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Representative Susan R. Donovan
Chair
House Health and Human Services Committee
State of Rhode Island General Assembly
Providence, RI 02903
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HouseHealthandHumanServices@rilegislature.gov

## **Testimony Regarding**

## H7876 Insurance Coverage for Mental Illness and Substance Use Disorders

Dear Chairman Donovan and members of the committee:

I am writing on behalf of the Rhode Island Psychological Association in support of *H7876 Insurance Coverage for Mental Illness and Substance Use Disorders*. This bill will enhance protections for consumers to obtain the mental health and substance abuse care they need and support behavioral helathcare professionals' ability to provide that care.

This bill is based on the Kennedy Foundation's Ramstad¹ model parity legislation. It continues the process of improving our legislation and regulations of insurance coverage. This bill addresses the procedures of utilization review to help resolve some longstanding problems behavioral health care professionals have experienced in their efforts to obtain approval from insurance companies to provide medically necessary services. The highlights of this bill include:

- Require insurance companies to use standards of care that are developed by independent organizations "generally recognized by health care providers practicing in relevant clinical specialties such as psychiatry, psychology, clinical sociology, addiction medicine and counseling, and behavioral health treatment." (RIGL 27-38.2-2 (8))
- "An insurer shall not limit benefits or coverage for chronic or pervasive mental health and substance use disorders to short-term or acute treatment at any level of care placement (RIGL 27-38.2-3 (b)).

<sup>&</sup>lt;sup>1</sup> https://www.thekennedyforum.org/press-releases/new-model-state-parity-legislation-named-in-honor-of-former-u-s-rep-jim-ramstad/



- Prohibit insurance companies from modifying or rescinding utilization authorization that a healthcare professional has relied on in good faith to provide services to a client (RIGL 27-38.2-3 (d)).
- Require insurance companies to pay for services of an out-of-network healthcare professional if their network does not include providers according to network requirements (RIGL 27-38.2-3 (e)).

I have been in practice as a clinical psychologist in Rhode Island since 1991. I have personally experienced each of these issues on multiple occasions. To our local insurer's credit over recent years, they have largely removed utilization review requirements for outpatient behavioral health services, but they continue to employ utilization review procedures for higher levels of care. I continue to hear that these problems persist for those patients who require these services and the healthcare professionals who care for these patients.

These new rules will clarify the utilization review procedures for behavioral health services. They will increase patients' access to care when they need it. This bill will remove barriers to care the insurance companies have erected with their utilization review requirements, and with that reduce the uncertainty and stress that patients and their family experience about getting the care they need. Historically utilization review procedures of insurance companies have favored the company's interests and placed unreasonable expectations on patients and professionals. This bill allows insurance companies to employ utilization review processes but makes the process fairer for patients and the healthcare professionals who care for them.

On behalf of our patients and all behavioral health professionals in Rhode Island, please support H7876 Insurance Coverage for Mental Illness and Substance Use Disorders.

Sincerely,

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Director of Professional Affairs

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