



March 5, 2018

Testimony before the Insurance and Real Estate Committee regarding:

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

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

My name is Suzi Craig and I am a registered voter in West Hartford and I lead advocacy efforts at Mental Health Connecticut (MHC), a non-profit organization providing advocacy, education, and residential and wellness services.

I am here to testify in support of SB384, a bill MHC has been helping to champion with fellow advocates. Connecticut has always been a leader in raising the bar for how to achieve parity in behavioral health care. Connecticut was the first to enact parity laws before federal legislation. Our legislative leaders, particularly Sen. Chris Dodd, led the charge at the national level and ensured that legislation was not limiting or conflicting with state laws.

It's time for Connecticut to rise to the occasion once again.

In December 2017, U.S. Sen. Chris Murphy referenced the Milliman report, ["Addiction and Mental Health v. Analyzing Disparities in Network Use and Provider Reimbursement Rates,"](#) during a Congressional Appropriations hearing to stress the need for better parity implementation. The state-by-state analysis in the Milliman report shows that Connecticut might be exhibiting parity violations.

So, moving forward, how can we know for sure if there are violations? Data, data, and more data.

The laws Connecticut currently has on the books do not allow legislators, consumers, advocates and even providers to have a clear picture of what the reality is for individuals to receive treatment, and how – or if – that happens consistently and effectively. Current laws offer general guidelines on compliance but are not specific enough.

To expand mental health parity requirements, we must require that health carriers report additional data to the Insurance Department, and require that the Connecticut Health Insurance Exchange submit a report to the General Assembly regarding the [All-Payer Claims Database](#), which collects data for commercial-fully funded, state health plan, Medicaid and Medicare.

This bill will improve parity because it will require health insurance companies to:

- Report data on adverse determinations (denied care) and the appeal rates for such denials



- Report details about how many in-network behavioral health providers and facilities are available for their members
- Disclose provider utilization rates
- Identify and explain what factors impede access to treatment of substance abuse
- Require individual health insurance policies to provide coverage for mental health screening at any annual physical exam conducted by a licensed physician
- Expand the CT Insurance Department’s evaluation of how behavioral health services are accessed

Many people in Connecticut continue to have difficulty accessing mental health care. Despite parity laws, many insurance companies reimburse mental health providers at lower rates and the process is cumbersome. There are fewer in-network psychiatrists and therapists, who accept insurance, and as a result many people are forced to turn to higher cost out-of-network providers—or they choose not to seek treatment at all.

As the urgency on increasing mental health services rises across the country, we cannot leave behind those individuals insured by private carriers. Imagine a parent who cannot receive coverage for their child through private pay – chances are high that they will look for public assistance to ensure their child receives the care they need. Wouldn’t any of us if this was the only option?

Seeking no treatment is not an option. Neither is setting the stage for Connecticut to bear the weight of the costs. Please help us improve parity laws in Connecticut which will ultimately result in improved health and wellbeing for all residents.

Thank you for your time and for your service.

Suzi Craig  
Senior Director of Advocacy