Medicare for All means Mental Health Care for All

America has long faced a mental health crisis: In 2019, 21% of adults experienced mental illness. Our suicide rate rose by 35% since 1999, and is now the second leading cause of death for young people; 70,000 Americans died from drug overdoses in 2019, a 57% increase from 2013.

But the pandemic devastated our mental health: By July 2020, the percentage of adults experiencing mental illness nearly doubled (41%) from 2019; rates of anxiety were three times higher, rates of depression were nearly four times higher, and suicidal thoughts had more than doubled; More than 81,000 Americans died from drug overdoses, a 21% jump from year before.

Why can't Americans get the mental health care we need?

More than half (57%) of Americans with mental illness — including 90% with substance use disorder and 73% of youth with severe depression — cannot access treatment. While 11% of adults with mental illness are uninsured, a majority have commercial insurance plans but still can’t get needed care. Why?

Commercial insurers discriminate against mental health care:

1) Insurers pay less for mental health care: Plans pay mental health providers 24% less than primary care providers for similar services, causing mental health providers to opt out of insurance “networks.” Only 55% of psychiatrists accept commercial insurance (a 17% drop since 2006), compared to 90% of other physicians. Payment disparities worsen provider shortages: 80% of counties outside core metro areas had no psychiatrists; 61% had no psychologists.

2) Insurers limit our choice of providers: A visit to a mental health provider is six to ten times more likely to be “out-of-network” compared to a primary care provider. Insurance “networks” are so limited that patients are forced to wait weeks or months for appointments, travel long distances, or seek costly care from “out-of-network” providers. Many simply give up.

3) Insurers limit or deny common treatments such as medication, therapy, and hospitalization: The nation’s largest insurer, United Behavioral Health, was recently found guilty of denying 67,000 claims for mental health care based on financial — not medical — reasons.

Medicare for All means better health and lower costs

The evidence is clear: Ignoring mental illness leads to more sickness, more death, and higher costs for everyone.

Medicare for All would eliminate the greed and waste of commercial insurance and cover everybody in the U.S. for all medically necessary care, including prescriptions and services for behavioral and mental health, and substance use disorder. Coverage is lifelong, with no interruptions, copays, or deductibles. And unlike commercial insurance, Medicare for All provides free choice of hospital and provider, including psychiatrists, psychologists, and licensed counselors.

It’s time to invest in America’s mental health — it’s time for Medicare for All.

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