers).

The Kaiser Family Foundation reports that levels of anxiety and depression have doubled among at-risk older adults since the beginning of the COVID-19 pandemic. Older adults who report experiencing depressive symptoms have higher rates of physical illness and functional disability, as well as higher utilization of health care resources. Unfortunately, Medicare beneficiaries currently lack adequate access to mental health services.

Notably, Medicare has not updated its mental health provider regulations since 1989, effectively creating a Medicare mental health coverage gap for older adults and people with long-term disabilities. The Medicare population has nearly doubled from roughly 30 million to over 60 million in that timeframe. That number will only continue to grow, and Medicare needs to modernize and cover these professions to fill treatment gaps and cut costs.