

March 14, 2016

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The Emily Program
The Emily Program Foundation
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Eating Disorder Hope
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American Anorexia and Bulimia Association
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Eating Disorder Coalition of Iowa (EDCI)
The Eating Disorders Center at Rogers
Memorial Hospital
EDN of Maryland
FEAST
FINDINGbalance
Gurze Books
The International Federation of Eating
Disorders Dietitians
McCallum Place Eating Disorder Centers
The National Association of Anorexia
Nervosa and Associated Eating Disorders
PENED/Footsteps for Recovery
Theravive

The Honorable Gene Green
U.S. House of Representatives
2470 Rayburn House Office Bldg.
Washington, DC 20515

The Honorable Doris Matsui
U.S. House of Representatives
2311 Rayburn House Office Bldg.
Washington, DC 20515

The Honorable Joe Kennedy
U.S. House of Representatives
306 Cannon House Office Bldg.
Washington, DC 20515

The Honorable Grace Napolitano
U.S. House of Representatives
1610 Longworth House Office Bldg.
Washington, DC 20515

The Honorable Dave Loebsack
U.S. House of Representatives
1527 Longworth House Office Bldg.
Washington, DC 20515

The Honorable Paul Tonko
U.S. House of Representatives
2463 Rayburn House Office Bldg.
Washington, DC 20515

Dear Representatives Green, Napolitano, Matsui, Tonko, Loebsack, and Kennedy:

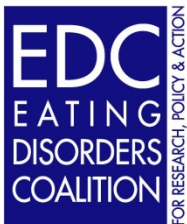
On behalf of the Eating Disorders Coalition, a coalition of eating disorders treatment providers, advocacy organizations, and individuals experiencing eating disorders across the nation, we are writing to laud your introduction of the Comprehensive Behavioral Health Reform and Recovery Act (H.R. 4435).

We hope that the introduction of this far reaching measure will spur bipartisan negotiations with Chairman Fred Upton and Rep. Tim Murphy, resulting in a full House of Representatives Energy and Commerce Committee markup of comprehensive mental health and substance use legislation.

The Eating Disorders Coalition was pleased that H.R. 4435 incorporates provisions from the bipartisan, bicameral Anna Westin Act of 2015 (H.R. 2515/S. 1865), including provisions related to educating health professionals on the early identification and intervention of eating disorders within Section 511 of H.R. 4435.

H.R. 4435 contains an array of provisions that would significantly improve the lives of people experiencing eating disorders. For example in Section 515 and 520, the legislation provides for improvements in mental health intervention and access to treatment in schools as well as within colleges. Studies show that the onset of eating disorders begins on average at the age of 12-13 years old, however, early identification and intervention of these disorders is limited especially within our schools and colleges. Such improvements in the current school and higher education systems will likely lead to increase early identification and intervention of people with all mental illnesses.

Additionally, H.R. 4435 offers a number of provisions focused on enforcement of mental health parity as well as providing additional



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safeguards to ensure consumers are not the target of any discriminatory practices. Eating disorders are unique in that they are often featured as the exemplar story for discriminatory health insurance coverage practices, with a high rate of treatment coverage exclusions and denials. For example, a recent December 17, 2015 *Boston Globe* article on Rep. Joseph Kennedy's Behavioral Health Coverage Transparency Act featured a young women's battle with eating disorders and her families' attempt to get treatment coverage despite the numerous denials and hurdles. The proposed additions to mental health parity enforcement in H.R. 4435 will help to minimize any discriminatory practices against people experiencing eating disorders as well as against those with an array of mental illnesses.

However, we were dismayed to see that further clarification was not made to clarify residential treatment coverage under existing law as laid out in the Anna Westin Act of 2015, H.R. 2515. Given the unique treatment required for eating disorders that significantly differs from other mental illnesses, an explicit clarification is needed to ensure this life-saving treatment is provided when required under existing law.

In closing, we note that H.R. 4435 shares a series of critically significant provisions with the Helping Families in Mental Health Crisis Act (HR 2646) introduced by Rep. Tim Murphy and Rep. Eddie Bernice Johnson. The Eating Disorders Coalition sincerely hopes that introduction of the Comprehensive Behavioral Health Reform and Recovery Act is a signal event on the road toward a bipartisan compromise. The millions of Americans experiencing eating disorders during their lifetime need both behavioral health system reform and expanded access to quality mental health and substance use services.

Sincerely,

Johanna Kandel
Board President
Eating Disorders Coalition