



**Connecticut State Medical Society
Connecticut Chapter of the American College of Physicians
Connecticut Chapter of the American College of Surgeons**

**Written testimony submitted to the Mental Health Services Working Group
Public Hearing
Tuesday, January 29
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Senator Harp, Representative Wood and distinguished members of the Mental Health Services Working Group: on behalf of the more than 7,500 physicians and physicians in training of the Connecticut State Medical Society (CSMS), the Connecticut Chapter of the American College of Physicians (ACP) and the Connecticut Chapter of the American College of Surgeons (CTACS), thank you for the opportunity to testify before you and file these written comments today. My name is Dr. John Foley and I am a practicing cardiologist in Norwich and New Haven, and the president of CSMS.

What does a cardiologist have to do with mental health services? I am a physician, a medical doctor. While I fix hearts anatomically, too often what I hear about are broken hearts I can't fix. They belong to parents of children who need mental and behavioral health and chemical dependency services but can't get them.

The stories are painfully similar: Parents watch a young child grow, knowing that things aren't quite right. They hope things will improve, but see the child inexplicably become more isolated and angry. The behaviors that once existed only at home spill over into the playground and school. The school lacks the resources to effectively deal with the problems and the child is pushed to the periphery, further isolated and angrier. The spiral of psychiatric and behavioral problems continues.

Too many times, parents have related to me they are told to wait for their child to make a threat, because then the police can be called and finally the child can be removed from the home. How tragic that the mental and behavioral health system for our children is so fragmented that the supposed "best outcome" is for a child to end up in the criminal justice system.

Earlier this month, the Office of the Healthcare Advocate released its detailed "Findings and Recommendations on Mental Health and Substance Use Services in Connecticut." The physicians of our organizations support its findings, and its primary conclusion bears repeating here:

Connecticut should adopt an overall vision for health that integrates and coordinates access to effective, timely, high quality and affordable mental health and substance use prevention and treatment services into overall healthcare.

As a state, we pride ourselves on offering what we call "parity" in mental and behavioral health coverage. But what does that really mean to someone trying to obtain care? As CSMS has

testified on numerous occasions in this building: Access to insurance coverage does not mean access to care. This is underscored in the mental health arena where workforce shortages are acute.

So families go outside their insurance networks to try to have someone see their children but this is increasingly difficult because of the reductions in payment allowances for out-of-network care by health insurers. Parents, willing to do anything for their children, will put themselves deep into debt using out-of-network care to the tune of thousands of dollars a year, just for access to medical care that they thought their insurance would cover: Mental health parity should mean parity in access and parity in medical care provided, not illusory coverage that gives little or no actual benefit.

Our psychiatrists, social workers and other mental health providers continue to be overworked, underpaid and poorly valued. If we want to bring about real change, we can stop cutting mental health, behavioral health and chemical dependency spending and instead, increase the dollars we spend because they are investments in our children's future. In 2009, CSMS stood together with many other physician groups in opposing the closure of Riverview Hospital, which would have closed an important inpatient facility for children. In addition, we opposed cuts to the Department of Children and Families' Voluntary Services program, which has provided a lifeline to service for thousands of children. The same year, physicians worked to pass the mandate for health insurance coverage for autism spectrum disorders, an area of coverage and medical care that needs increased focus and attention.

Instead of cutting funding for mental health services, let's make sure that every community in Connecticut has behavioral and mental health programs in place so that a child discharged from inpatient treatment has every chance to succeed. When a child succeeds, a family is saved. When a child and family are saved, our communities become safer and are enriched.

In the end, we can choose more violence and incarceration or a healthier community where violence is the exception, not the desensitizing rule. We must move beyond rhetoric to action. The physicians of Connecticut are committed to helping make this happen on behalf of our patients and their families. We are committed to working with you and sharing our expertise in any way that is helpful to bring the mental and behavioral health system to a true coordinated level.