

# Testimony before the Insurance and Real Estate Committee

## March 6, 2018

**S.B. No. 384 (RAISED) AN ACT CONCERNING MENTAL HEALTH PARITY, DATA REPORTED BY MANAGED CARE ORGANIZATIONS AND THE ALL-PAYER CLAIMS DATABASE.**

Good afternoon Senators Larsen and Kelly, Representative Scanlon and members of the Insurance and Real Estate Committee.

My name is Thomas Burr, from Glastonbury, CT. I am the Community and Affiliate Relations Manager, and part of the Public Policy Staff at the Connecticut Chapter of the National Alliance on Mental Illness. I am here to testify in strong support of the proposed bill S.B. ~~297~~<sup>384</sup>, specifically as it relates to Mental Health parity.

I am also the parent of an adult child who is in recovery from bipolar disorder, after 8 years' worth of repeated hospitalizations, incarcerations, and homelessness. Currently he is living on his own; he is in recovery, working full time, and doing very well. Some of the best care he received during his illness occurred right here in Hartford, at the Capital Region Mental Health Center. Prior to receiving that care, John was getting care through my previous employer's employee insurance program. Or should I say he was NOT getting care, as it was a constant struggle for John to be approved for adequate amount of time in any in-patient hospital setting, or to find a good, in-network Psychiatrist.

As a Family & Friends Support Group Facilitator for NAMI, I regularly hear stories from family members whose loved ones are in crisis, and who get "the run around" from their insurance providers. While "parity" is the law of the land, and has been for several years, as the Milliman and NAMI reports\* have shown, the reality is far different than what the law stipulates. If you have never been in the situation of trying to arrange for health care for a desperately ill family member, you have NO IDEA how stressful and frustrating this can be! My son was often suicidal, so it is no stretch of the truth to state that his situation was absolutely a matter of life and death. My poor wife would literally spend DAYS making countless phone calls, trying to find an in-network Psychiatrist who was accepting new patients. And our story is far from unique.

You may be surprised to hear that about 1 in 5 youth and adults in the United States will experience mental health conditions in any given year. These conditions can impact quality of life in numerous ways, including relationships with friends and families and participation in one's community, education and work.

The NAMI survey found that, despite the parity law, people lack the same access to mental health providers as they have for other medical providers. More than 1 out of 3 respondents (34%) with private insurance had difficulty finding a mental health therapist, compared to only 13% reporting difficulty finding a medical specialist. And when people did find a mental health provider, many were

forced to go out-of-network and pay high out-of-pocket costs. This happened at much higher rates than when seeking primary or even specialty medical care. Over 1 in 4 people (28%) receiving mental health therapy used an out-of-network therapist, compared to only 7% needing to use an out-of-network medical specialist.

What is even worse, people with mental illness have experienced these inequities for years. The numbers are stark:

- **Connecticut's Outpatient Office Visit Out-of-Network Utilization**
  - **Behavioral Health: 34.2%**
  - **Primary Care: 3.3%**
  - **Specialist Care: 4.3%**
  
- **Connecticut's behavioral health out-of-network utilization is approximately 10 times more than primary care's utilization.**

Please pass proposed bill S.B. 384; and thank you for this opportunity to speak and share my and others lived experience with you about what this would mean to all the individuals and families that are affected by mental health conditions.

**Prevention Works, Treatment is Effective, and People Recover. My son is just one of countless examples of people who have recovered, and who are now leading meaningful lives, working, and paying taxes! But please know that no one can get better if they cannot access proper care.**

I will now gladly answer any questions that you may have.

**Respectfully Submitted,**

**Thomas Burr**

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**\*NOTE: Hard copies of the NAMI "Doctor Is Out" and the Milliman Research reports, along with a 2-page overview summary from NAMI Connecticut were distributed to each committee member 2 weeks ago (Feb. 20<sup>th</sup>, 2018).**