September 2, 2021

The Honorable Martin J. Walsh  
Secretary  
U.S. Department of Labor  
200 Constitution Avenue, NW, Suite S-2524  
Washington, DC 20210

Dear Secretary Walsh:

On behalf of the American Medical Association (AMA) and our physician and medical student members, the AMA greatly appreciates the recent action taken by the U.S. Department of Labor (DOL) to help protect patients with a mental illness. The DOL action fining United Behavioral Healthcare and United Healthcare $13.6 million is indicative of the widespread violations by health insurers of state and federal mental health and substance use disorder parity laws, including the Mental Health Parity and Addiction Equity Act (MHPAEA) of 2008. We urge the DOL, as well as the states, to increase efforts to review plans on a regular basis to ensure they are in compliance with MHPAEA and hold them accountable if they are not.

The AMA is not surprised that your investigation found violations “going back to at least 2013.” United’s failure to comply with the law for patients with mental illness and substance use disorders is hardly limited to this action. As the AMA highlighted in our July 24, 2020 letter to the DOL, there is increasing evidence of widespread, frequent violations by many different insurers—but these violations only come to light because of meaningful oversight and enforcement actions. It is deeply concerning that each time regulators investigate, they find violations. In Delaware a few weeks ago, for example, regulators announced more than $1.3 million in fines for repeated discriminatory violations of mental health and substance use disorder parity requirements. At this point in MHPAEA’s existence, there is no reason for health insurers to continue to violate the law—violations that harm patients with mental illness and invariably cause considerable harm and suffering, including long-term disability and death.

The DOL’s partnership, moreover, with the New York State Attorney General highlights the importance of state-federal cooperation in conducting meaningful parity oversight and enforcement. This is one reason why the AMA continues to strongly advocate to state regulators at the National Association of Insurance Commissioners to make enforcement a high priority. This includes using proven tools to prospectively measure plans’ compliance, as well as undertake new efforts to improve the equitable provision of care for those with a mental illness or substance use disorder. The AMA, American Psychiatric Association, and American Society of Addiction Medicine have advocated, for example, for “enhanced attestation” to require health plans to demonstrate they have completed the comparative analysis required by MHPAEA before violations harm patients.

As part of the AMA’s recommendations to the Office of National Drug Control Policy regarding its 2022 National Drug Control Strategy, the AMA urged the Biden Administration to provide the DOL with the necessary resources and make clear that strong parity oversight and enforcement must be of the highest
priority. The AMA believes that such enforcement is particularly important given that the DOL now can require health insurance carriers to submit a comparative analysis that their mental health and substance use disorder benefits are in parity compared with the plan’s medical/surgical benefits. Health plans’ history of more than a decade of noncompliance must not be tolerated, and the DOL’s leadership in this area is greatly appreciated.

Thank you for your leadership on this issue. If you have any questions, please contact Margaret Garikes, Vice President of Federal Affairs, at Margaret.Garikes@ama-assn.org or 202-789-7409.

Sincerely,

James L. Madara, MD