Advocacy Update

Medicare MFT Coverage Included in House Health Reform Bill; AAMFT Members Asked to Act in Support

Medicare coverage of MFTs is included in Section 1308 of U.S. House of Representatives Democrats’ Health Reform bill, HR 3200. This 1,018-page bill is within the jurisdiction of three House committees, including two with joint jurisdiction over Section 1308: the Ways and Means Committee, which passed this bill on July 17th, and the Energy and Commerce Committee, which passed this bill on July 31. Because all three House committees covering Health Reform have now passed HR 3200 in various forms, the full House will consider this bill in September.

In the Senate, the Health, Education, Labor and Pensions (HELP) Committee has passed a partial, unnumbered Health Reform bill that does not address Medicare issues. This HELP proposal, passed by Democrats on a party-line vote, also addresses many issues such as both government-run and private health plans for citizens who now lack health insurance.

At press time, the Senate committee with Medicare jurisdiction—the Finance Committee—had not issued any formal Health Reform proposal. Instead, three Democratic and three Republican Committee members had been meeting privately for six weeks to develop a plan. It is unclear whether this plan will include Medicare MFT coverage.

Because the House bill (HR 3200) that has passed House committees includes Medicare MFT coverage, and because the Senate has not acted, the MFT outlook is favorable, but AAMFT members are asked to support keeping the House bill’s MFT provision in the final bill by contacting their Members of Congress through the following website http://capwiz.com/aamft/home.

At press time, no Members of Congress or national interest groups had stated opposition to HR 3200’s inclusion of Medicare MFT coverage. However, a number of politically conservative bloggers had attacked this bill, partly because of the erroneous allegation that the bill’s inclusion of Medicare MFT coverage would “put the government between you and your marriage.”

In addition to the House progress on Medicare MFT coverage, the AAMFT is pleased that both the House bill and the Senate HELP bill include provisions that would:

- Increase funds authorized for student loan forgiveness for health professionals (including MFTs) who agree to work in underserved locales for specified periods; and
- Require health plans for the uninsured to have “parity” in their behavioral-health benefits compared to physical-health benefits, although this requirement does not set minimum standards for either behavioral or physical-health benefits, and it does mandate coverage of specific types of practitioners such as MFTs.

The non-MFT provisions of Health Reform proposals are extremely complex, so it is not possible to summarize in here all the issues being debated. However, among the key issues are:

1. Whether to require all citizens to obtain, and all but the smallest employers to help pay for, health coverage meeting minimum benefit standards known respectively as an “individual mandate” and an “employer mandate”;
2. Whether a government-run option for covering uninsured persons should be included in an Exchange (insurance broker clearinghouse) along with private plan options, and if so, whether such a government plan should pay the same rates as those of Medicare and/or require the participation of all Medicare providers;
3. Whether the entity that would be charged with determining the minimum list of specific healthcare benefits should be the federal Health and Human Services Secretary, the Medicare Payment Assessment Commission, or another body, and the process by which this body would actually determine those benefits; and
4. How the cost of covering uninsured Americans should be financed, including the amount of federal financial subsidies to the uninsured, and whether to tax part of the value of workers’ employer-sponsored health plans, which would tend to reduce those plans’ coverages of lesser-used, non-mandated benefits.
In the end, although it is very likely that Congress will pass and the President will sign a “health reform” bill this year, the details of that bill are not at all clear at this time.

AAMFT Minority Fellowship Program
Funding Advances in Congressional Appropriations Bills

Under the Minority Fellowship Program (MFP) of the federal Substance Abuse and Mental Health Services Administration (SAMHSA), the AAMFT administers funds to support 23 MFT doctoral candidates who are focusing on ethnic-minority behavioral health issues in practice and research. Annually, Congress must fund the MFP, and both House and Senate are moving to provide money for the year beginning October 1. Currently, doctoral students in MFT, psychiatry, clinical psychology, clinical social work, and psychiatric nursing are eligible for MFP funding.

The relevant House-passed bill (HR 3293) provides $5,093,000 in Fiscal 2010 for the entire MFP program, which would be $392,000 more than the prior year. However, the House has formally suggested that SAMHSA expand the MFP to make doctoral professional counseling students eligible.

At press time, the Senate Appropriations committee had passed its version of the bill that includes MFP, including $4,701,000 for MFP, the same level as the prior year. Thus, while it appears that MFP funding for MFT students will be funded for at least the same level as the previous year, a final funding amount is not yet set.

Division Advocacy

Several divisions have already achieved their advocacy goals for the year. Below are the results of legislation pertaining to the MFT profession:

**Louisiana:** The Louisiana division was successful in its efforts to pass legislation that amends the MFT licensure law. The division sponsored legislation that specifies some of the coursework necessary for licensure. This legislation has passed the legislature and was signed into law by Governor Bobby Jindal on July 1st. Congratulations to the division on the success of this initiative.

**Missouri:** In the last issue of *Family Therapy Magazine*, we reported that the division was successful in passing legislation through the Missouri legislature that amends the state Freedom of Choice clause in state law pertaining to mental health providers to include LMFTs. Under this legislation, health insurance companies and health maintenance organizations must provide mental health coverage that includes at least two sessions per year with an LMFT. The division now reports that in July, Governor Jay Nixon signed legislation into law that will provide for Freedom of Choice for MFTs. This new legislation is effective on August 28th. Congratulations to the division on the passage of this important legislation.

**North Carolina:** The division was successful in its efforts to pass legislation that creates an MFT associate licensure designation. Like several other states, the North Carolina division decided to pursue legislation that would create a licensure designation for MFT graduates who are in the process of obtaining their supervised clinical experience. On June 11th, the MFT associate licensure bill passed the Senate. On July 22nd, this important legislation passed the House. Governor Bev Perdue signed this legislation into law on July 31st. Congratulations to the division on this important accomplishment.

**Oregon:** This year the division accomplished a long-sought goal with the passage of legislation that will provide Freedom of Choice (vendorship) for MFTs. This important law also specifically states that the marriage and family therapy scope of practice includes the assessment and diagnosis of mental, emotional and behavioral disorders. This legislation also prohibits the practice of marriage and family therapy unless a person is licensed as an MFT or falls under one of the well-known exemptions from obtaining an MFT license.
The division has been involved in a coalition effort with the counseling profession and other professionals to make necessary changes to the MFT and counseling licensure statute. These changes are necessary in order to protect the public from unlicensed individuals practicing marriage and family therapy and counseling, and to increase private payer recognition of MFTs and counselors.

This year, the division and its allies sponsored legislation that would make the necessary changes to the licensure laws. On April 9th, this legislation passed the House. On June 1st, the Senate approved this bill with a minor change, and on June 3rd the House concurred in these changes. On June 25th, Governor Ted Kulongoski signed the legislation into law. The effective date of this bill is January 1, 2010. Congratulations to the division on this significant accomplishment for the profession.

**West Virginia:** Now that the MFT licensure bill is enacted into law, the division is working on efforts to begin implementing the law. Governor Joe Manchin has appointed an MFT representative to the Board of Examiners in Counseling, the board that regulates both MFTs and counselors. In June, the licensure board issued proposed rules for the MFT profession. In July, both the WVAMFT and the AAMFT provided written comments to these rules. Several of the suggestions made by WVAMFT and the AAMFT were incorporated into the board’s final proposed rules for MFTs. These final proposed MFT rules must be approved by the legislature in 2010 before they are effective.