



TALKING POINTS | ACCESS TO CARE

- **Any New Health Proposals:** Should ensure that all persons who need mental health or substance use services, have access to the full range of treatments: psychosocial supports and medications; a full continuum of inpatient and outpatient services; and, include crisis and residential services for all diagnoses, not just a few.
- **Parity:** All MH/SU services must be delivered at parity with other health conditions: they must not cost more, be subject to more treatment limitations, be more limited in scope and duration than similar health services. Different terms and conditions versus health care usually means it's unlawful discrimination.
- **Full Range Of Medications Must Be Available:** Mental health disorders are virtually unique in that there are no "one size fits all" medications. There is wide variability in individual response to a medication.

Two Individuals with depression for example take the same medication. For one individual it may be effective. For the other it doesn't produce reduction in depression symptoms, or side effects make it intolerable. Or, both. However, that second patient may do well on another anti-depressant. For these reasons it's important that the full range of available treatments are available and easily accessible.

- **Early Intervention:** With any health condition the earlier the intervention, the less chance that condition goes on to become serious, debilitating, or even lethal condition. Just as we do for cancer, for mental health, and substance use disorders there must be early screening, assessment, and targeted interventions aimed at reducing disability, promoting health and wellbeing, and returning individuals to function at home, in school, and in the workplace.