

Testimony of Kirk W. Lowry
Connecticut Legal Rights Project
Before the Program Review and Investigations Committee
HB 6517
March 7, 2013

I am the legal director of the Connecticut Legal Rights Project, a statewide, nonprofit legal services organization serving low-income people with psychiatric disabilities. CLRP supports HB 6517 and the amendment requiring the Insurance Commissioner to report to the General Assembly on the method used by the department to check for compliance with state and federal mental health parity laws and the results of those compliance checks.

Complaints about access to mental health and substance use services have exceeded all other types of complaints handled by the Office of the Healthcare Advocate for the last five years. ("Findings and Recommendations: Access to Mental Health and Substance Use Services," Office of the Healthcare Advocate report, page 3, January 2, 2013.) The problems of lack of capacity in the current mental health system, denials from insurance companies and lack of provider participation are longstanding problems which were reported in 2001 Report of the Governor's Blue Ribbon Commission on Mental Health.

Federal mental health parity laws were effective October 3, 2009. The interim final rules became applicable to group health plans and group health insurance issuers for plan years beginning on or after July 1, 2010. The United States Department of Labor and the IRS generally have enforcement authority over private sector employment-based plans that are subject to ERISA. The United States Department of Health and Human Services has direct enforcement authority over self-funded non-Federal governmental plans. State insurance commissioners have primary authority over issuers in the large group market. (See, U.S. DOL Report to Congress on Compliance of Group Health Plans with the Requirements of MHPAEA of 2008, page 22, January 1, 2012.)

The Affordable Care Act, beginning in 2014, requires that all new small group and individual market plans cover ten Essential Health Benefit categories, including mental health and substance use disorder services, and will require that they be covered at parity with medical and surgical benefits. Therefore, this new requirement for the Commissioner to report on parity is important.