

Issue Brief: Universal Health Insurance



An estimated 46 million Americans lack health care coverage. In response, policy leaders in Washington DC and state capitals are striving to identify creative mechanisms to prioritize scarce health care dollars. Not surprisingly, states continue to serve as the center of innovation and are testing a variety of approaches to address the health care needs of their residents.

Numerous states have proposing a range of universal health insurance models. Thus far, Massachusetts is the only state to enact a comprehensive initiative following successful bi-partisan legislation in 2006. Beginning July 1, 2007, Massachusetts residents will be required to obtain health insurance coverage or face a possible fine. Refer to the chart below to view examples of state initiatives and to learn more about the Massachusetts universal health insurance model.

Why Mental Health Advocates Should Take Notice

While we believe access to health care for every individual is paramount, mental health advocates must arm themselves with information about potential pitfalls in proposed universal health insurance initiatives. Most notably, some proposals may allow the state to approve insurance plans that offer nominal mental health services, create barriers that make it difficult to access services, and attempt to eliminate or minimize consumer protections including mental health parity. In addition to monitoring potential drawbacks, continued efforts must be focused on promoting recovery oriented health care, prevention, mental wellness, and early identification; all of which, are essential to the health and wellness of the community.

Themes of Universal Health Care Models

- Shared financial responsibility by businesses, government and individuals
- Requirements that all citizens obtain health insurance coverage
- State subsidized private health insurance coverage for low-income families
- Partial vouchers to purchase individual coverage
- State mandated “basic” benefit packages
- Wellness programs
- Health savings accounts
- State programs to connect small businesses and individuals to insurance plans

Mental Health America’s Position

Mental Health America supports innovative approaches to increasing access to care and improving the quality of health care delivery. We remain dedicated to promoting mental health services and supports as essential elements in health care and to ensuring that the needs of individuals with mental health conditions are not adversely affected by such proposals. **Individuals and families must have access to a complete continuum of mental health care benefits, including prevention services, early intervention, treatment, and rehabilitation.** For more information, read Mental Health America’s Position Statement on [Access to Health Care](#)

Questions Mental Health Advocates Can Raise with Policy Leaders

Our advocacy voice is imperative to ensure mental health is a fundamental part of coverage for the uninsured. Some key questions to help guide advocacy discussions include:

- Will mental health services be provided at the same level as general health care?
- What types of consumer protections are included in proposals?
- What mental health promotion, early identification and/or prevention services are included in benefit packages?
- How are provider networks defined? Will consumers have direct access to specialty care providers (experts in eating disorders, child/adolescent/family mental health, etc.)?
- What is the scope of mental health services (day treatment, crisis services, etc.)?
- How is the state ensuring oversight of managed care entities or other private sector agents (e.g. connectors, TPAs, PBMs)?
- How are stakeholders included in deliberation of benefit design, implementation, and evaluation?
- Who will define medical necessity?

Mental Health and the Uninsured

- ◆ Uninsured adults are less likely to receive recommended preventive and screening services than insured adults.
- ◆ Compared to insured adults with behavioral health coverage, uninsured adults are less likely to receive mental health services consistent with recommended treatment guidelines.
- ◆ Uninsured adults with severe mental illness are much less likely to use specialty mental health services than publicly insured persons.

Source: [Cover the Uninsured Week 2007](#)

Background

In the spring of 2006, the Massachusetts legislature passed an individual mandate that requires all adults to obtain health insurance by July 2007, or face a fine. The state will provide subsidies for individuals with income below \$60,000 for a family of four. State lawmakers have growing concerns about the affordability of the proposed health insurance plans. Many individuals with incomes low enough to qualify for state-subsidized insurance do not have enough discretionary income to afford monthly premiums that range from \$18-\$106. There are also concerns about the unexpected cost to small employers. Visits the following websites for more information.

MHA/NCCBH Massachusetts Brief: <http://www.nccbh.org/POLICY/NCCBH-NMHAMassachusettsPaper.pdf>

NCSL's reporting of Massachusetts Initiative: www.ncsl.org/programs/health/massoverview.htm

CBPP Brief on MA Modeled Health Insurance "Connectors": <http://www.cbpp.org/1-29-07health.htm>

State Proposals

Below is a sample of states exploring different proposals to expand access to health insurance. For more information also visit the National Conference of State Legislature's website at www.ncsl.org/programs/health/primary.htm.

California	Governor Arnold Schwarzenegger's proposal requires all individuals to have a minimum level of coverage, and provides low-income individuals affordable coverage through expanded access to public programs and financial assistance to help with the cost of coverage through a new state-administered purchasing pool.
Connecticut	The Governor plans to work with managed care providers to develop a low-cost insurance plan for the uninsured. Several House bills call for mandated coverage and the creation of health insurance connectors.
Colorado	A Blue Ribbon Commission for Health Care Reform has been established to provide the General Assembly with recommendations on reform proposals that would expand health insurance coverage for the underinsured and uninsured.
Illinois	Recommendations from the Adequate Health Care Task Force include a requirement that all Illinois residents obtain health care coverage. State subsidized would be available for residents under 400% of the federal poverty level.
Indiana	Governor Daniels' plan for a Healthier Indiana includes a new program that would offer health insurance to some uninsured state residents that includes monthly contributions into a POWER Account intended to encourage preventative care.
Iowa	Multiple proposals have been introduced in the legislature including support for small business insurance pools, insurance incentives for wellness programs, cigarette sales tax increases, and universal health care.
Kansas	Governor Kathleen Sebelius has committed to working with the state's Health Policy Authority, legislators and provider, purchaser, and consumer advisory councils, to develop a plan to achieve universal coverage this year.
Maryland	Initiatives call for creating an "insurance exchange" system that would help residents choose from a range of private insurance plans. The draft plan includes subsidies for low-income workers.
Minnesota	Legislation introduced in the Senate would amended the state constitution stating that every resident of Minnesota has the right to comprehensive health care and that it is the responsibility of the governor and the legislature to implement all necessary legislation to ensure affordable, comprehensive health care.
New Mexico	The governor has established the <i>Insure New Mexico Council</i> to reduce the number of people without health insurance and increase the number of employers offering health insurance to their employees through group purchasing and tax incentives.
New York	Governor Spitzer is promoting the expansion of Child Health Plus to cover children in families up to 400% of federal poverty level and the development of universal health insurance proposals.
Pennsylvania	Prescription for Pennsylvania, a new initiative by Governor Edward Rendell, is focused on increasing health care coverage. A primary component of the initiative includes the creation of Cover All Pennsylvanians (CAP), a new health insurance product that would be delivered by the private market.
Wisconsin	Through the Healthy Wisconsin Council, Governor Doyle has introduced several proposals including merging Family Medicaid, BadgerCare, and Healthy Start, and establishing reinsurance to compensate businesses, individuals, managed care organizations and insurance companies for high cost or catastrophic claims.

In the News

Massachusetts spurs health-care debate

http://today.reuters.com/news/articlenews.aspx?type=inDepthNews&storyID=2007-02-22T213329Z_01_N20168594_RTRUKOC_0_US-HEALTHCARE-

[MASSACHUSETTS.xml&pageNumber=0&imageid=&cap=&sz=13&WTModLoc=NewsArt-C1-ArticlePage3](http://today.reuters.com/news/articlenews.aspx?type=inDepthNews&storyID=2007-02-22T213329Z_01_N20168594_RTRUKOC_0_US-HEALTHCARE-MASSACHUSETTS.xml&pageNumber=0&imageid=&cap=&sz=13&WTModLoc=NewsArt-C1-ArticlePage3)

Massachusetts Panel Proposes Minimum Requirements for Health Plans Under State Insurance Law, Monthly Premiums Could Cost More Than Anticipated

http://www.kaisernetwork.org/daily_reports/rep_index.cfm?hint=3&DR_ID=42392

State Strategies to Expand Health Insurance Coverage: Trends and Lessons for Policymakers

http://www.cmf.org/publications/publications_show.htm?doc_id=461903&#doc461903

Additional Information

Mental Health America continues to expand resources to help advocates address the health care needs of their community. For more information or technical assistance with policy issues in your state, contact Mental Health America's Advocacy Resource Center at 1-800-969-6642 or via email at shcinfo@mentalhealthamerica.net.