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Testimony of NAMI Connecticut (National Alliance on Mental Illness) Before the Insurance and Real Estate Committee March 5, 2019

In support of:

HB 5270—An Act Concerning Peer Support Specialists and Requiring Health Insurance Coverage For Outpatient Peer Support Services Provided for by Certified Peer Support Specialists.

Good afternoon Senator Lesser, Representative Scanlon, and members of the Insurance and Real Estate Committee. Thank you for the opportunity to provide testimony to your committee on the above referenced raised bills. My name is Susan Kelley, and I am statewide Director of Advocacy and Policy for NAMI Connecticut. NAMI Connecticut is the state chapter of national NAMI, the largest grassroots mental health organization dedicated to building better lives for all those affected by mental health conditions. NAMI Connecticut provides mental health support, education, and advocacy for children, families, and adults in the state impacted by mental health conditions. I am here today to testify in support of HB 5270..

We support HB 5270 which would, among other things, require insurance coverage for outpatient peer support services provided by certified peer support specialists. Peer support is an evidence-based mental health practice. The federal Substance Abuse and Mental Health Services Administration (SAMHSA) recognizes that peer support is one of ten components of recovery. Research shows that experiences of peer support specialists can be an important part of effective treatment for mental health and substance abuse conditions. Health providers are increasingly using peer support specialists in their organizations. Based on a recent national survey, 51 percent of health and human service providers were using peer support specialists. ²

To be sustainable, there must be insurance reimbursement for the valuable services provided by peer support specialists. Currently in Connecticut, the Department of Mental Health and Addiction Services (DMHAS) pays for some peer support services through block grant funding,

¹ https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3744060/, "Recovery in the USA: From Politics to Peer Support," by Layasha Ostrow and Neal Adams, Int Rev Psychiatry, 2012, p. 7.

² 2017 Open Minds National Innovation Survey: Innovation Adoption Among Specialty Provider Organizations, https://www.openminds.com/market-intelligence/executive-briefings/does-peer-support-pay/

and Beacon Health Options includes peer support specialists in some of their treatment programs. However, Medicaid in our state does not reimburse for such services.³ Some insurance carriers, such as Blue Cross/Anthem appear to be covering peer support services in connection with addiction recovery, and Aetna, according to its Behavioral Health Quality Management Bulletin, 7/2018, states that it is in the "process of making peer support services available to support members' mental health and substance abuse recovery."⁴

While it appears that some insurers are recognizing the valuable role peer support plays in helping individuals achieve and maintain recovery for mental health (and addiction) conditions and moving towards coverage, the process among insurers is happening slowly. Because states like Connecticut need additional funding streams to provide greater access to peer supports, and given the increasing need for both mental health services and addiction (particularly related to the opioid crisis), coverage needs to happen sooner rather than later.

One stumbling block appears to be whether and how certified peer specialists would be supervised. States that provide Medicaid reimbursement of peer support services often require that such a specialist be supervised by a licensed mental health clinician. ⁵ NAMI Connecticut and other mental health advocacy groups are willing to sit down with insurers to help find solutions and move forward insurance coverage of these evidenced based services that improve health outcomes for individuals with mental health conditions.

In conclusion, NAMI Connecticut supports both HB 7125 (parity) and HB 5270 (peer supports).

Thank you for your attention to my testimony. I would be happy to answer any questions you may have.

Respectfully submitted,

Susan R. Kelley Director of Advocacy and Policy NAMI Connecticut

³ HB 520 would not provide Medicaid coverage for peer support services in Connecticut. However, Connecticut through the Department of Social Services should pursue means to obtain reimbursement of peer support services through waiver mechanisms, such as the Medicaid Rehabilitation Option.

⁴ http://www.aetna.com/healthcare-professionals/assets/documents/bh-quality-management-bulletin-july-2018.pdf, Aetna Behavioral Health Quality Management Bulletin, 7/18, p. 3.

http://www.dhs.pa.gov/parecovery/adultolderadult/peerspecialistservices/index.htm; https://papeersupportcoalition.org/wp-content/uploads/2015/09/Provider_Handbook.pdf