

**Testimony of the National Alliance on Mental Illness (NAMI) Connecticut  
Before the Insurance and Real Estate Committee  
February 5, 2015**

**IN SUPPORT OF**

**HB 5259 AN ACT EXPANDING HEALTH INSURANCE COVERAGE FOR THE TREATMENT OF MENTAL OR NERVOUS CONDITIONS**

**SB 24 AN ACT ESTABLISHING STANDARDS AND REQUIREMENTS FOR INSURERS' DRUG FORMULARIES, REQUIRING DISCLOSURE OF CERTAIN HEALTH INSURANCE PLAN INFORMATION FOR CONSUMER COMPARISON PURPOSES, AND REQUIRING THE CONNECTICUT HEALTH INSURANCE EXCHANGE AND THE INSURANCE DEPARTMENT TO EVALUATE HEALTH INSURERS' COMPLIANCE WITH THE AFFORDABLE CARE ACT**

Good afternoon Senator Crisco, Representative Megna and members of the Insurance and Real Estate Committee, my name is Daniela Giordano and I am the Public Policy Director with the National Alliance on Mental Illness (NAMI) Connecticut. NAMI Connecticut is the state affiliate of NAMI, the nation's largest grassroots mental health organization dedicated to building better lives for all those affected by mental health conditions. NAMI Connecticut offers support groups, educational programs, and advocacy for improved services, more humane treatment and an end to stigma and economic and social discrimination. We represent individuals who live with mental health conditions and parents and family members of individuals living with mental health issues. I am writing to you today on behalf of NAMI Connecticut to support two bills that would support people dealing with mental health conditions: *H.B. No. 5259 An Act Expanding Health Insurance Coverage For The Treatment Of Mental Or Nervous Conditions* and *S.B. No. 24: An Act Establishing Standards And Requirements For Insurers' Drug Formularies, Requiring Disclosure Of Certain Health Insurance Plan Information For Consumer Comparison Purposes, And Requiring The Connecticut Health Insurers' Compliance With The Affordable Care Act.*

Historically, the purpose of both public and private health insurance has primarily been to help people cover the costs of medically necessary expenses directly related to treating a diagnosed health problem or injury. Over time however, it has been recognized that that this restrictive medically focused model of insurance is crisis-oriented and expensive. It often relies heavily on costly institutional and/or office-based interventions.

In light of these costs and the effectiveness of prevention in dealing with many health issues before there is a crisis and possibly the need for expensive institutional care, publicly-funded health insurance programs gradually began to cover more community-based and non-medical intervention services and supports, including some to address mental health issues. Examples of such proven and cost-effective services include case management services, rehabilitative supports and in-home services. These community based supports and services are currently not being covered by private insurance. This disparity between what is available and covered under public insurance and what is available and covered under private insurance has been referred to as the coverage gap. We support the concept of HB 5259 to start expanding health care coverage for the treatment of mental health

issues for people on private insurance, which would start to address this coverage gap that currently impacts individuals on private insurance on a daily basis. Increased coverage and access to these more comprehensive services and supports in the community would promote long term health outcomes, holistic wellness and reduce more crisis-oriented and costly care such as emergency room visits, hospitalizations and/or institutional care.

Additionally, we support the issues raised in SB 24. By establishing standards and requirements for insurers' drug formularies, requiring disclosure of certain health insurance plan information for consumer comparison purposes and requiring evaluation of health insurers' compliance with the Affordable Care Act, people using medications in their health care regimens would be better informed about what is covered by different health plans and respective out-of-pocket cost considerations. This would allow individuals with health conditions, including mental health conditions, to make more educated decisions in their health care planning, in support of better outcomes for their health and wellness.

Thank you for your time and attention. Please let me know if I can answer any questions for you.

Respectfully,

Daniela Giordano, MSW  
*Public Policy Director*  
NAMI Connecticut