



Testimony of NAMI (National Alliance on Mental Illness) Connecticut  
By Thomas Burr  
Public Health Committee  
March 14, 2022

Senator Daugherty, Representative Steinberg, and members of the Public Health Committee; my name is Thomas Burr, and I am the Community and Affiliates Relations Manager of the Connecticut Chapter of the National Alliance on Mental Illness (NAMI Connecticut). I am testifying today *in support* of the following bills:

**H.B. No. 5275** - AN ACT PROHIBITING CERTAIN HEALTH CARRIERS FROM REQUIRING STEP THERAPY FOR PRESCRIPTION DRUGS USED TO TREAT MENTAL OR BEHAVIORAL HEALTH CONDITIONS.

**H.B. 5396** - AN ACT INCREASING ACCESS TO MENTAL HEALTH MEDICATION.

**S.B. 368** - AN ACT CONCERNING SUICIDE PREVENTION.

**H.B. 5419** - AN ACT CONCERNING THE DEPARTMENT OF MENTAL HEALTH AND ADDICTION SERVICES' RECOMMENDATIONS REGARDING REGIONAL BEHAVIORAL HEALTH ACTION ORGANIZATIONS.

NAMI is dedicated to building better lives for those with lived experience with mental health illness and their families. NAMI Connecticut and its nine local affiliates provide support groups and educational programs for people with mental health conditions and their loved ones and advocates for policies to improve the lives of people affected by mental health conditions.

**Regarding H.B. No. 5275:**

- This bill would limit the use of step therapy, also known as fail first. This is a cost-cutting practice by insurance companies which requires patients to fail on less expensive and less effective drugs, before authorizing the use of a more fitting prescription.
- Step therapy means insurance companies have the power to refuse coverage for the necessary prescription, even when recommended by a prescriber.
- The insurer will not authorize the higher "step" drug until a patient fails on a lower-cost prescription first.
- Because of this, step therapy allows insurers to interfere with the recommendations of licensed medical professionals and patients' needs.
- This creates additional barriers to treatment, and harms access to needed medications.

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- Because of this, patients' health often worsens as the result of being denied access to necessary medications. This is especially true with psychiatric medications, where the wrong prescription can be dangerous to the patient.
- People have unique reactions to psychiatric medications, and it's important that access isn't restricted, and that vulnerable people are not forced onto the wrong medication by their insurance provider.
- Studies<sup>1</sup> have shown that restricting access to Medication has resulted in increased hospitalizations, lengthier hospital stays, and more emergency room visits, including for patients seeking mental health treatment.
- Step-therapy is often harmful to patients and does not result in any net savings to either the state of Connecticut, or any health insurance provider<sup>2</sup>.

In conclusion, it's time to stop this cost-cutting scheme. Insurers should not be experimenting with patients' medications and health. **Therefore, we support the passage of HB 5275.**

#### **Regarding H.B. 5396:**

For too long Connecticut has seemingly been stuck with the standard treatment methods around mental health conditions, with correspondingly lackluster results. We feel that it is far past time to study different, perhaps even unorthodox treatments, that show great promise. **Therefore, we support the passage of HB 5396.**

#### **Regarding S.B. 368:**

The CT Suicide Advisory Board (CTSAB) has been a tremendous asset for Connecticut in the area of suicide prevention for many, many years. NAMI CT is proud to be a member of the CTSAB, actively assisting them in their mission, **and therefore wholeheartedly support the passage of S.B. 368.**

#### **Regarding H.B. 5419:**

The Regional Behavioral Action Organizations were created just a few years ago, when the Regional Action Councils (Substance Use) and Regional Mental Health Boards were combined. NAMI CT as an organization frequently refer people to the RBHAO's when we get calls from people looking for service providers in a particular region. While we appreciate that these 5 regional entities will now be codified in state statute, what would be even better would be a significant infusion of funding, as their work is so vital. It would also be good to codify the role of the Catchment Area Councils (CACs), and the critical feedback function that they have historically performed in their regions. **Therefore, we support the passage of HB 5419, with the proviso that the Legislature seriously consider the above recommendations.**

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Thank you for your time and attention.

Respectfully

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- 1 - <https://ps.psychiatryonline.org/doi/full/10.1176/ps.2009.60.5.601>
- 2 - <https://namict.org/wp-content/uploads/2021/03/Eliminating-use-of-Step-Therapy-for-MH-Rx-03152021.pdf>