

Testimony in Favor of Raised Bill 417

An Act Concerning the Provision of Psychiatric and Substance use Treatment Services

Jeffrey Walter

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My name is Jeffrey Walter and I am here to urge adoption of Raised Bill 417. I recently retired from Rushford Center, one of Connecticut's most comprehensive community providers of mental health and addiction services, where I served for 34 years as its CEO. I currently work with Rushford's parent health system – Hartford HealthCare- to integrate behavioral health services in the primary care setting. Bill 417 is critical to that effort because it would enable licensed psychiatric and substance use treatment clinics to extend their services to locations nearby their licensed sites, such as physician offices.

Integration of behavioral health in primary care is critically important when one considers that, across the country, primary care physicians provide more than 50% of all behavioral health care. They write two-thirds of all prescriptions for psychiatric medication and they manage psychiatric and substance use conditions for more than 50% of so-called "high utilizer" patients – those with co-occurring chronic medical conditions who represent the largest share of health care expenditures. Despite the fact that PCPs are already deeply involved with both primary care and behavioral health problems that are secondary to other medical conditions, many physicians in primary care express that they often feel ill-equipped to play this role and struggle to gain access to specialty psychiatric resources with which they can consult on difficult cases or to which they can refer patients who need services that cannot be offered in the primary care office. Even when a referral resource exists in the community, there often can be long wait times for an appointment. Another problem is that primary care patients who are referred out often do not follow through with their appointments at the behavioral health center.

The advent of health care reform and the Accountable Care Act creates exciting opportunities for closer cooperation between primary care and behavioral health. Both PCPs and behavioral health organizations in Connecticut are very interested in pursuing strategies to improve delivery of effective, coordinated care on site at primary care offices. The current state licensing statute for adult psychiatric and substance use treatment clinics restricts the delivery of services to the physical location of the licensed facility. This creates a barrier to the clinic extending its resources to provide support and services at a nearby primary care, or other health care, office. The clinic must seek a full license to provide services at another location, even if those services will be offered on a part-time basis.

Bill 417 will enable clinics to deploy clinicians at nearby physician offices, as an extension of the clinic's existing license. Licensure requirements that assure quality of care and patient safety- such as clinical documentation, staff qualifications and experience, etc. - would continue to be met, whether the service was provided on-site or off-site. The flexibility to provide licensed services in so-called "off-site" settings currently exists for children's outpatient mental health clinics licensed by the Department of Children and Families. Bill 417 will extend this valuable flexibility to adult clinics licensed by the Department of Public Health.

I urge you to approve this important bill that will improve care for hundreds of Connecticut residents. Thank you.

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