

*Submitted by  
Mr. Kline for  
the record.*



AMERICAN BENEFITS  

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COUNCIL

July 16, 2007

The Honorable George Miller  
The Honorable Howard McKeon  
The Honorable Robert Andrews  
The Honorable John Kline  
Committee on Education and Labor  
United States House of Representatives  
Washington, DC 20515

Dear Chairmen Miller and Andrews and Ranking Members McKeon and Kline:

Later this week, the House Committee on Education and Labor will meet to mark-up the Paul Wellstone Mental Health and Addiction Equity Act, H.R. 1424. When it considers H.R. 1424, the American Benefits Council, representing major employers and other organizations that collectively sponsor and administer health and retirement benefits plans covering more than 100 million Americans, urges the Committee to support a substitute amendment to be offered by Representative Kline which would use the Senate's mental health parity measure, S. 558 as a substitute for H.R. 1424.

The Senate's bipartisan mental health parity bill was carefully crafted through a balanced process that gave all of the major stakeholders on this issue the opportunity to have their priority concerns addressed. Unlike the House parity bill, S. 558 does not mandate specific benefits that employers or health plans must cover, makes clear that the medical management of these important benefits may not be prohibited and preserves flexibility in the formation of networks of providers for these services. These provisions are vitally important because they allow employers to design and manage the health coverage they offer to best meet their employees' needs.

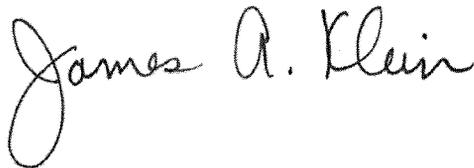
Finally and most importantly, several key provisions of S.558 are intended to ensure uniformity between the new federal parity requirements and those established by the states, while maintaining the traditional role of the states to regulate the business of health insurance in all other respects. Major, multi-state

employers, in particular, rely upon the uniform federal framework established by the Employee Retirement Income Security Act (ERISA). S. 558 recognizes that if achieving mental health parity is important enough to warrant Congressional action, then the standard articulated by federal law is the one that should apply uniformly. States should not be encouraged or permitted to enact a confusing patchwork of state parity requirements that would treat individuals differently depending upon where they live and work, and that would create extraordinary and unnecessary challenges for employers and health plans. It is crucial that the ERISA uniform federal framework not be eroded.

The American Benefits Council's members highly value and have long recognized the importance of effective health coverage for the treatment of both physical and behavioral conditions. Indeed, because of the importance our members place on these services we have repeatedly urged that current federal parity standards not be expanded in a way that would add to plan costs or increase the complexity of plan administration. Doing so could unintentionally risk a reduction in coverage for these or other benefits provided to employees and their families.

Again, we urge you to support Representative Kline's amendment to offer the Senate's mental health parity bill as a substitute for H.R. 1424. Thank you for your consideration of this important issue.

Sincerely,

A handwritten signature in black ink that reads "James A. Klein". The signature is written in a cursive style with a large, looping initial "J".

James A. Klein  
President

July 17, 2007

The Honorable George Miller  
The Honorable Howard McKeon  
The Honorable Robert E. Andrews  
The Honorable John Kline  
Committee on Education and Labor  
United States House of Representatives  
Washington, DC 20515

Dear Chairmen Miller and Andrews and Ranking Members McKeon and Kline:

We write in joint and strong opposition to H.R. 1424, the Paul Wellstone Mental Health and Addiction Equity Act of 2007. We urge you to adopt the language of the managers' amendment to S. 558, the Mental Health Parity Act, in its stead.

We strongly oppose H.R. 1424, principally because of its broad benefit mandate, its lack of protection for medical management of benefits, provisions allowing the states to enact more extensive provisions including an alternative remedy structure, and provisions mandating out-of-network coverage.

The undersigned organizations remain committed to the bipartisan Senate process and the balanced legislation that process produced. The House bill is similar in many respects to the mental health parity bills we have previously opposed. In some respects, it is worse.

Again, we strongly oppose the House bill, H.R. 1424 and urge its defeat in the House Education and Labor Committee on Wednesday. We urge your support instead for the substitute amendment containing the language of the managers' amendment to S. 558, the Mental Health Parity Act.

Sincerely,

National Retail Federation  
Aetna  
U.S. Chamber of Commerce  
American Benefits Council  
Society for Human Resource Management  
National Association of Health Underwriters  
National Association of Wholesaler-Distributors  
National Association of Manufacturers  
National Restaurant Association  
BlueCross BlueShield Association  
Retail Industry Leaders Association

June 14, 2007

The Honorable Edward M. Kennedy  
The Honorable Michael B. Enzi  
The Honorable Pete V. Domenici  
United States Senate  
Washington, DC 20510

Dear Chairman Kennedy and Senators Enzi and Domenici:

We write in joint and strong support of prompt Senate action on the manager's amendment to the bipartisan Mental Health Parity Act of 2007, S. 558. We support enactment of your balanced legislation into law this year.

Organizations representing consumers, family members, health professionals, and health care systems and administrators, business associations and insurance organizations negotiated in good faith with you and your staff over an extended period to produce this bill. We believe that it is a strong bill that will advance the interests of the greater mental health community while balancing the interests of employers who voluntarily sponsor benefit coverage. This bill also respects the role of the states in the regulation of insurance.

We urge its prompt adoption by the full Senate and will join you in opposing unacceptable or weakening amendments during the Senate debate and will remain committed to this bipartisan approach as this legislation moves forward. Thank you again for your joint leadership on this important issue.

Sincerely,

National Retail Federation  
National Association of Wholesaler-  
Distributors  
National Association of Health  
Underwriters  
Society for Human Resource  
Management  
National Association of Manufacturers  
National Federation of Independent  
Business  
Aetna  
U.S. Chamber of Commerce  
BlueCross BlueShield Association  
CIGNA

American Hospital Association  
American Psychiatric Association  
American Psychological Association  
Association for Behavioral Health and  
Wellness  
Federation of American Hospitals  
National Alliance on Mental Illness  
National Association of Psychiatric  
Health Systems

July 17, 2007

The Honorable Nancy Pelosi  
Speaker  
U.S. House of Representatives  
H-232, U.S. Capitol  
Washington, D.C. 20515

The Honorable John A. Boehner  
Republican Leader  
U.S. House of Representatives  
H-204, U.S. Capitol  
Washington, D.C. 20515

Dear Speaker Pelosi and Leader Boehner:

The undersigned represent small and large employers and human resource professionals from all sectors of the economy. We strongly support equal employment opportunity and abhor unlawful discrimination. We write to express our vigorous opposition to H.R. 2831, the Ledbetter Fair Pay Act of 2007, which the Education and Labor Committee recently approved on a party line vote. The scope of the bill goes well beyond the issues raised in the Supreme Court's recent decision in *Ledbetter v. Goodyear Tire & Rubber Co.* and removes an important incentive to prompt surfacing and resolution of potential discrimination claims.

When Congress passed Title VII of the Civil Rights Act, the Age Discrimination in Employment Act and the Americans with Disabilities Act, it created limits on the period of time under which an individual may file an employment charge. These limits promote early reporting of potential discrimination, rapid resolution of employment claims and quick remedial actions by employers where appropriate. In short, they encourage employees and employers to address possible problems early on in order to mitigate the impact of discrimination. Subsequent amendments to these laws did not change the core principle that claims should be filed promptly and resolved in an expeditious manner. The time limitations also balance competing interests by providing plaintiffs a reasonable time to file charges while preventing courts and employers from facing stale claims in which the facts are difficult to ascertain because evidence is lost, memories have faded and witnesses have disappeared or passed away.

We urge that you preserve this balance that has existed in civil rights law for over 40 years and oppose H.R. 2831. The legislation virtually eliminates any time limitations for claims of employment discrimination. In doing so, it removes an important incentive to prompt surfacing and resolution of potential claims. It also invites frivolous claims when unwarranted litigation is already an issue under current discrimination laws. In fact, the Equal Employment Opportunity Commission reported that it found reasonable cause in only 5.3% of the over 75,000 charges of discrimination that it received in FY2006 and found absolutely no cause for discrimination in over 60% of the charges (amounting to 45,500 "no cause" charges). A study of previous years' statistics yields similar results.

In addition, we are disappointed that this bill has not been carefully vetted through legislative hearings. It is critical that legislation of this complexity and with the potential for such significant impact be carefully considered and not rushed through only weeks after its introduction.

(cont.)

For these reasons, we urge you to oppose H.R. 2831, the Ledbetter Fair Pay Act of 2007.

Thank you for your consideration.

American Architectural Manufacturers Association  
American Bakers Association  
American Hotel and Lodging Association  
American Petroleum Institute  
AMT-The Association for Manufacturing Technology  
Associated Builders and Contractors  
Associated General Contractors  
College and University Professional Association for Human Resources  
Cookware Manufacturers Association  
HR Policy Association  
Independent Electrical Contractors  
Independent Lubricant Manufacturers Association  
Interlocking Concrete Pavement Institute  
International Foodservice Distributors Association  
International Franchise Association  
International Public Management Association for Human Resources  
Kitchen Cabinet Manufacturers Association  
Mason Contractors Association of America  
Metal Powder Industries Federation  
National Association of Convenience Stores  
National Association of Home Builders  
National Association of Manufacturers  
National Association of Minority Contractors  
National Association of Wholesaler-Distributors  
National Association of Women in Construction  
National Federation of Independent Business  
National Glass Association  
National Restaurant Association  
National Retail Federation  
National Shooting Sports Foundation  
National Public Employer Labor Relations Association  
National Utility Contractors Association  
Non-Ferrous Founders' Society  
Plastic Pipe and Fittings Association  
Plumbing-Heating-Cooling Contractors - National Association  
Printing Industries of America  
Retail Industry Leaders Association  
Society for Human Resource Management  
Sporting Arms & Ammunition Manufacturers' Institute  
Steel Shipping Container Institute  
Tree Care Industry Association  
U.S. Chamber of Commerce  
Women Construction Owners and Executives

**America's Health  
Insurance Plans**

601 Pennsylvania Avenue, NW  
South Building  
Suite Five Hundred  
Washington, DC 20004

202.778.3200  
www.ahip.org



July 17, 2007

The Honorable Howard "Buck" McKeon  
Ranking Republican Member  
House Committee on Education and Labor  
U.S. House of Representatives  
2351 Rayburn Building  
Washington, D.C. 20515

Dear Congressman McKeon:

On behalf of America's Health Insurance Plans (AHIP), I am writing to express our views on H.R. 1424, the "Paul Wellstone Mental Health and Addiction Equity Act of 2007."

Our members have a strong track record of providing access to high-quality, evidence-based care for behavioral health conditions. As the behavioral health field has advanced over the past decade – with the emergence of clear medical evidence on effective treatments, the development of transitional care settings, and the growing role for primary care physicians – health plans are offering innovative programs and increasingly flexible benefit options. In addition, we have supported Senators Kennedy and Enzi in their efforts to move forward on this important issue.

On the House side, we have met with the sponsors of H.R. 1424 and have let them know of the work we have been doing to advance this issue and make a positive contribution to developing a workable solution. At the same time, we have raised several areas of concern with H.R. 1424 that we believe have serious implications for costs and quality.

First, this bill does not recognize the ability of health insurance plans to utilize appropriate coordination of care and disease management tools to improve the quality of behavioral health benefits. These innovative tools play an important role in improving patient care and promoting the use of best practices for patients with mental illnesses. Second, the bill applies broadly to all conditions in the Diagnostic and Statistical Manual of Mental Disorders (DSM), which includes religious and spiritual problems, jet lag, caffeine addiction, and other issues outside the field of behavioral health. Recognizing that resources are limited and that costs are a major concern for purchasers, we believe this legislation should focus on meeting the needs of patients who have behavioral health and substance abuse problems. Third, the bill misses the opportunity to achieve consistency across the states on how parity is defined.

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When H.R. 1424 is marked up by the House Education and Labor Committee on July 18, we will be asking committee members to support the Kline substitute amendment. This amendment offers an approach to achieving parity without turning the clock back on advances in quality or imposing excessive costs on employers by:

- recognizing the use of appropriate medical management tools to improve the quality and accessibility of behavioral health benefits;
- focusing on coverage for behavioral health and substance abuse problems, instead of applying broadly to all conditions in the DSM;
- allowing plans to deliver behavioral health benefits through providers who participate in their medical management and quality improvement programs; and
- creating a clear and uniform federal parity standard that applies equally to all health insurance plans and employers.

In our view, adoption of this amendment will help ensure that persons with mental illness have access to affordable, effective treatments. We thank you for considering our perspective on this important issue and would be delighted to provide more information to you or your staff.

Sincerely,

A handwritten signature in black ink, appearing to read "Ka", with a long horizontal stroke extending to the right.

Karen Ignagni  
President and CEO