

Testimony before the Insurance and Real Estate Committee March 5, 2019

In support of

H.B. No. 7125 (RAISED) AN ACT CONCERNING PARITY FOR MENTAL HEALTH AND SUBSTANCE USE DISORDER BENEFITS, NONQUANTITATIVE TREATMENT LIMITATIONS, DRUGS PRESCRIBED FOR THE TREATMENT OF SUBSTANCE USE DISORDERS, AND SUBSTANCE ABUSE SERVICES.

Dear Senator Lesser, Representative Scanlon and members of the Insurance and Real Estate Committee:

My name is Loretta Jay and I live in Fairfield, Connecticut. I am the President of the National Alliance on Mental Illness (NAMI) Fairfield affiliate and mental illness has touched my family. NAMI Fairfield is an affiliate of NAMI Connecticut and NAMI (national). We provide peer-led support and educational services to the residents in Fairfield and its surrounding towns and cities. NAMI Fairfield is also a member of the Connecticut Parity Coalition.

On behalf of NAMI Fairfield I ask you to vote in favor of SB 7125 with the substituted language submitted.

Families Suffer

NAMI Fairfield strives to build resilience and improve the lives of those affected by mental illness. A common problem that families tell us about is accessing mental health care. Finding providers who accept their health insurance can be difficult – especially in Fairfield County. Even once identified, there are often long waits for an open appointment. Many are forced to turn to higher cost out-of-network providers – or they don't seek treatment at all.

For those fortunate enough to find an in-network provider, the difficulties aren't over. Families complain frequently that outpatient mental health treatment services are denied. Just yesterday, a parent was exasperated as she told me how her daughter's therapist received push-back from the insurance company, denying coverage. In addition to coping with a young child's serious mental illness, these parents were forced to navigate the additional burden of jumping through their insurance company's extra hoops.

The Milliman's November 2017 report, *Impact of Mental Health Parity and Addiction Equity Act*, found that in Connecticut, individuals utilized out-of-network services for behavioral health care eleven times more than they did for primary care (34% vs 3.3%).¹

Last year NAMI Fairfield presented a [white paper](#)² to this Committee that highlighted many of these concerns. We surveyed mental health providers in southwest Connecticut that exposed some underlying factors. Despite existing state and national parity laws, health insurance companies reimburse providers

at low rates and the process is cumbersome. Complaints of redundancy and “lost” paperwork are frequent. And, insurance companies limit the number of providers that are credentialed on their panels. As a result, fewer in-network providers are available to accept insurance and families suffer. We realized, as outlined in the paper, that many of these problems were overlooked because the payers were not reporting on the services that mattered, and the reporting requirements lacked clarity.

The Connecticut Parity Coalition

NAMI Fairfield joined other mental health advocates in the state to facilitate a clear, unified voice on the issue of parity, and to emphasize its importance. We support:

- Establishing reporting requirements for insurers to demonstrate how they design and apply their managed care tactics, so regulators can determine if there is compliance with the law
- Specifying how state insurance departments can implement parity and then report on their activities
- Eliminating some managed care barriers to medication-assisted treatment (MAT) for substance use disorders. While not purely parity requirements, these provisions can be a vital tool in combating the opioid epidemic.

In closing, **on behalf of NAMI Fairfield, I urge you to vote in favor of SB 7125**, An act concerning parity for mental health and substance use disorder benefits, with the substituted language provided. Doing so will help close the gaps in our current laws, improve access to care for the most vulnerable members in our community, as well as make it more attractive for our community’s highest quality resources to participate as in-network providers in insurance company panels.

Thank you for this opportunity to share NAMI Fairfield’s position on this critical issue. I am available for further discussion and look forward to opportunities to work together to support the mental health needs of our community.

Sincerely,



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¹ Impact of Mental Health Parity and Addiction Equity Act, Milliman White Paper, November 2017. Accessed 1/24/2018, <http://www.milliman.com/uploadedFiles/insight/2017/impact-mental-health-parity-act.pdf>

² NAMI Fairfield white paper, January 30, 2018. Accessed 3/5/2019, http://www.namifairfield.org/wp-content/uploads/2018/03/2018-Legislative-Reccomendations_Final.pdf.