



**Testimony of Victoria Veltri  
State Healthcare Advocate  
Before the Public Health Committee  
In support of SB 417  
March 19, 2014**

Good afternoon, Senator Gerratana, Representative Johnson, Senator Welch, Representative Srinivasan and members of the Public Health Committee. For the record, I am Vicki Veltri, State Healthcare Advocate with the Office Healthcare Advocate ("OHA"). OHA is an independent state agency with a three-fold mission: assuring managed care consumers have access to medically necessary healthcare; educating consumers about their rights and responsibilities under health insurance plans; and, informing you of problems consumers are facing in accessing care and proposing solutions to those problems.

Thank you for the opportunity to comment on SB 417, AAC The Provision of Psychiatric and Substance Use Treatment Services. Reasonable and timely access to appropriate behavioral health and substance use services remains an ongoing issue for Connecticut residents in need, and SB 417 represents an important and practical measure to begin to mitigate this deficit.

By enhancing provider's ability to treat to areas beyond the facility or clinic, we can significantly increase the likelihood that behavioral health providers will offer their services in settings and areas of the state where they can be most easily accessed and where there is a need. Many individuals are reluctant to receive services in behavioral health settings due to stigma or other barriers, but will take advantage of such services in general medical settings.

In addition, many of the most needy in our state lack adequate resources or capability to travel long distances to receive care, a situation that, given the state of our behavioral health network, is often necessary in order to receive treatment. SB 417 reduces the impact of these barriers by allowing providers to go directly into a variety of settings

and communities with the greatest need. This comports with the philosophy that Connecticut has adopted towards reforming our behavioral health systems of care and it facilitates the integration of behavioral health and primary care, which is a central element of the reforms proposed in Connecticut's Health Care Innovation Plan developed under the State Innovation Model Initiative.

I thank you for providing me the opportunity to deliver OHA's testimony today. If you have any questions concerning my testimony, please feel free to contact me at [victoria.veltri@ct.gov](mailto:victoria.veltri@ct.gov).

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