The Honorable Frank Pallone Chairman House Energy and Commerce Committee Washington, DC 20515

The Honorable Richie Neal Chairman House Ways and Means Committee Washington, DC 20515

The Honorable Chuck Grassley Chairman Senate Finance committee Washington, DC 20510 The Honorable Greg Walden Ranking Member House Energy and Commerce Committee Washington, DC 20515

The Honorable Kevin Brady Ranking Member House Ways and Means Committee Washington, DC 20515

The Honorable Ron Wyden Ranking Member Senate Finance Committee Washington, DC 20510

Dear Committee Leaders:

The undersigned medical professional organizations write to you with an urgent request that impacts the quality of care that our nation's patients receive. H.R. 884 / S. 2772, the "Medicare Mental Health Access Act," would change the definition of "physician" under the Medicare program to include clinical psychologists. This proposal jeopardizes the safety of patients in the Medicare program and would create silos in the delivery of appropriate mental and physical health care. Moreover, this legislation runs counter to efforts to coordinate and integrate the delivery of care to patients with mental illnesses and co-occurring health conditions. As such, the undersigned organizations strongly urge you to oppose H.R. 884 / S. 2772.

As indicated by the Centers for Medicare and Medicaid Services (CMS) in its *Medicare Policy Benefit Manual*, Medicare defines "physicians" as providers who medically diagnose patients, prescribe and manage medication, and supervise other medical staff. In addition, the Policy Benefit Manual (160.E) specifically states that clinical psychologists must consult with a patient's attending or primary care physician during the course of providing psychological care. However, H.R. 884 / S. 2772 would change these policies and allow clinical psychologists to be regarded as physicians and treat patients without supervision throughout in-patient settings, including partial hospitalization settings.

Expanding the term "<u>physician</u>" to include clinical psychologists under the Medicare Program, thereby removing the team-based care approach and improperly expanding psychologists' scope of practice, would have far reaching and negative impacts on patients seeking psychiatric care. Physicians complete four years of medical school plus three to seven years of residency, including 10,000-16,000 hours of clinical training. Our colleague psychologists are an essential part of a physician led patient care team, however, they lack the requisite medical education, medication management training, and clinical training that is critical in determining differential diagnosis and do not fit the definition of a physician.

Medicare patients in partial hospital programs or in-patient settings with acute and serious mental illness often have multiple complex medical problems typically requiring several different medications to treat

underlying illnesses. Moreover, these patients often have chronic comorbidities ranging from severe depression to diabetes, hypertension, and cardiovascular disease. Psychologists are not trained to treat acute mental illness requiring medication management or co-occurring physical illnesses. Given the complexity of this patient population, it is essential that we retain collaborative guardrails that require psychologists to consult physicians who have the education and training to effectively manage the entire treatment plan, including both physical and mental health services. However, the passage of H.R. 884/ S. 2772 would put patient safety at risk by allowing psychologists to offer services which they are not trained to perform.

Furthermore, H.R. 884 / S. 2772 would not expand access to mental health and substance use disorder services under the Medicare program. In-patient care, including partial hospitalization, requires physician supervision for a reason. Treatment in these settings is for acute mental illness and the overall treatment of physical conditions that requires advanced medical training. Therefore, if psychologists were allowed to manage these patients, they would not receive the full array of medically necessary services they require from an in-patient setting and thus, access to the care that these patients truly need would be curtailed, not expanded. Likewise, this legislation is unnecessary as the Medicare program already recognizes and allows psychologists to provide and bill for the services they are trained to perform and thus, will not actually increase the net number of mental health care providers in the community or the number of services that can be competently performed for patients.

Enacting this legislation would decrease the overall access and quality of care received by Medicare patients by inappropriately allowing psychologists to provide services well beyond their education and training. We urge the Committees to oppose H.R. 884 / S. 2772.

Sincerely,

American Medical Association American Psychiatric Association AMDA - The Society for Post-Acute and Long-Term Medicine American Academy of Dermatology Association American Academy of Emergency Medicine American Academy of Facial Plastic and Reconstructive Surgery American Academy of Family Physicians American Academy of Ophthalmology American Academy of Otolaryngic Allergy American Academy of Otolaryngology- Head and Neck Surgery American Academy of Physical Medicine and Rehabilitation American Association of Child & Adolescent Psychiatry American Association of Clinical Urologists, Inc. American Association of Hip and Knee Surgeons American Association of Neurological Surgeons American Association of Orthopaedic Surgeons American College of Allergy, Asthma and Immunology American College of Emergency Physicians American College of Medical Genetics and Genomics American College of Osteopathic Internists American College of physicians American Medical Women's Association American Orthopaedic Foot & Ankle Society American Osteopathic Association American Society for Clinical Pathology American Society for Dermatologic Surgery Association

American Society of Addiction Medicine American Society of Anesthesiologists American Society of Cataract and Refractive Surgery American Society of Plastic Surgeons Association of Academic Physiatrists College of American Pathologists Congress of Neurological Surgeons National Association of Medical Examiners North American Neuro-Ophthalmology Society Society of American Gastrointestinal Endoscopic Surgeons Society of Interventional Radiologists Spine Intervention Society

> Medical Association of the State of Alabama Alaska State Medical Association Arizona Medical Association Arkansas Medical Society California Medical Association Colorado Medical Society Connecticut State Medical Society Medical Society of Delaware Medical Society of the District of Columbia Florida Medical Association Inc Medical Association of Georgia Hawaii Medical Association Idaho Medical Association Illinois State Medical Society Indiana State Medical Association Iowa Medical Society Kansas Medical Society Kentucky Medical Association Louisiana State Medical Society Maine Medical Association MedChi, The Maryland State Medical Society Massachusetts Medical Society Michigan State Medical Society Minnesota Medical Association Mississippi State Medical Association Missouri State Medical Association Montana Medical Association Nebraska Medical Association Nevada State Medical Association New Hampshire Medical Society Medical Society of New Jersey New Mexico Medical Society Medical Society of the State of New York North Dakota Medical Association Ohio State Medical Association Oklahoma State Medical Association Oregon Medical Association Pennsylvania Medical Society

Rhode Island Medical Society South Carolina Medical Association South Dakota State Medical Association Tennessee Medical Association Utah Medical Association Utah Medical Association Vermont Medical Society Medical Society of Virginia Washington State Medical Association West Virginia State Medical Association Wisconsin Medical Society Wyoming Medical Society