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The time is now to pass Timothy's Law

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New York state again has the opportunity to bring parity to health-insurance coverage for mental illness and substance abuse by passing Timothy's Law. If passed by the Senate, New York would join 35 states and the federal government, which have implemented parity legislation, ending financial discrimination by their health-insurance plans against people suffering from mental illness, substance abuse and eating disorders.

Timothy's Law is named for Timothy O'Clair of Schenectady, who committed suicide in 2001, seven weeks before his 13th birthday. His parents, Tom and Donna O'Clair, had private insurance through Tom's job, but it severely limited coverage for the treatment of Timothy's depression, attention deficit hyperactivity disorder and oppositional defiance disorder. The O'Clairs spent years trying to get appropriate treatment. Out-of-pocket costs were so expensive and doctor visits so limited, they were forced to relinquish custody of Timothy to foster care so that Medicaid would pay for the services the insurance company would not. In addition to the pain of being separated from their child, the O'Clairs had to pay child support to Schenectady County while he was not living with them. This would not have been necessary if their health insurance did not discriminate against mental illness. Timothy is not with his family today and the O'Clairs believe that it is because they couldn't get Timothy the help he needed.

Timothy's Law supporters have been rallying across the state, bringing attention to the lack of insurance parity. Tom O'Clair will be joined by Westchester residents who will tell their own stories about how the lack of coverage has affected their struggles with mental illness and substance abuse on at noon Friday at Renaissance Plaza in White Plains. The second annual Mental Wellness & Parity Walk will be held on Saturday, May 13, at Rockland Lake, sponsored by the Mental Health Association of Rockland County.

People ask: Why give more insurance coverage to the mentally ill and the addicted? Parity is not about asking for more; it's asking to be treated equally. Patients and their families just want to pay the same out-of-pocket costs and have the same yearly and lifetime limits on their health insurance set for heart disease or diabetes.

Opponents say it's too expensive to give equal services. This argument has been proved

wrong. In the Federal Employee Health Benefits Program, serving 8.5 million enrollees, instituted parity mental-health and substance-abuse benefits across 350 insurance products. A recent study in the New England Journal of Medicine found that, if managed care were used, insurance protection could be improved without increasing total costs.

Another argument is that employers would drop coverage or self-insure due to costs. Three years after Vermont implemented its parity law in 1998, only 0.3 percent of the state's employers dropped coverage, 0.1 percent chose to self-insure. Employers can live with parity. Out-of-pocket costs fell from 27 percent to 16 percent of total mental-health spending. Compared to spending for all services, mental health and substance abuse services made up 2.5 percent of total spending after parity compared to 2.3 percent before parity. As for treating substance abuse, studies show that, for every \$1 invested in treatment, we can save \$12 in reduced drug-related crime, criminal justice costs, and theft and health-care costs.

But New York still faces a battle. Timothy's Law has only passed in the Assembly. The Senate has another version of the bill that excludes employers of 50 people or less, eliminating nearly 1 million New Yorkers from coverage and continuing a discriminatory system where parity exists for some but not all. It covers an arbitrary list of 10 "biologically based" mental illnesses and eating disorders. This attempt to factor in and out different "lesser" diagnoses doesn't bode well for people who seek treatment before their illness becomes severe. And it excludes addiction services, an inequity that is particularly unrealistic because mental health and substance abuse issues frequently go hand-in-hand.

New York needs to pass Timothy's Law and end financial discrimination in health insurance against those who suffer with mental illness and addiction issues. The time is now.
