

Questions and Answers about the House and Senate TRICARE bills

1) Does AMHCA's current support of the Senate bill mean AMHCA is working to get Senate bill language to mirror verbatim all requirements in the IOM TRICARE report?

No, AMHCA's primary goal has been to be as general as possible. AMHCA believes the IOM report's overarching recommendation is LMHCs are competent to practice independently. AMHCA is working for all LMHCs' ability to practice independently under TRICARE. AMHCA does not believe a mental health counselor who has achieved licensure should have to fulfill additional criteria to independently see TRICARE beneficiaries.

2) Why is AMHCA calling the Senate bill, S. 3371, a "step forward?"

AMHCA must deal with the political realities. The Senate Armed Services Committee has stated it will not support a TRICARE LMHC bill unless that bill incorporates verbatim all of the IOM's recommendations. Consequently, Senators who introduced S. 3371 knew they lacked the Senate Armed Services Committee's support unless they incorporated the "bullet point" recommendations of the IOM into their TRICARE Mental Health Care Access Act bill. AMHCA and the U.S. Senators need the Senate Armed Services Committee's support if TRICARE LMHC independent practice legislation is to be advanced.

3) Will AMHCA work to make the language in any final bill less restrictive, and thus more inclusive, of the mental health counseling profession?

Yes, AMHCA will work with its legislative coalition partners, legislators, members of the House and Senate Armed Services Committee, and the Department of Defense to advocate for the final bill language that is more inclusive of counselors. As presently worded, H.R. 3839 would permit any person licensed as a mental health counselor to see TRICARE beneficiaries without receiving prior supervision and referral from a physician.

AMHCA understands the political necessity of having a bill introduced in both the Senate and House; without a Senate bill, the House bill does not have the necessary support to pass and be enacted into law. AMHCA wants to get past each house's introduction of TRICARE legislation and then work during the conference process to lobby for each body's final adoption of the more general language in the House TRICARE bill, H.R. 3839, introduced by Representatives Rooney and McMahon.

4) Is AMHCA saying only LMHCs who have completed CACREP-accredited programs and passed the National Clinical Mental Health Counseling Examination (NCMHCE) should be eligible to independently treat TRICARE beneficiaries?

No. AMHCA believes anyone licensed as a mental health counselor should be able to treat TRICARE beneficiaries. Congress asked the Institute of Medicine to do a study on the mental health counseling profession. The IOM report recommended completion of graduate coursework at CACREP-accredited program and passage of the NCMHCE as several criteria for allowing a LMHC to independently see TRICARE beneficiaries. AMHCA will work to strip this language from the bill.

5) Why is AMHCA discouraging me from complaining to legislators about the Senate bill's current language?

It's a huge step forward for AMHCA to have secured the support of three notable Senators of differing political parties. These Senators' support of this legislation will 1) give attention to the LMHC profession and 2) inspire other Senators, from both major parties, to step up to the plate and cosponsor S. 3371, the TRICARE Mental Health Care Access Act. These Senators must know their efforts are appreciated. Any mail that begins, "I want to thank you for sponsoring S. 3371, but" can easily be misconstrued as lack of support for these Senator's bold efforts. AMHCA asks its members to work to secure their legislators' cosponsorship while allowing AMHCA and its legislative coalition partners to do the behind the scenes work of tweaking the existing language.

6) Is AMHCA working for me as a counselor?

Yes, AMHCA's goal is to score a victory for counselors. AMHCA's desired result is the enactment of a bill which permits all LMHCs to see TRICARE beneficiaries independently. AMHCA continues to advocate for this result.

AMHCA is also mindful of the bigger game, and AMHCA realizes legislation is a lengthy process. At the end of the process, AMHCA wants to walk away with something versus nothing. If AMHCA cannot get the language tweaked in S. 3371, and S. 3371 becomes law, counselors are still better off today than they were yesterday when 1) there was no IOM report conveying credibility on the LMHC profession and thus prompting Congress to 2) finally introduce a LMHC independent practice provider bill, and 3) no counselors could practice independently under TRICARE.

AMHCA will strive to get the House language into the National Defense Authorization Act; AMHCA is working for YOU!

7) How can I help AMHCA achieve LMHC independent practice rights under TRICARE?

You can help AMHCA advance LMHC participation in TRICARE by enlisting your legislators' cosponsorship of S. 3371 and H.R. 3839.

If you have any further questions, please contact AMHCA's Director of Legislative Affairs at jclements@amhca.org or via telephone at (800)-326-2642 ext. 105.

Thank you,

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