

March 19, 2024

Rhode Island State House
House Committee on Health and Human Services

Re: **Support** of H-7876, “Insurance Coverage for Mental Health and Substance Use Disorders”

Dear Chair Donovan and Members of the House Committee on Health and Human Services:

RIPIN thanks the House Committee on Health and Human Services for the opportunity to submit this testimony **in support of** H-7876, which would require that health insurers use generally accepted standards of care (rather than plan-generated medical necessity criteria) in determining whether or not to cover behavioral health care services.

In RIPIN’s work as Rhode Island’s consumer assistance program for health insurance issues, we’ve seen firsthand the difficulties that many Rhode Islanders face in accessing the behavioral health care they need to live their best lives. Health insurers frequently reduce the care they authorize, or deny care altogether, even when an affected patient’s behavioral health provider is recommending care in keeping with best clinical practices. Frequently, that is because health insurers can make their own decisions about the definition of the term “medically necessary” – and their proprietary definition doesn’t need to line up with the existing clinical consensus.

Additionally, even when plan medical necessity criteria as written are based on guidelines seen to be clinically appropriate and based on medical consensus, plans frequently retain significant discretion to apply those guidelines in ways that throttle access to care. They do this through “discretionary clauses,” which allow plans to interpret the contract that underlies an insurance policy in whatever way they choose, allowing terms to take on unintended meanings that undercut consumers’ access to care.

H-7876 would change that, and would require health insurers to use generally accepted standards of care, supported by medical and scientific expertise, to make medical necessity determinations. Furthermore, it would prohibit the use of “discretionary clauses” that allow plans to interpret their medical necessity criteria in unintended ways that harm consumers’ access to care. This legislation (termed the “Ramstad Model”), drafted by behavioral health insurance access experts at The Kennedy Forum, in partnership with the American Psychiatric Association, the American Psychological Association, the National Association for Mental Illness, and more than 30 additional national organizations, would address a significant underlying issue that routinely threatens behavioral health consumers’ ability to access the care that they need. So far, this legislation has been passed in four states – California, Illinois, Georgia, and Oregon – and others are considering establishing the Ramstad Model in their jurisdictions as well.

RIPIN urges the House Committee on Health and Human Services to approve this important legislation and protect health care access and affordability for Rhode Islanders. Thank you for the opportunity to provide these comments. RIPIN is a statewide nonprofit





founded in 1991 by a group of parents of children with special healthcare needs. While RIPIN's roots are in serving children and families with special needs, RIPIN now serves all Rhode Islanders who might benefit from education, advocacy, and peer-to-peer support in navigating healthcare and education systems. RIPIN operates Rhode Island's health insurance consumer assistance program, RIREACH, which helped several thousand Rhode Islanders save more than \$8 million in health care costs since 2018.

Sincerely,

/s/

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