



Office of the
Healthcare
Advocate
STATE OF CONNECTICUT

**Testimony of Victoria Veltri
State Healthcare Advocate
Before the Insurance and Real Estate Committee
In support of HB 6847
March 3, 2015**

Good afternoon, Senator Crisco, Representative Megna, Senator Kelly, Representative Sampson, and members of the Insurance and Real Estate Committee. For the record, I am Victoria Veltri, State Healthcare Advocate with the Office Healthcare Advocate ("OHA"). OHA is an independent state agency with a three-fold mission: assuring consumers have access to medically necessary healthcare; educating consumers about their rights and responsibilities under health plans; and, informing you of problems consumers are facing in accessing care and proposing solutions to those problems.

I appreciate the opportunity to comment on HB 6847, An Act Enhancing Access To Behavioral Health Services and Services For Youths With Autism Spectrum Disorder. This bill represents commonsense initiatives that promote increased access to medically necessary services for the treatment of autism spectrum disorder (ASD), as well as providing enhanced and responsive standards for stakeholders.

Individuals diagnosed with ASD may experience difficulty with communication, social interaction, and certain activities, in addition to problems with sensory processing and the associated impact on their ability to process information and learn. Since our understanding of the nature and treatment of ASD is continually evolving, with ongoing

insights into this diagnosis, implications for and the impact on those people on the spectrum, implementing policies consistent with the promotion of equitable, effective and efficient outcomes for consumers is crucial. Multiple, independent assessments of Connecticut's system of autism services and providers in recent years have highlighted these barriers and promoted discreet policy initiatives to address these gaps. HB 6847 incorporates many of these concepts and embodies the innovative vision that Connecticut has demonstrated in the past.

By redefining what ASD means to be consistent with the American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders, HB 6847 incorporates the most current and dynamic understanding of this condition and ensures that our statutes may remain consistent with the most comprehensive clinical understanding of ASD as it continues to evolve. In addition, expanding coverage for those diagnoses with ASD from those up to age 15 to those up to age 21 incorporates the recommendations that the Department of Children and Families' (DCF) proposed in their Connecticut Children's Behavioral Health Plan that was produced pursuant to P.A. 14-178. This principle is furthered by the augmentation of the Department of Developmental Services' (DDS) integral role in this area, requiring them to identify and produce a list of evidence-based services and interventions that "demonstrate empirical effectiveness for the treatment of autism spectrum disorder." This provides consistency for stakeholders across payers, enabling consumers and providers to effectively develop treatment plans consistent with these practices and in the best interest of each individual patient. HB 6847 provides further benefits for consumers in need of ASD services by expanding the types of providers who may provide autism services, and affirms equitable coverage of such services in compliance with the Mental Health Parity and Addiction Equity Act of 2008.

In addition, the Insurance Department will convene a working group to develop, in consultation with stakeholders including partner agencies and insurers, standards for the effective and uniform collection and reporting of behavioral health utilization and quality measure data from payers. This initiative supports the need for clarity concerning behavioral health utilization trends and other relevant factors and affirms the legislature's

intent when it enacted P.A. 14-58, which required insurers to expand the data it reports to the CID concerning behavioral health utilization and networks. Detail about the frequency, duration, and level of care of member treatment for these conditions enhances our understanding of consumer's needs, as well as gaps in the ability of Connecticut's mental health system to meet those needs. Seeking greater granularity in the utilization review and adverse determination process for these disorders augments our ability to understand the true costs of mental health and substance use treatment, and better design cost effective, complimentary systemic reforms to address these needs, and the convening of the working group under HB 6847 ensures that comprehensive and reasonable standards are ultimately produced.

Thank you very much for your foresight and dedication to this timely and critical issue. If you have any questions concerning my testimony, please feel free to contact me at victoria.veltri@ct.gov.

