



Eliminate the 190-Day Lifetime Limit for Psychiatric Hospitals



The Issue: Inpatient Care Demand Greater than Availability

The 60-year-old 190-day Lifetime Limit – the only lifetime limit in Medicare – prevents some patients from receiving medically necessary hospital-level psychiatric services. Experts agree that demand for inpatient care by people with the most difficult-to-treat behavioral health conditions far outstrips supply.

Relative to Medicare’s coverage of physical healthcare services, the 190-day Lifetime Limit violates the *Mental Health Parity and Addiction Equity Act*, enacted nearly 17 years ago. In January 2025, the Medicare Payment Advisory Commission (MedPAC) unanimously voted in favor of eliminating the 190-day lifetime limit.



Background

Patients harmed by the 190-day Lifetime Limit: MedPAC found that the 190-day Lifetime Limit policy is blocking access to care for beneficiaries who are at or near (within 15 days) the 190-day limit. MedPAC characterized this population as “highly vulnerable compared to other beneficiaries.” More specifically, within this affected population:

- 75% are disabled,
- 87% are low-income,
- 37% are non-white, and
- 33% are dual diagnosis.

Most of this defenseless group, 80%, lack alternative healthcare coverage for freestanding inpatient psychiatric care, MedPAC found. Indicating that the limit can result in care in the wrong setting or no care at all.

Further, psychiatric services in freestanding hospitals were more prevalent in 2023 – the sole setting affected by this policy cap – than in psychiatric units or general acute-care hospitals, according to the Commission. This finding amplifies the need for access to this hospital-based care.

Inpatient and residential behavioral healthcare services are evidence-based treatments that have helped millions of Americans reach recovery. These services help patients in times of crisis move through the behavioral healthcare continuum and into long-term community care.



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LEGISLATIVE REQUEST

MedPAC estimates that rescinding the 190-day Lifetime Limit would improve access to care for about 50,000 beneficiaries, at a cost of approximately \$50 million per year. In alignment with MedPAC, Congress should pass the Medicare Inpatient Equity Act, which eliminates Medicare's 190-day Lifetime Limit on care provided in freestanding psychiatric hospitals. Please cosponsor and support bipartisan legislation to accomplish this which will soon be introduced by Reps. Paul Tonko (D-N.Y.) and Bill Huizinga (R-Mich.).